

**Article 7. Physical Environment****87686      ALTERATIONS TO EXISTING BUILDINGS OR NEW FACILITIES      87686**

- (a) Prior to construction or alterations, all facilities shall obtain a building permit.
- (b) The licensing agency may require the facility to acquire a local building inspection where the agency determines that a suspected hazard to health and safety exists.

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

**87689      FIRE SAFETY      87689**

All facilities shall be maintained in conformity with the regulations adopted by the State Fire Marshal for the protection of life and property against fire and panic.

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

**87690      RESIDENT AND SUPPORT SERVICES      87690**

- (a) Nothing in these regulations shall prohibit the provision of required services from a centralized service facility serving two or more licensed facilities when approved in writing by the licensing agency.
- (b) Administrative offices or area shall be maintained in facilities having a capacity of sixteen (16) persons or more, which includes space for business, administration and admission activities, a reception area and restroom facilities which may be used by visitors. Appropriate equipment shall be available, including a telephone. A private office shall be maintained for the administrator or other professional staff as appropriate.
- (c) General storage space shall be maintained for equipment and supplies as necessary to ensure that space used to meet other requirements of these regulations is not also used for storage.

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

**87691 MAINTENANCE AND OPERATION****87691**

- (a) The facility shall be clean, safe, sanitary and in good repair at all times. Maintenance shall include provision of maintenance services and procedures for the safety and well-being of residents, employees and visitors.
- (1) Floor surfaces in bath, laundry and kitchen areas shall be maintained in a clean, sanitary, and odorless condition.
- (b) A comfortable temperature for residents shall be maintained at all times.
- (1) The facility shall heat rooms that residents occupy to a minimum of 68 degree F, (20 degrees C).
- (2) The facility shall cool rooms to a comfortable range, between 78 degrees F (26 degrees C) and 85 degrees F (30 degrees C), or in areas of extreme heat to 30 degrees F less than the outside temperature.
- (3) Nothing in this section shall prohibit residents from adjusting individual thermostatic controls.
- (c) All window screens shall be clean and maintained in good repair.
- (d) There shall be lamps or light appropriate for the use of each room and sufficient to ensure the comfort and safety of all persons in the facility.
- (e) Water supplies and plumbing fixtures shall be maintained as follows:
- (1) All community care facilities where water for human consumption is from a private source shall:
- (A) As a condition of initial licensure, provide evidence of an on-site inspection of the source of the water and a bacteriological analysis by a local or state health department or other qualified public or private laboratory which establishes the safety of the water.
- (B) Following licensure, provide a bacteriological analysis of the private water supply as frequently as is necessary to assure the safety of the residents, but no less frequently than the time intervals shown in the table below. However, facilities licensed for six or fewer residents shall be required to have a bacteriological analysis subsequent to initial licensure only if evidence supports the need for such an analysis to protect residents.

## 87691 MAINTENANCE AND OPERATION (Continued)

87691

Licensed Capacity	Analysis Required	Periodic Subsequent Analysis
Under 6	Initial Licensing	Upon evidence of need
7 through 15	Initial Licensing	Annually
16 through 24	Initial Licensing	Every six months
25 or more	Refer to the county health department for compliance with the California Safe Drinking Water Act, Health and Safety Code, Division 5, Part 1, Chapter 7, Water and Water Systems.	

- (2) Faucets used by residents for personal care such as shaving and grooming shall deliver hot water. Hot water temperature controls shall be maintained to automatically regulate the temperature of hot water used by residents to attain a temperature of not less than 105 degree F (41 degree C) and not more than 120 degree F (49 degree C).
  - (3) Taps delivering water at 125 degree F (52 degree C) or above shall be prominently identified by warning signs.
  - (4) Grab bars shall be maintained for each toilet; bathtub and shower used by residents.
  - (5) Non-skid mats or strips shall be used in all bathtubs and showers.
  - (6) Toilet, handwashing and bathing facilities shall be maintained in operating condition. Additional equipment shall be provided in facilities accommodating physically handicapped and/or nonambulatory residents, based on the residents' needs.
- (f) Solid waste shall be stored and disposed of as follows:
- (1) Solid waste shall be stored, located and disposed of in a manner that will not permit the transmission of a communicable disease or of odors, create a nuisance, provide a breeding place or food source for insects or rodents.

## 87691 MAINTENANCE AND OPERATION (Continued)

87691

- (2) Syringes and needles are disposed of in accordance with the California Code of Regulations, Title 8, Section 5193 concerning bloodborne pathogens.

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- (A) California Code of Regulations, Title 8, Sections 5193(d)(3)(B) through (D) are paraphrased in pertinent part:
1. Shearing or breaking of contaminated needles is prohibited.
  2. Contaminated needles shall not be bent or recapped.
  3. Waste containers shall not be opened or emptied manually.
  4. Immediately or as soon as possible after use, contaminated needles shall be placed in appropriate containers that shall be:
    - a. Rigid;
    - b. Puncture resistant;
    - c. Leakproof on the sides and bottom;
    - d. Portable, if portability is necessary to ensure easy access by the user;
    - e. Labeled as BIOHAZARDOUS WASTE or SHARPS WASTE.

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- (3) All containers, except movable bins, used for storage of solid wastes shall have tight-fitting covers on the containers; shall be in good repair; shall have external handles; and shall be leakproof and rodent-proof.
- (4) Movable bins when used for storing or transporting solid wastes from the premises shall have tight-fitting covers on the containers; shall be in good repair; and shall be rodent-proof unless stored in a room or screened enclosure.

**87691 MAINTENANCE AND OPERATION (Continued) 87691**

- (5) Solid waste containers, including movable bins, receiving putrescible waste shall be emptied at least once per week or more often if necessary. Such containers shall be maintained in a clean and sanitary condition.
- (6) Each movable bin shall provide for suitable access and a drainage device to allow complete cleaning at the storage area.
- (g) Facilities which have machines and do their own laundry shall:
  - (1) Have adequate supplies available and equipment maintained in good repair. Space used to sort soiled linen shall be separate from the clean linen storage and handling area. Except for facilities licensed for fifteen (15) residents or less, the space used to do laundry shall not be part of an area used for storage of anything other than clean linens and/or other supplies normally associated with laundry activities. Steam, odors, lint and objectionable laundry noises shall not reach resident or employee areas.
  - (2) Make at least one machine available for use by residents who are able and who desire to do their own personal laundry. This machine shall be maintained in good repair. Equipment in good repair shall be provided to residents who are capable and desire to iron their own clothes.
- (h) Emergency lighting shall be maintained. At a minimum this shall include flashlights, or other battery powered lighting, readily available in appropriate areas accessible to residents and staff. Open-flame lights shall not be used.
- (i) Facilities shall have signal systems which shall meet the following criteria:
  - (1) All facilities licensed for 16 or more and all residential facilities having separate floors or buildings shall have a signal system which shall:
    - (A) Operate from each resident's living unit.
    - (B) Transmit a visual and/or auditory signal to a central staffed location or produce an auditory signal at the living unit loud enough to summon staff.
    - (C) Identify the specific resident living unit.
  - (2) Facilities having more than one wing, floor or building shall be permitted to have a separate system in each, provided each meets the above criteria.

NOTE: Authority cited: Section 1569.30, Health and Safety Code. Reference: Sections 1569.1 and 1569.31, Health and Safety Code; and California Code of Regulations, Title 8, Section 5193.

**87692 STORAGE SPACE****87692**

- (a) Disinfectants, cleaning solutions, poisons, firearms and other items which could pose a danger if readily available to clients shall be stored where inaccessible to clients.
  - (1) Storage areas for poisons, and firearms and other dangerous weapons shall be locked.
  - (2) In lieu of locked storage of firearms, the licensee may use trigger locks or remove the firing pin.
    - (A) Firing pins shall be stored and locked separately from firearms.
  - (3) Ammunition shall be stored and locked separately from firearms.
- (b) Medicines shall be stored as specified in Section 87575(c) and separately from other items specified in (a) above.
- (c) The items specified in (a) above shall not be stored in food storage areas or in storage areas used by or for clients.

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

**Article 8. Incidental Medical Services****87700 HEALTH AND SAFETY PROTECTION****87700**

- (a) Acceptance by the licensee of residents with incidental medical needs shall be in accordance with the conditions specified in this article.
- (b) The provisions of this article shall be applicable and in conjunction with Articles 1 through 7 of this chapter.
- (c) Licensees who employ or permit health care practitioners to provide care to residents shall post a visible notice in a prominent location that states, "Section 680 of the Business and Professions Code requires health care practitioners to disclose their name and license status on a name tag in at least 18-point type while working in this facility."

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

**87701 PROHIBITED HEALTH CONDITIONS****87701**

- (a) In addition to Section 87582(c), persons who require health services or have a health condition including, but not limited to, those specified below shall not be admitted or retained in a residential care facility for the elderly:
  - (1) Stage 3 and 4 pressure sores (dermal ulcers).
  - (2) Gastrostomy care.
  - (3) Naso-gastric tubes
  - (4) Staph infection or other serious infection.
  - (5) Residents who depend on others to perform all activities of daily living for them as set forth in Section 87584.
  - (6) Tracheostomies.

NOTE: Authority cited: Section 1569.30, Health and Safety Code. Reference: Sections 1569.2, 1569.312, and 1569.72, Health and Safety Code.

**87701.1 RESTRICTED HEALTH CONDITIONS****87701.1**

- (a) The licensee may provide care for residents who have any of the following restricted health conditions, or who require any of the following health services:
- (1) Administration of oxygen as specified in Section 87703.
  - (2) Catheter care as specified in Section 87707.
  - (3) Colostomy/ileostomy care as specified in Section 87705.
  - (4) Contractures as specified in Section 87709.
  - (5) Diabetes as specified in Section 87710.
  - (6) Enemas, suppositories, and/or fecal impaction removal as specified in Section 87706.
  - (7) Incontinence of bowel and/or bladder as specified in Section 87708.
  - (8) Injections as specified in Section 87711.
  - (9) Intermittent Positive Pressure Breathing Machine use as specified in Section 87704.
  - (10) Stage 1 and 2 pressure sores (dermal ulcers) as specified in Section 87713(a)(3).
  - (11) Wound care as specified in Section 87713.

NOTE: Authority cited: Section 1569.30, Health and Safety Code. Reference: Sections 1569.2, 1569.312, and 1569.72, Health and Safety Code.



**87701.2 GENERAL REQUIREMENTS FOR RESTRICTED HEALTH CONDITIONS 87701.2**

- (a) Prior to admission of a resident with a restricted health condition, the licensee shall:
- (1) Communicate with all other persons who provide care to that resident to ensure consistency of care for the condition.
  - (2) Ensure that facility staff who will participate in meeting the resident's specialized care needs complete training provided by a licensed professional sufficient to meet those needs.
    - (A) Training shall include hands-on instruction in both general procedures and resident-specific procedures.
    - (B) Training shall be completed prior to the staff providing services to the resident.
- (b) Should the condition of the resident change, all facility staff providing care to that resident shall complete any additional training required to meet the resident's new needs, as determined by the resident's physician or a licensed professional designated by the physician.
- (c) The licensee shall document any significant occurrences that result in changes in the resident's physical, mental and/or functional capabilities and immediately report these changes to the resident's physician and authorized representative.
- (d) A resident's right to receive or reject medical care or services, as specified in Section 87572, Personal Rights, shall not be affected by this section.
- (1) If a resident refuses medical services the licensee shall immediately notify the resident's physician or licensed professional designated by the physician and the resident's authorized representative, if any, and shall participate in developing a plan for meeting the resident's needs.

NOTE: Authority cited: Section 1569.30, Health and Safety Code. Reference: Sections 1569.2, 1569.312, and 1569.72, Health and Safety Code.

**87701.3 HEALTH CONDITION RELOCATION ORDER 87701.3**

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

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**87701.3 HEALTH CONDITION RELOCATION ORDER (Continued)****87701.3**

- (1) The Department shall give written notice to the licensee ordering the relocation of the resident and informing the licensee of the resident's right to an interdisciplinary team review of the relocation order as specified in Section 87701.5. Notice of the health condition relocation order and information about the right to request an interdisciplinary team review of the relocation order shall be given to the resident, by the Department, and sent to the resident's responsible person, if any.
  - (A) If the resident has no responsible person, as defined in Section 87101, the relocation order shall be sent to the representative payee, if any. In such cases, the Department shall also notify the State Long-Term Care Ombudsman of the relocation order by telephone.
  - (B) The notice shall advise that the licensee may request an administrative review of the health condition relocation order, and may request that an exception or waiver be granted or reinstated by the Department to allow retention of the resident in the facility.
- (2) The licensee shall prepare a written relocation plan in any instance where the Department does not suspend the facility license. The plan shall contain all necessary steps to be taken to reduce stress to the resident which may result in transfer trauma, and shall include but not be limited to:
  - (A) A specific date for beginning and a specific date for completion of the process of safely relocating the resident. The time frame for relocation may provide for immediate relocation but shall not exceed 30 days.
  - (B) A specific date when the resident and the resident's responsible person, if any, shall be notified of the need for relocation.
  - (C) A specific date when consultation with the resident's physician, and hospice agency, if any, shall occur to obtain a current medical assessment of the resident's health needs, to determine the appropriate facility type for relocation and to ensure that the resident's health care needs continue to be met at all times during the relocation process.
  - (D) The method by which the licensee shall participate in the identification of an acceptable relocation site with the resident and the responsible person, if any. The licensee shall advise the resident and/or the responsible person that if the resident is to be moved to another residential care facility for the elderly, a determination must be made that the resident's needs can be legally met in the new facility before the move is made. If the resident's needs cannot be legally met in the new facility, the resident must be moved to a facility licensed to provide the necessary care.

## | 87701.3 HEALTH CONDITION RELOCATION ORDER (Continued)

87701.3

- (E) A list of contacts made or to be made by the licensee with community resources, including but not limited to, social workers, family members, Long Term Care Ombudsman, clergy, Multipurpose Senior Services Programs and others as appropriate to ensure that services are provided to the resident before, during and after the move. The need for the move shall be discussed with the resident and the resident assured that support systems will remain in place.
  - (F) Measures to be taken until relocation to protect the resident and/or meet the resident's health and safety needs.
  - (G) An agreement to notify the Department when the relocation has occurred, including the resident's new address, if known.
- (3) The relocation plan shall be submitted in writing to the Department within the time set forth in the LIC 809 (Rev. 5/88) Licensing Report by the Department that the resident requires health services that the facility cannot legally provide.
  - (4) Any changes in the relocation plan shall be submitted in writing to the Department. The Department shall have the authority to approve, disapprove or modify the plan.
  - (5) If relocation of more than one (1) resident is required, a separate plan shall be prepared and submitted in writing for each resident.
  - (6) The licensee shall comply with all terms and conditions of the approved plan. No written or oral contract with any other person shall release the licensee from the responsibility specified in this section or Section 87342.1 for relocating a resident who has a health condition(s) which cannot be cared for in the facility and/or which requires inpatient care in a licensed health facility, nor from taking all necessary actions to reduce stress to the resident.
  - (7) In cases where the Department determines that the resident is in imminent danger because of a health condition(s) which cannot be cared for in the facility or which requires inpatient care in a licensed health facility, the Department shall order the licensee to immediately relocate the resident.
    - (A) No written relocation plan is necessary in cases of immediate relocation.

NOTE: Authority cited: Section 1569.30, Health and Safety Code. Reference: Sections 1250, 1569.1, 1569.2, 1569.31, 1569.312, 1569.54, and 1569.73, Health and Safety Code.

**87701.5 RESIDENT REQUEST FOR REVIEW OF HEALTH CONDITION RELOCATION ORDER 87701.5**

- (a) A resident, or the resident's responsible person, if any, shall be permitted to request a review and determination of the Department's health condition relocation order by the interdisciplinary team.
  - (1) If the resident has no responsible person, as defined in Section 87101, the Long-Term Care Ombudsman and/or the resident's representative payee, if any, shall be permitted to submit a request for review and determination on behalf of the resident.
- (b) The resident, or the resident's responsible person, if any, shall have three (3) working days, from receipt of the relocation order, to submit to the licensee a written, signed and dated request for a review and determination by the interdisciplinary team.
  - (1) For purposes of this section, a working day is any day except Saturday, Sunday or an official state holiday.
- (c) The licensee shall mail or deliver such a request to the Department within two (2) working days of receipt.
  - (1) Failure or refusal to do so may be subject to civil penalties, as provided in Section 87454.
- (d) The Department shall give written notification to the resident, or the resident's responsible person, if any, acknowledging receipt of the resident's request for review of the relocation order. Notification shall occur within three (3) working days of receipt by the Department of the request for review.
- (e) Within ten (10) working days from the date of the resident's review request, the licensee shall submit to the Department the documentation specified in Section 87701.5(g) to complete the resident's review request.
- (f) The licensee shall cooperate with the resident, or the resident's responsible person, if any, in gathering the documentation to complete the resident's review request.
- (g) The documentation to complete the resident's review request shall include, but not be limited to, the following:
  - (1) The reason(s) for disagreeing that the resident has the health condition identified in the relocation order and why the resident believes he/she may legally continue to reside in a residential care facility for the elderly.

**87701.5 RESIDENT REQUEST FOR REVIEW OF HEALTH CONDITION RELOCATION ORDER (Continued) 87701.5**

- (2) A current medical assessment signed by the resident's physician.
    - (A) For purposes of this section, this assessment shall include the information specified in Sections 87702.1(a)(1)(A) through (E).
    - (B) For purposes of this section, "current" shall mean a medical assessment completed on or after the date of the relocation order.
  - (3) An appraisal or reappraisal of the resident as specified in Sections 87583(c)(1) and 87587.
    - (A) The licensee shall be permitted to use the form LIC 603 (Rev. 6/87), Preplacement Appraisal Information, to document the appraisal or reappraisal.
  - (4) A written statement from a placement agency, if any, currently involved with the resident, addressing the relocation order.
- (h) The Department shall inform the resident and/or the resident's responsible person, if any, in writing, of the interdisciplinary team's determination and the reason for that determination not more than 30 days after the resident or his/her responsible person, if any, is notified of the need to relocate.
- (i) The resident's right to a review of a health condition relocation order issued by the Department shall not:
- (1) Nullify a determination by the Department that the resident must be relocated in order to protect the resident's health and safety as specified in Section 87701.1(a).
  - (2) Apply to eviction under Section 87589.
  - (3) Imply a right to a state hearing or any other administrative review beyond that set forth in this section.
  - (4) Apply if the facility license has been temporarily suspended as specified in Section 87342(c).

NOTE: Authority cited: Section 1569.30, Health and Safety Code. Reference: Sections 1569.30 and 1569.54, Health and Safety Code.

**87702 ALLOWABLE HEALTH CONDITIONS AND THE USE OF HOME HEALTH AGENCIES 87702**

- (a) A licensee shall be permitted to accept or retain persons who have a health condition(s) which requires incidental medical services including, but not limited to, the conditions specified in Section 87701.1, Restricted Health Conditions.
- (b) Incidental medical care may be provided to residents through a licensed home health agency provided the following conditions are met:
- (1) The licensee is in substantial compliance with the requirements of Health and Safety Code Sections 1569-1569.87, and of Chapter 8, Division 6, of Title 22, CCR, governing Residential Care Facilities for the Elderly.
  - (2) The licensee provides the supporting care and supervision needed to meet the needs of the resident receiving home health care.
  - (3) The licensee informs the home health agency of any duties the regulations prohibit facility staff from performing, and of any regulations that address the resident's specific condition(s).
  - (4) The licensee and home health agency agree in writing on the responsibilities of the home health agency, and those of the licensee in caring for the resident's medical condition(s).
    - (A) The written agreement shall reflect the services, frequency and duration of care.
    - (B) The written agreement shall include day and evening contact information for the home health agency, and the method of communication between the agency and the facility, which may include verbal contact, electronic mail, or logbook.
    - (C) The written agreement shall be signed by the licensee or licensee representative, and representative of the home health agency, and placed in the resident's file.
- (c) The use of home health agencies to care for a resident's medical condition(s) does not expand the scope of care and supervision that the licensee is required to provide.

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

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**87702.1 GENERAL REQUIREMENTS FOR ALLOWABLE HEALTH CONDITIONS****87702.1**

- (a) Prior to accepting or retaining a resident with an allowable health condition as specified in Section 87703, Oxygen Administration - Gas and Liquid; Section 87704, Intermittent Positive Pressure Breathing (IPPB) Machine; Section 87705, Colostomy/Ileostomy; Section 87709, Contractures; or Section 87713, Healing Wounds; licensees who have, or have had, any of the following within the last two years, shall obtain Department approval:
- (1) Probationary license;
  - (2) Administrative action filed against them;
  - (3) A Non-Compliance Conference as defined in Section 87101(n) that resulted in a corrective plan of action; or
  - (4) A notice of deficiency concerning direct care and supervision of a resident with a health condition specified in Section 87701.1, Restricted Health Conditions, that required correction within 24 hours.
- (b) The licensee shall complete and maintain a current, written record of care for each resident that includes, but is not limited to, the following:
- (1) Documentation from the physician of the following:
    - (A) Stability of the medical condition(s);
    - (B) Medical condition(s) which require incidental medical services;
    - (C) Method of intervention;
    - (D) Resident's ability to perform the procedure; and
    - (E) An appropriately skilled professional shall be identified who will perform the procedure if the resident needs assistance.
  - (2) The names, address and telephone number of vendors, if any, and all appropriately skilled professionals providing services.
  - (3) Emergency contacts.

**87702.1 GENERAL REQUIREMENTS FOR ALLOWABLE HEALTH CONDITIONS (Continued)****87702.1**

- (c) In addition to Section 87565(d), facility staff shall have knowledge and the ability to recognize and respond to problems and shall contact the physician, appropriately skilled professional, and/or vendor as necessary.
- (d) In addition to Section 87587, Reappraisals and Section 87591, Observation of the Resident, the licensee shall monitor the ability of the resident to provide self care for the allowable health condition and document any change in that ability.
- (e) In addition to Sections 87575(a) and 87590(d) the licensee shall ensure that the resident is cared for in accordance with the physician's orders and that the resident's medical needs are met.
- (f) The duty established by this section does not infringe on the right of a resident to receive or reject medical care or services as allowed in Section 87572(a)(16).

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

**87703 OXYGEN ADMINISTRATION - GAS AND LIQUID****87703**

- (a) Except as specified in Section 87702.1(a), the licensee shall be permitted to accept or retain a resident who requires the use of oxygen gas administration under the following circumstances:
    - (1) If the resident is mentally and physically capable of operating the equipment, is able to determine his/her need for oxygen, and is able to administer it him/herself.
- OR
- (2) If intermittent oxygen administration is performed by an appropriately skilled professional.
  - (b) In addition to Section 87702.1(b), the licensee shall be responsible for the following:
    - (1) Monitoring of the resident's ongoing ability to operate the equipment in accordance with the physician's orders.
    - (2) Ensuring that oxygen administration is provided by an appropriately skilled professional should the resident require assistance.

**87703****OXYGEN ADMINISTRATION - GAS AND LIQUID (Continued)****87703**

- (3) Ensuring that the use of oxygen equipment meets the following requirements:
- (A) A report shall be made in writing to the local fire jurisdiction that oxygen is in use at the facility.
  - (B) "No Smoking-Oxygen in Use" signs shall be posted in the appropriate areas.
  - (C) Smoking shall be prohibited where oxygen is in use.
  - (D) All electrical equipment shall be checked for defects which may cause sparks.
  - (E) Oxygen tanks that are not portable shall be secured in a stand or to the wall.
  - (F) Plastic tubing from the nasal canula or mask to the oxygen source shall be long enough to allow the resident movement within his/her room but does not constitute a hazard to the resident or others.
  - (G) Oxygen from a portable source shall be used by residents when they are outside of their rooms.
  - (H) Equipment shall be operable.
  - (I) Equipment shall be removed from the facility when no longer in use by the resident.
- (4) Determining that room size can accommodate equipment in accordance with Section 87577.
- (5) Ensuring that facility staff have knowledge of, and ability in the operation of the oxygen equipment.

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**87703 OXYGEN ADMINISTRATION - GAS AND LIQUID (Continued) 87703**

- (c) The licensee shall be permitted to accept or retain a resident who requires the use of liquid oxygen under the following circumstances:
- (1) The licensee obtains prior approval from the licensing agency.
  - (2) If the resident is mentally and physically capable of operating the equipment, is able to determine his/her need for oxygen, and is able to administer it him/herself.

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

**87704 INTERMITTENT POSITIVE PRESSURE BREATHING (IPPB) MACHINE 87704**

- (a) Except as specified in Section 87702.1(a), the licensee shall be permitted to accept or retain a resident who requires the use of an IPPB machine under the following circumstances:
- (1) If the resident is mentally and physically capable of operating his/her own equipment and is able to determine his/her own need.

OR

- (2) If the device is operated and cared for by an appropriately skilled professional.
- (b) In addition to Section 87702.1(b), the licensee shall be responsible for the following:
- (1) Monitoring of the resident's ongoing ability to operate the equipment in accordance with the physician's orders.
  - (2) Ensuring that the procedure is administered by an appropriately skilled professional should the resident require assistance.

**87704****INTERMITTENT POSITIVE PRESSURE BREATHING  
(IPPB) MACHINE (Continued)****87704**

- (3) Ensuring that the use of the equipment meets the following requirements:
  - (A) Equipment shall be operable.
  - (B) Equipment shall be removed from the facility when no longer in use by the resident.
- (4) Determining that room size can accommodate equipment in accordance with Section 87577(a)(2)(A).
- (5) Ensuring that facility staff have knowledge of and ability in the operation of the equipment.

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

**87705****COLOSTOMY/ILEOSTOMY****87705**

- (a) Except as specified in Section 87702.1(a), the licensee shall be permitted to accept or retain a resident who has a colostomy or ileostomy under the following circumstances:
    - (1) If the resident is mentally and physically capable of providing all routine care for his/her ostomy, and the physician has documented that the ostomy is completely healed.
- OR
- (2) If assistance in the care of the ostomy is provided by an appropriately skilled professional.
- (b) In addition to Section 87702.1(b), the licensees shall be responsible for the following:
    - (1) Ensuring that ostomy care is provided by an appropriately skilled professional.
      - (A) The ostomy bag and adhesive may be changed by facility staff who have been instructed by the professional.

<b>87705</b>	<b>COLOSTOMY/ILEOSTOMY (Continued)</b>	<b>87705</b>
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- (B) There shall be written documentation by an appropriately skilled professional outlining the instruction of the procedures delegated and the names of the facility staff who have been instructed.
- (C) The professional shall review the procedures and techniques no less than twice a month.
- (2) Ensuring that used bags are discarded as specified in Section 87691(f)(1).
- (3) Privacy shall be afforded when ostomy care is provided.

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

<b>87706</b>	<b>ENEMA AND/OR SUPPOSITORY AND FECAL IMPACTION REMOVAL</b>	<b>87706</b>
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- (a) The licensee shall be permitted to accept or retain a resident who requires manual fecal impaction removal, enemas, or use of suppositories under the following circumstances:
  - (1) Self care by the resident.
  - (2) Manual fecal impaction removal, enemas, and/or suppositories shall be permitted if administered according to physician's orders by either the resident or an appropriately skilled professional.
- (b) In addition to Section 87702.1, the licensee shall be responsible for the following:
  - (1) Ensuring that the administration of enemas or suppositories or manual fecal impaction removal is performed by an appropriately skilled professional should the resident require assistance.
  - (2) Privacy shall be afforded when care is being provided.

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

**87707 INDWELLING URINARY CATHETER/CATHETER PROCEDURE****87707**

- (a) The licensee shall be permitted to accept or retain a resident who requires the use of an indwelling catheter under the following circumstances:
- (1) If the resident is physically and mentally capable of caring for all aspects of the condition except insertion and irrigation.
    - (A) Irrigation shall only be performed by an appropriately skilled professional in accordance with the physician's orders.
    - (B) A catheter shall only be inserted and removed by an appropriately skilled professional under physician's orders.
- (b) In addition to Section 87702.1, General Requirements for Allowable Health Conditions, the licensee shall be responsible for the following:
- (1) Ensuring that insertion and irrigation of the catheter shall be performed by an appropriately skilled professional.
  - (2) Ensuring that the bag and tubing are changed by an appropriately skilled professional should the resident require assistance.
    - (A) The bag may be emptied by facility staff who receive instruction from an appropriately skilled professional.
    - (B) There shall be written documentation by an appropriately skilled professional outlining the instruction of the procedures delegated and the names of the facility staff who have been instructed.
    - (C) The licensee shall ensure that the professional reviews staff performance as often as necessary, but at least annually.
  - (3) Ensuring that waste materials shall be disposed of as specified in Section 87691(f)(1).
  - (4) Privacy shall be maintained when care is provided.

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



87708

**MANAGED BOWEL AND BLADDER INCONTINENCE**

87708

- (a) The licensee shall be permitted to accept or retain a resident who has a manageable bowel and/or bladder incontinence condition under the following circumstances:
- (1) The condition can be managed with any of the following:
    - (A) Self care by the resident.
    - (B) A structured bowel and/or bladder retraining program to assist the resident in restoring a normal pattern of continence.
    - (C) A program of scheduled toileting at regular intervals.
    - (D) The use of incontinent care products.
  - (b) In addition to Section 87702.1, General Requirements for Allowable Health Conditions, the licensee shall be responsible for the following:
    - (1) Ensuring that residents who can benefit from scheduled toileting are assisted or reminded to go to the bathroom at regular intervals rather than being diapered.
    - (2) Ensuring that incontinent residents are checked during those periods of time when they are known to be incontinent, including during the night.
    - (3) Ensuring that incontinent residents are kept clean and dry and that the facility remains free of odors from incontinence.
    - (4) Ensuring that bowel and/or bladder programs are designed by an appropriately skilled professional with training and experience in care of elderly persons with bowel and/or bladder dysfunction and development of retraining programs for restoration of normal patterns of continence.
    - (5) Ensuring that the appropriately skilled professional developing the bowel and/or bladder program provide training to facility staff responsible for implementation of the program.

**87708      MANAGED BOWEL AND BLADDER INCONTINENCE (Continued)      87708**

- (6) Ensuring that re-assessment of the resident's condition and the evaluation of the effectiveness of the bowel and/or bladder program be performed by an appropriately skilled professional.
- (7) Ensuring that the condition of the skin exposed to urine and stool is evaluated regularly to ensure that skin breakdown is not occurring.
- (8) Privacy shall be afforded when care is provided.
- (9) Ensuring that fluids are not withheld to control incontinence.
- (10) Ensuring that an incontinent resident is not catheterized to control incontinence for the convenience of the licensee.

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

**87709      CONTRACTURES      87709**

(a) Except as specified in Section 87702.1(a), the licensee shall be permitted to accept or retain a resident who has contractures under the following circumstances:

- (1) If the contractures do not severely affect functional ability and the resident is able to care for the contractures by him/herself.

OR

- (2) If the contractures do not severely affect functional ability and care and/or supervision is provided by an appropriately skilled professional.

<b>87709</b>	<b>CONTRACTURES (Continued)</b>	<b>87709</b>
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- (b) In addition to Section 87702.1(b), the licensee shall be responsible for the following:
- (1) Ensuring that range of motion or other exercise(s), if prescribed by the physician or physical therapist, are performed by an appropriately skilled professional or by facility staff who receive instruction from an appropriately skilled professional.
  - (2) Ensuring that prior to facility staff performing range of motion or other prescribed exercises, there shall be written documentation by the appropriately skilled professional, outlining instruction on the procedures and the names of the facility staff receiving instruction.
  - (3) Ensuring that the professional reviews staff performance as often as necessary, but at least annually.

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

<b>87710</b>	<b>DIABETES</b>	<b>87710</b>
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- (a) The licensee shall be permitted to accept or retain a resident who has diabetes if the resident is able to perform his/her own glucose testing with blood or urine specimens, and is able to administer his/her own medication including medication administered orally or through injection, or has it administered by an appropriately skilled professional.
- (b) In addition to Section 87702.1, General Requirements for Allowable Health Conditions, the licensee shall be responsible for the following:
- (1) Assisting residents with self-administered medication as specified in Section 87575.
  - (2) Ensuring that sufficient amounts of medicines, testing equipment, syringes, needles and other supplies are maintained and stored in the facility as specified in Section 87575(c).
  - (3) Ensuring that syringes and needles are disposed of as specified in Section 87691(f)(2).
  - (4) Providing modified diets as prescribed by a resident's physician as specified in Section 87576(b)(7).

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

**87711 INJECTIONS****87711**

- (a) The licensee shall be permitted to accept or retain a resident who requires intramuscular, subcutaneous, or intradermal injections if the injections are administered by the resident or by an appropriately skilled professional.
- (b) In addition to Section 87702.1, General Requirements for Allowable Health Conditions, the licensees who admit or retain residents who require injections shall be responsible for the following:
- (1) Ensuring that injections are administered by an appropriately skilled professional should the resident require assistance.
  - (2) Ensuring that sufficient amounts of medicines, test equipment, syringes, needles and other supplies are maintained in the facility and are stored as specified in Section 87575(c).
  - (3) Ensuring that syringes and needles are disposed of as specified in Section 87691(f)(2).

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

**87712 PROTECTIVE SUPERVISION****87712**

Renumbered to Section 87724 by Manual Letter No. CCL-95-12, effective 11/16/95.

<b>87713</b>	<b>HEALING WOUNDS</b>	<b>87713</b>
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(a) Except as specified in Section 87702.1(a), the licensee shall be permitted to accept or retain a resident who has a healing wound under the following circumstances:

- (1) When care is performed by or under the supervision of an appropriately skilled professional.
- (2) When the wound is the result of surgical intervention and care is performed as directed by the surgeon.
- (3) Residents with a stage one or two pressure sore (dermal ulcer) must have the condition diagnosed by an appropriately skilled professional.
  - (A) The resident shall receive care for the pressure sore (dermal ulcer) from an appropriately skilled professional.
  - (B) All aspects of care performed by the medical professional and facility staff shall be documented in the resident's file.

(b) A skin tear is not a healing wound.

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

<b>87714</b>	<b>TRANSFER DEPENDENCY</b>	<b>87714</b>
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Repealed by Manual Letter No. CCL-92-10, effective 7/21/92.

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<b>87715</b>	<b>PRN MEDICATIONS</b>	<b>87715</b>
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Repealed by Manual Letter No. CCL-97-14, effective 6/15/97.

<b>87716</b>	<b>HOSPICE CARE FOR TERMINALLY ILL RESIDENTS</b>	<b>87716</b>
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- (a) The licensee shall be permitted to retain terminally ill residents who receive hospice services from a hospice agency in the facility if all of the following conditions are met:
- (1) The licensee has received a hospice care waiver from the department.
  - (2) The licensee remains in substantial compliance with the requirements of this section, with the provisions of the Residential Care Facilities for the Elderly Act (Health and Safety Code Section 1569 et seq.), all other requirements of Chapter 8 of Title 22 of the California Code of Regulations governing Residential Care Facilities for the Elderly, and with all terms and conditions of the waiver.
  - (3) Hospice agency services are contracted for by each terminally ill resident individually, or the resident's Health Care Surrogate Decision Maker if the resident is incapacitated, not by the licensee on behalf of a resident. These hospice agency services must be provided by a hospice agency both licensed by the state and certified by the federal Medicare program.

**87716 HOSPICE CARE FOR TERMINALLY ILL RESIDENTS (Continued) 87716**

- (4) A written hospice care plan is developed for each terminally ill resident by that resident's hospice agency, and agreed to by the licensee and the resident, or the resident's Health Care Surrogate Decision Maker, if any, prior to the initiation of hospice services in the facility for that resident, and all hospice care plans are fully implemented by the licensee and by the hospice(s).
  - (5) The retention of any terminally ill resident in the facility does not represent a threat to the health and safety of any facility resident, or result in a violation of the personal rights of any facility resident.
  - (6) The hospice agency and the resident agree to provide the licensee with all information necessary to allow the licensee to comply with all regulations and to assure that the resident's needs are met.
- (b) A current and complete hospice care plan shall be maintained in the facility for each hospice resident and include the following:
- (1) The name, office address, business telephone number, and 24-hour emergency telephone number of the hospice agency and the resident's physician.
  - (2) A description of the services to be provided in the facility by the hospice agency including but not limited to the type and frequency of services to be provided.
  - (3) Designation of the resident's primary contact person at the hospice agency, and resident's primary and alternate care giver at the facility.
  - (4) A description of the area of licensee's responsibility for implementing the plan including, but not limited to, facility staff duties; record keeping; and communication with the hospice agency, resident's physician, and the resident's responsible person(s), if any. This description shall include the type and frequency of the tasks to be performed by the facility.
    - (A) The plan shall specify all procedures to be implemented by the licensee regarding the storage and handling of medications or other substances, and the maintenance and use of medical supplies, equipment, or appliances.
    - (B) The plan shall specify, by name or job function, the licensed health care professional on the hospice agency staff who will control and supervise the storage and administration of all controlled drugs (Schedule II - V) for the hospice client. Facility staff can assist hospice residents with self-medications without hospice personnel being present.
    - (C) The plan shall neither require nor recommend that the licensee or any facility personnel other than a physician or appropriately skilled professional implement any health care procedure which may legally be provided only by a physician or appropriately skilled professional.



**87716 HOSPICE CARE FOR TERMINALLY ILL RESIDENTS (Continued) 87716**

- (5) A description of all hospice services to be provided or arranged in the facility by persons other than the licensee, facility personnel, or the hospice agency including, but not limited to, clergy and the resident's family members and friends.
- (6) Identification of the training needed, which staff members need this training, and who will provide the training relating to the licensee's responsibilities for implementation of the hospice care plan.
  - (A) The training shall include but not be limited to typical needs of hospice patients, such as turning and incontinence care to prevent skin breakdown, hydration, and infection control.
  - (B) The hospice agency will provide training specific to the current and ongoing needs of the individual resident receiving hospice care and that training must be completed before hospice care to the resident begins.
- (7) Any other information deemed necessary by the Department to ensure that the terminally ill resident's needs for health care, personal care, and supervision are met.
- (c) The licensee shall ensure that the hospice care plan complies with the requirements of this section, with the provisions of the Residential Care Facilities for the Elderly Act (Health and Safety Code Section 1569 et seq.), and all other requirements of Chapter 8 of Title 22 of the California Code of Regulations governing Residential Care Facilities for the Elderly.
- (d) The licensee shall ensure that the hospice care plan is current, accurately matches the services actually being provided, and that the client's care needs are being met at all times.
- (e) The Department may require that the licensee obtain a revision of the hospice care plan if the plan is not fully implemented, or if the Department has determined that revision of the plan is necessary to protect the health and safety of any facility resident.
- (f) The licensee shall maintain a record of all hospice-related training provided to the licensee or facility personnel for a period of three years. This record shall be available for review by the Department.
  - (1) The record of each training session shall specify the names and credentials of the trainer, the persons in attendance, the subject matter covered, and the date and duration of the training session.

**87716 HOSPICE CARE FOR TERMINALLY ILL RESIDENTS (Continued)****87716**

- (g) In addition to the reporting requirements specified in Section 87561, the licensee shall submit a report to the Department when a terminally ill resident's hospice services are interrupted or discontinued for any reason other than the death of the resident, including refusal of hospice care or discharge from hospice. The licensee shall also report any deviation from the resident's hospice care plan, or other incident, which threatens the health and safety of any resident.
- (1) Such reports shall be made by telephone within one working day, and in writing within five working days, and shall specify all of the following:
    - (A) The name, age, sex of each affected resident.
    - (B) The date and nature of the event and explanatory background information leading up to the event.
    - (C) The name and business telephone number of the hospice agency.
    - (D) Actions taken by the licensee and any other parties to resolve the reportable event and to prevent similar occurrences in the future.
- (h) For each terminally ill resident receiving hospice services in the facility, the licensee shall maintain the following in the resident's record:
- (1) The resident's or the resident's Health Care Surrogate Decision Maker's written request for retention and hospice services in the facility, along with any Advance Health Care Directive, Request to Forego Resuscitative Measures, and/or Do-Not-Resuscitate Form executed by the resident or (in certain instances) the resident's Health Care Surrogate Decision Maker.
  - (2) The name, address, telephone number, and 24-hour emergency telephone number of the hospice agency and the resident's Health Care Surrogate Decision Maker, if any, in a manner that is readily available to the resident, the licensee, and facility staff.
  - (3) A copy of the written certification statement of the resident's terminal illness from the medical director of the hospice or the physician member of the hospice interdisciplinary group and the individual's attending physician, if the individual has an attending physician.
  - (4) A copy of the resident's current hospice care plan approved by the licensee, the hospice agency, and the resident, or the resident's Health Care Surrogate Decision Maker if the resident is incapacitated.

**87716 HOSPICE CARE FOR TERMINALLY ILL RESIDENTS (Continued) 87716**

(5) A statement signed by the resident's roommate, if any, indicating his or her acknowledgment that the resident intends to receive hospice care in the facility for the remainder of the resident's life, and the roommate's voluntary agreement to grant access to the shared living space to hospice caregivers, and the resident's support network of family members, friends, clergy, and others.

(A) If the roommate withdraws the agreement verbally or in writing, the licensee shall make alternative arrangements which fully meet the needs of the hospice resident.

(i) Prescription medications no longer needed shall be disposed of in accordance with Section 87575(i).

(j) Approval from the department is not needed for any of the restricted health conditions listed in Section 87701.1, provided the resident is currently receiving hospice care, and the restricted health condition is addressed in the hospice care plan.

(1) In caring for a resident's health condition, facility staff, other than appropriately skilled health professionals, shall not perform any health care procedure that under law may only be performed by an appropriately skilled professional.

(k) The licensee shall maintain a record of dosages of medications that are centrally stored for each resident receiving hospice services in the facility.

(l) Residents receiving hospice care who are bedridden as defined in Section 87582(d), may reside in the facility provided the facility notifies the local fire authority of the estimated length of time the resident will be bedridden. Notification must occur within 48 hours of the individual's bedridden status.

(m) Nothing contained in this section or in Chapter 8 precludes the Department from requiring the relocation of a terminally ill resident whose needs for personal care and supervision or health care are not being met in the facility.

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

**87716.1 FACILITY HOSPICE CARE WAIVER 87716.1**

(a) In order to retain terminally ill residents and permit them to receive care from a hospice agency, the licensee shall have obtained a facility hospice care waiver from the Department. To obtain this waiver the licensee shall submit a written request for a waiver to the Department on behalf of any future residents who may request retention and hospice services in the facility. The request shall include, but not be limited to the following:

(1) Specification of the maximum number of terminally ill residents which the facility wants to have at any one time.

**87716.1 FACILITY HOSPICE CARE WAIVER (Continued)****87716.1**

- (2) A statement by the licensee that they have read, Section 87716, this section and all other requirements within Chapter 8 of Title 22 of the California Code of Regulations governing Residential Care Facilities for the Elderly and that they will comply with these requirements.
  - (3) A statement by the licensee that the terms and conditions of all hospice care plans which are designated as the responsibility of the licensee, or under the control of the licensee, shall be adhered to by the licensee.
  - (4) A written statement from the licensee that hospice services will only be provided to individuals who are residents of the facility, prior to the initiation of hospice services.
- (b) The Department shall deny a waiver request if the licensee is not in substantial compliance with the provisions of the Residential Care Facilities for the Elderly Act (Health and Safety Code Section 1569 et seq.) and the requirements of Chapter 8 of Title 22 of the California Code of Regulations governing Residential Care Facilities for the Elderly.
- (c) No waiver request will be approved unless the facility demonstrates the ability to meet the care and supervision needs of terminally ill residents, and states a willingness to provide additional care staff if required by the hospice care plan.
- (d) If the Department grants a hospice care waiver it shall stipulate terms and conditions of the waiver as necessary to ensure the well-being of terminally ill residents and of all other facility residents, which shall include, but not be limited to, the following requirements:
- (1) A written request shall be signed by each terminally ill resident or the resident's health care surrogate decision maker to allow his or her retention in the facility while receiving hospice services.
    - (A) The request shall be maintained in the resident's record at the facility, as specified in Section 87716(h)(1).
  - (2) The licensee shall notify the Department in writing within five working days of the initiation of hospice care services in the facility for any terminally ill resident. The notice shall include the resident's name and date of admission to the facility and the name and address of the hospice.
- (e) Within 30 days of receipt of an acceptable request for a hospice care waiver, the department shall notify the applicant or licensee, in writing of one of the following:
- (1) The request with substantiating evidence has been received and accepted for consideration.
  - (2) The request is deficient, describing additional information required for the request to be acceptable and a time frame for submitting this information.
    - (A) Failure of the applicant or licensee to comply within the time specified in (2) above shall result in denial of the request.

**87716.1 FACILITY HOSPICE CARE WAIVER (Continued)****87716.1**

- (3) Within 30 days of receipt of an acceptable request for a waiver, the licensing agency shall notify the applicant or licensee, in writing, whether the request has been approved or denied.

NOTE: Authority cited: Section 1569.30, Health and Safety Code. Reference: Sections 1569.1, 1569.2, 1569.10, 1569.11, 1569.15, 1569.30, 1569.31, 1569.312, 1569.54, and 1569.73, Health and Safety Code.

**87720 ADMINISTRATIVE REVIEW - INCIDENTAL MEDICAL SERVICES****87720**

- (a) For purposes of this article, any request for administrative review of a notice of deficiency, notice of penalty, or health condition relocation order shall be submitted by the licensee or his/her designated representative in writing to the Department and, in addition to the requirements of Section 87455, shall include the following:
- (1) The reason(s) the licensee disagrees with the notice or order.
  - (2) Information about the resident as specified in Section 87702.1(a).
  - (3) A current appraisal or reappraisal of the resident as specified in Sections 87583(c)(1) and 87587.
  - (4) A written statement from the resident's placement agency, if any, addressing the notice or order.

NOTE: Authority cited: Sections 1569.30 and 1569.30(a), Health and Safety Code. Reference: Sections 1569.2(a), (e), and (j); 1569.30; 1569.30(b); 1569.312; and 1569.54; Health and Safety Code.

**87721 INCIDENTAL MEDICAL RELATED SERVICES EXCEPTIONS****87721**

- (a) As specified in Section 87116 the licensee may submit a written exception request if he/she agrees that the resident has a prohibited and/or restrictive health condition but believes that the intent of the law can be met through alternative means.
- (b) Written requests shall include, but are not limited to, the following:
- (1) Documentation of the resident's current health condition including updated medical reports, other documentation of the current health, prognosis, and expected duration of condition.
  - (2) The licensee's plan for ensuring that the resident's health related needs can be met by the facility.
  - (3) Plan for minimizing the impact on other residents.

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

**87722 DEPARTMENT REVIEW****87722**

(a) Certain health conditions as specified in Sections 87703 through 87715 may require review by Department staff to determine if the resident will be allowed to remain in the facility. The Department shall inform the licensee that the health condition of the resident requires review and shall specify documentation which the licensee shall submit to the Department.

(1) Documentation shall include, but not be limited to the following:

(A) Physician's assessment(s).

(B) Pre-admission appraisal.

(C) Copies of prescriptions for incidental medical services and/or medical equipment.

(D) Repealed by SDSS Manual Letter No. CCL-89-17, effective 2/13/90.

(2) The documentation shall be submitted to the Department within 10 days.

(b) If the Department determines that the resident has an allowable health condition, the licensee shall provide care and supervision to the resident in accordance with the conditions specified in Sections 87703 through 87716.

NOTE: Authority cited: Section 1569.30, Health and Safety Code. Reference: Sections 1569.1; 1569.2(a), (e), and (j); 1569.30(b); and 1569.312; Health and Safety Code.

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## 87724 CARE OF PERSONS WITH DEMENTIA

87724

- (a) This section applies to licensees who accept or retain residents diagnosed by a physician to have dementia. Mild cognitive impairment, as defined in Section 87101(m), is not considered to be dementia.
- (b) In addition to the requirements as specified in Section 87222, the plan of operation shall address the needs of residents with dementia, including:
- (1) Procedures for notifying the resident's physician, family members and responsible persons who have requested notification, and conservator, if any, when a resident's behavior or condition changes.
  - (2) Safety measures to address behaviors such as wandering, aggressive behavior and ingestion of toxic materials.
- (c) Licensees who accept and retain residents with dementia shall be responsible for ensuring the following:
- (1) The facility has a nonambulatory fire clearance for each room that will be used to accommodate a resident with dementia who is unable to or unlikely to respond either physically or mentally to oral instructions relating to fire or other dangers and to independently take appropriate actions during emergencies or drills.
  - (2) The disaster and mass casualty plan, as required in Section 87223, addresses the safety of residents with dementia.
  - (3) In addition to the on-the-job training requirements in Section 87565(d), staff who provide direct care to residents with dementia shall receive the following training as appropriate for the job assigned and as evidenced by safe and effective job performance:
    - (A) Dementia care including, but not limited to, knowledge about hydration, skin care, communication, therapeutic activities, behavioral challenges, the environment, and assisting with activities of daily living;
    - (B) Recognizing symptoms that may create or aggravate dementia behaviors, including, but not limited to, dehydration, urinary tract infections, and problems with swallowing; and
    - (C) Recognizing the effects of medications commonly used to treat the symptoms of dementia.
  - (4) There is an adequate number of direct care staff to support each resident's physical, social, emotional, safety and health care needs as identified in his/her current appraisal.

**87724 CARE OF PERSONS WITH DEMENTIA (Continued)****87724**

- (A) In addition to requirements specified in Section 87581, Night Supervision, a facility with fewer than 16 residents shall have at least one night staff person awake and on duty if any resident with dementia is determined through a pre-admission appraisal, reappraisal or observation to require awake night supervision.
- (5) Each resident with dementia shall have an annual medical assessment as specified in Section 87569, Medical Assessment, and a reappraisal done at least annually, both of which shall include a reassessment of the resident's dementia care needs.
- (A) When any medical assessment, appraisal, or observation indicates that the resident's dementia care needs have changed, corresponding changes shall be made in the care and supervision provided to that resident.
- (6) Appraisals are conducted on an ongoing basis pursuant to Section 87587, Reappraisals.
- (7) An activity program shall address the needs and limitations of residents with dementia and include large motor activities and perceptual and sensory stimulation.
- (d) In addition to requirements specified in Section 87691, Maintenance and Operation, safety modifications shall include, but not be limited to, inaccessibility of ranges, heaters, wood stoves, inserts, and other heating devices to residents with dementia.
- (e) Swimming pools and other bodies of water shall be fenced and in compliance with state and local building codes.
- (f) The following shall be stored inaccessible to residents with dementia:
- (1) Knives, matches, firearms, tools and other items that could constitute a danger to the resident(s).
- (2) Over-the-counter medication, nutritional supplements or vitamins, alcohol, cigarettes, and toxic substances such as certain plants, gardening supplies, cleaning supplies and disinfectants.
- (g) As required by Section 87572(a)(12), residents with dementia shall be allowed to keep personal grooming and hygiene items in their own possession, unless there is evidence to substantiate that the resident cannot safely manage the items.
- (1) Evidence means documentation from the resident's physician that the resident is at risk if allowed direct access to personal grooming and hygiene items.

**87724 CARE OF PERSONS WITH DEMENTIA (Continued)****87724**

- (h) Outdoor facility space used for resident recreation and leisure shall be completely enclosed by a fence with self-closing latches and gates, or walls, to protect the safety of residents.
- (i) The licensee may use wrist bands or other egress alert devices worn by the resident, with the prior written approval of the resident or conservator, provided that such devices do not violate the resident's rights as specified in Section 87572, Personal Rights.
- (j) The licensee shall have an auditory device or other staff alert feature to monitor exits, if exiting presents a hazard to any resident.
- (k) The following initial and continuing requirements must be met for the licensee to utilize delayed egress devices on exterior doors or perimeter fence gates:
  - (1) The licensee shall notify the licensing agency immediately after determining the date that the device will be installed.
  - (2) The licensee shall ensure that the fire clearance includes approval of delayed egress devices.
  - (3) Fire and earthquake drills shall be conducted at least once every three months on each shift and shall include, at a minimum, all direct care staff.
  - (4) Without violating Section 87572, Personal Rights, facility staff shall attempt to redirect a resident who attempts to leave the facility.
  - (5) Residents who continue to indicate a desire to leave the facility following redirection shall be permitted to do so with staff supervision.
  - (6) Without violating Section 87572, Personal Rights, facility staff shall ensure the continued safety of residents if they wander away from the facility.
  - (7) For each incident in which a resident wanders away from the facility unsupervised, the licensee shall report the incident to the licensing agency, the resident's conservator and/or other responsible person, if any, and to any family member who has requested notification. The report shall be made by telephone no later than the next working day and in writing within seven calendar days.
  - (8) Delayed egress devices shall not substitute for trained staff in sufficient numbers to meet the care and supervision needs of all residents and to escort residents who leave the facility.
  - (9) The licensee shall not accept or retain residents determined by a physician to have a primary diagnosis of a mental disorder unrelated to dementia.

## 87724 CARE OF PERSONS WITH DEMENTIA (Continued)

87724

- (l) The following initial and continuing requirements shall be met for the licensee to lock exterior doors or perimeter fence gates:
- (1) Licensees shall notify the licensing agency of their intention to lock exterior doors and/or perimeter fence gates.
  - (2) The licensee shall ensure that the fire clearance includes approval of locked exterior doors or locked perimeter fence gates.
  - (3) The licensee shall obtain a waiver from Section 87572(a)(6), to prevent residents from leaving the facility.
    - (A) Facility staff shall attempt to redirect any unaccompanied resident(s) leaving the facility.
  - (4) The licensee shall maintain either of the following documents in the resident's record at the facility:
    - (A) The conservator's written consent for admission for each resident who has been conserved under the Probate Code or the Lanterman-Petris-Short Act; or
    - (B) A written statement signed by each non-conserved resident that states the resident understands that the facility has exterior door locks or perimeter fence gate locks and that the resident voluntarily consents to admission.
  - (5) Interior and exterior space shall be available on the facility premises to permit residents with dementia to wander freely and safely.
  - (6) Locked exterior doors or perimeter fences with locked gates shall not substitute for trained staff in sufficient numbers to meet the care and supervision needs of all residents.
  - (7) The licensee shall not accept or retain residents determined by a physician to have a primary diagnosis of a mental disorder unrelated to dementia.
  - (8) Fire and earthquake drills shall be conducted at least once every three months on each shift and shall include, at a minimum, all direct care staff.

NOTE: Authority cited: Sections 1569.30 and 1569.698, Health and Safety Code. Reference: Sections 1569.2, 1569.30, 1569.31, 1569.312, 1569.698, 1569.699, and 13131, Health and Safety Code.

**87725 ADVERTISING DEMENTIA SPECIAL CARE, PROGRAMMING, AND/OR ENVIRONMENTS 87725**

- (a) In addition to the requirements in Section 87724, Care of Persons with Dementia, licensees who advertise, promote, or otherwise hold themselves out as providing special care, programming, and/or environments for residents with dementia or related disorders shall meet the following requirements:
- (1) The licensee shall ensure that direct care staff who provide care to any resident(s) with dementia meet the training requirements in Section 87725.1, including six hours of resident care orientation within the first four weeks of employment and eight hours of in-service training per year on the subject of serving residents with dementia.
    - (A) Direct care staff includes staff used for staff mealtime and break relief.
    - (B) Direct care staff may provide dementia special care to residents in the facility or in designated areas of the facility.
  - (2) In addition to the requirements specified in Sections 87222(a) and 87724(b), the licensee shall include in the plan of operation a brief narrative description of the following facility features:
    - (A) Philosophy, including, but not limited to, program goals/objectives in relation to meeting the needs of residents with dementia.
    - (B) Pre-admission assessment, including the types of assessment tools used to determine residents' dementia care needs and who will participate in the assessment.
    - (C) Admission, including the following items that must be addressed when admitting a resident who requires dementia special care:
      1. Specification of the designated areas in the facility where dementia special care is provided, which may be the entire facility or only parts of it.
      2. Services available specific to residents with dementia.
      3. Procedures in place to ensure that the plan of operation is available for review upon request, as required by Section 87725(a)(3).
    - (D) Assessment(s), including the following as they pertain to residents receiving dementia special care:
      1. Types of assessments used;

**87725 ADVERTISING DEMENTIA SPECIAL CARE, PROGRAMMING, AND/OR ENVIRONMENTS (Continued) 87725**

2. Who will participate in resident assessments and procedures for ensuring the opportunity for resident and family involvement; and
  3. Frequency of assessments.
- (E) Activity program for residents with dementia, including, but not limited to:
1. Types of activities;
    - a. Activities may include cognitive/mental stimulation (e.g., crafts, reading, writing, music, current events, reminiscences, movies); physical activities (e.g., gross and fine motor skills); work activities and life skills; social activities; cultural/religious activities; sensory activities; individual/group activities (e.g., games); pet care; and outdoor activities (e.g., field trips, gardening).
  2. Frequency of activities; and
  3. The process to determine what types of activities shall be planned to encompass residents' needs.
    - a. These needs are based on personal preferences, age, beliefs, culture, values, attention span, and life experiences (e.g., family and friend involvement, favorite pastimes, occupations, and geographic areas lived in and visited).
- (F) Staff qualifications. Describe the experience and education required for prospective direct care staff who will provide dementia special care.
- (G) Staff training. Describe the required training for direct care staff who provide dementia special care. At a minimum, the description shall include information on the time frame for training, as specified in Section 87725.1(a)(2), and the training topics, as specified in Section 87725.1(a)(2)(A).
- (H) Physical environment, including environmental factors that ensure a safe, secure, familiar and consistent environment for residents with dementia.

**87725 ADVERTISING DEMENTIA SPECIAL CARE, PROGRAMMING, AND/OR ENVIRONMENTS (Continued) 87725**

1. Environmental factors that may be considered include: bedroom decor; architectural and safety features (e.g., wide hallways, handrails, delayed egress, secured perimeters); lighting; colors and visual contrasts; types of furniture; signs; noise factors; memory boxes; nourishment and hydration stations; and functional outdoor space and exercise pathways.
- (I) Changes in condition. Procedures to be followed when a resident's condition changes, including, but not limited to, an explanation of:
1. When a new care plan is required;
  2. At what point a physician (if any) is involved in developing a care plan;
  3. Special techniques/programs (if any) used for managing specific types of behavior; and
  4. The conditions that would require a resident to be relocated.
- (J) Success indicators, including procedures to:
1. Ensure an ongoing review of facility programs pertaining to care of residents with dementia;
  2. Make necessary adjustments to better meet residents' needs; and
  3. Assess the program's overall effectiveness/success.
    - a. Examples of areas that may be reviewed include incident reports, staffing levels, input from others, and resident participation in program activities.
- (3) The admission agreement, as specified in Section 87568(e), shall inform the resident and the resident's responsible person, if any, or the conservator, that the facility features, as specified in Section 87725(a)(2), are described in the facility's plan of operation and that the plan of operation is available for review upon request.
- (4) The licensee shall maintain copies of all facility advertisements and marketing/promotional material that indicate the licensee provides special care, programming, and/or environments for residents with dementia or related disorders, and shall maintain the information for a minimum of three years.

**87725 ADVERTISING DEMENTIA SPECIAL CARE, PROGRAMMING, AND/OR ENVIRONMENTS (Continued) 87725**

- (A) This material shall be available to the public upon request.
  - (B) This material shall also be available to the licensing agency to inspect, audit, copy, and remove (if necessary for copying) upon demand during normal business hours as specified in Section 87344(c).
- (b) Licensees who will discontinue advertising, promoting, or otherwise holding themselves out as providing special care, programming, and/or environments for residents with dementia or related disorders shall:
- (1) Provide written notification to the licensing agency and to the resident and the responsible person, if any, or the conservator, at least 30 calendar days prior to discontinuing advertising or promoting dementia special care, programming, and/or environments.
    - (A) The notification shall specify the date that the licensee will cease advertising or promoting dementia special care, programming, and/or environments; and, therefore, shall no longer be required to meet the requirements specified in Section 87725(a) and the training requirements in Section 87725.1.
    - (B) The licensee shall maintain a copy of the written notification in each resident's records.
  - (2) On the date specified in the notification, cease all advertisements, publications, and/or announcements that pertain to dementia special care including, but not limited to, those in magazines, newspapers, consumer reports, telephone directory yellow pages, professional or service directories, Internet, radio and/or television commercials.
    - (A) Long-term advertisements, such as yellow pages, shall be removed at the next renewal date.
  - (3) On the date specified in the notification, remove all written references that indicate that the licensee provides dementia special care, programming, and/or environments from all promotional material, advertisements, and/or printed material, including admission agreements and the plan of operation.

NOTE: Authority cited: Section 1569.30, Health and Safety Code. Reference: Sections 1569.15, 1569.22, 1569.31, 1569.312, 1569.33, 1569.355, 1569.62, 1569.625, 1569.626, and 1569.627, Health and Safety Code.



**87725.1 TRAINING REQUIREMENTS IF ADVERTISING DEMENTIA SPECIAL CARE, PROGRAMMING, AND/OR ENVIRONMENTS 87725.1**

- (a) Licensees who advertise, promote, or otherwise hold themselves out as providing special care, programming, and/or environments for residents with dementia or related disorders shall ensure that all direct care staff, described in Section 87725(a)(1), who provide care to residents with dementia, meet the following training requirements:
- (1) Direct care staff shall complete six hours of orientation specific to the care of residents with dementia within the first four weeks of working in the facility.
    - (A) This orientation shall be repeated if either of the following occur:
      1. An employee returns to work for the same licensee after a break in service of more than 180 consecutive calendar days; or
      2. An employee goes to work for another licensee to provide dementia special care.
    - (B) This orientation shall be separate from other training and be exclusively on the care of residents with dementia.
    - (C) Various methods of instruction may be used, including, but not limited to, presenters knowledgeable about dementia; video instruction tapes; interactive material; books; and/or other materials approved by organizations or individuals specializing in dementia as specified in Section 87725.1(a)(2)(C).
      1. Instruction may include up to two hours of mentoring and hands-on training from direct care staff who have completed six hours of orientation specific to the care of residents with dementia and eight hours of in-service training on the subject of serving residents with dementia as specified in Sections 87725.1(a)(1) and (2).
    - (D) The licensee shall maintain in the personnel records documentation on the orientation that includes the date(s), the hours provided, the names of staff in attendance, and the method(s) of instruction used.
  - (2) Direct care staff shall complete at least eight hours of in-service training on the subject of serving residents with dementia within 12 months of working in the facility and in each succeeding 12-month period. Direct care staff hired as of July 3, 2004 shall complete the eight hours of in-service training within 12 months of that date and in each succeeding 12-month period.

**87725.1 TRAINING REQUIREMENTS IF ADVERTISING DEMENTIA  
SPECIAL CARE, PROGRAMMING, AND/OR ENVIRONMENTS**  
(Continued)**87725.1**

- (A) A minimum of two of the following training topics shall be covered annually, and all topics shall be covered within a three-year period:
1. Effects of medications on the behavior of residents with dementia;
  2. Common problems, such as wandering, aggression, and inappropriate sexual behavior;
  3. Positive therapeutic interventions and activities such as exercise, sensory stimulation, activities of daily living, and social, recreational and rehabilitative activities.
  4. Communication skills (resident/staff relations);
  5. Promoting resident dignity, independence, individuality, privacy and choice; and
  6. End of life issues, including hospice.
- (B) Training may be provided at the facility or offsite and may include a combination of observation and practical application.
- (C) The training shall be developed by, or in consultation with, an individual(s) or organization(s) with expertise in dementia care and with knowledge on the training topic areas specified in Section 87725.1(a)(2)(A).
1. Examples of organizations that specialize in dementia care include, but are not limited to: the Alzheimer's Association, Alzheimer's Disease Diagnostic and Treatment Centers affiliated with the University of California, Family Caregiver Alliance and Caregiver Resource Centers, American Society on Aging, colleges and universities, and individuals with educational and professional qualifications specific to dementia.
    - a. If the consultant and trainer are the same person(s), the documentation requirements specified in Sections 87725.1(a)(2)(D) and (F) shall both be met.
- (D) The licensee shall maintain the following documentation for the consultant(s) described in Section 87725.1(a)(2)(C):

**87725.1 TRAINING REQUIREMENTS IF ADVERTISING DEMENTIA SPECIAL CARE, PROGRAMMING, AND/OR ENVIRONMENTS** **87725.1**  
(Continued)

1. Name, address, and telephone number;
2. Date(s) when consultation was provided;
3. Organization affiliation (if any), as specified in Section 87725.1(a)(2)(C), and/or educational and professional qualifications specific to dementia; and
4. The training topics, specified in Section 87725.1(a)(2)(A), for which consultation was provided.

(E) All trainers shall meet the following education and experience requirements:

1. A minimum of eight hours of certifiable continuing education or three semester units, or the equivalent, from an accredited educational institution, on topics relevant to caring for individuals with dementia.
  - a. Examples of acceptable instruction include, but are not limited to, classes in aging, gerontology, geriatrics, and/or psychosocial needs of the elderly.
2. One of the following experience requirements:
  - a. Current employment as a consultant with expertise in dementia care, as specified in Section 87725.1(a)(2)(C).
  - b. Two years full-time experience, or the equivalent, within the last four years, as an RCFE administrator or as a direct care provider for individuals with dementia.

(F) The licensee shall maintain the following documentation on the trainer(s) described in Section 87725.1(a)(2)(E):

1. Name, address, and telephone number;
2. Topics/subject matter taught;
3. Dates/hours of training provided;

**87725.1 TRAINING REQUIREMENTS IF ADVERTISING DEMENTIA  
SPECIAL CARE, PROGRAMMING, AND/OR ENVIRONMENTS**  
(Continued)**87725.1**

4. Notation that indicates which of the criteria for experience the trainer meets, as specified in Section 87725.1(a)(2)(E)2., and maintain verification of qualifying criteria; and
  5. Proof of completion of the educational requirements, as specified in Section 87725.1(a)(2)(E)1., which may include the following:
    - a. 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.
    - b. 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.
- (G) The documentation required in Sections 87725.1(a)(2)(D) and (F) shall be retained for at least three years following the date consultation services/training were provided.
1. This documentation shall be available to the licensing agency to inspect, audit, copy, and remove (if necessary for copying) upon demand during normal business hours as specified in Section 87344(c).
- (H) The licensee shall maintain in the personnel records documentation on the in-service training required in Section 87725.1(a)(2) for direct care staff and include the training topic(s) covered, as required in Section 87725.1(a)(2)(A).

NOTE: Authority cited: Section 1569.30, Health and Safety Code. Reference: Sections 1569.31, 1569.33, 1569.62, 1569.625, and 1569.626, Health and Safety Code.

**87725.2 ADVERTISING DEMENTIA SPECIAL CARE, PROGRAMMING, AND/OR ENVIRONMENTS AS OF JULY 3, 2004 87725.2**

- (a) Licensees who will no longer advertise, promote, or otherwise hold themselves out as providing dementia special care, programming, and/or environments shall meet all of the requirements of Section 87725(b) no later than October 31, 2004.
- (b) Licensees who continue to advertise, promote, or otherwise hold themselves out as providing dementia special care, programming, and/or environments shall comply with the requirements in Sections 87725(a) and 87725.1 as of July 3, 2004, with the following exceptions:
  - (1) No later than October 31, 2004, the licensee shall:
    - (A) Submit to the licensing agency the additional requirements for the plan of operation that have not been submitted previously, as described in Section 87725(a)(2).
    - (B) Amend the admission agreement to inform the resident and the responsible person, if any, or the conservator, that the facility features, as specified in Section 87725(a)(2), are described in the plan of operation and are available for review upon request. Requirements in Sections 87568(e) and (f) shall also be met.

NOTE: Authority cited: Section 1569.30, Health and Safety Code. Reference: Sections 1569.31, 1569.33, 1569.62, 1569.625, 1569.626, and 1569.627, Health and Safety Code.

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**Article 9. Administrator Certification Training Programs****87730 INITIAL CERTIFICATION TRAINING PROGRAM APPROVAL REQUIREMENTS 87730**

- (a) Initial Certification Training Programs shall be approved by the Department prior to being offered to applicants for licensure or administrator certification.
- (b) Any vendor applicant seeking approval of an Initial Certification Training Program shall submit a written request to the Department using the forms LIC 9140 and LIC 9141, or a replica. The request shall be signed under penalty of perjury and contain the following:
- (1) Name, address and phone number of the vendor applicant requesting approval and the name of the person in charge of the program.
  - (2) Subject title, classroom hours, proposed dates, duration, time, location and proposed instructor of each component.
  - (3) Written description and educational objectives for each component.
  - (4) Qualifications of each proposed instructor as specified in Section 87730(i)(6).
  - (5) Geographic areas in which the Training Program will be offered.
  - (6) Types of records to be maintained, as required by Section 87730(i)(4).
  - (7) A statement of whether or not the vendor applicant held or currently holds a license, certification or other approval as a professional in a specified field and the certificate or license number(s).
  - (8) A statement of whether or not the vendor applicant held or currently holds a community care facility license or was or is employed by a licensed community care facility and the facility number.
  - (9) A statement of whether or not the vendor applicant was the subject of any administrative, legal or other action involving licensure, certification or other approvals as specified in Sections 87730(b)(7) and (8).
  - (10) A processing fee of one hundred-fifty dollars (\$150).
- (c) Initial Certification Training Program approval shall expire two (2) years from the date the program is approved.
- (d) A written request for renewal of the Initial Certification Training Program shall be submitted to the Department using the forms LIC 9140 and LIC 9141, or a replica, and shall contain the information and processing fee specified in Section 87730(b).

**87730 INITIAL CERTIFICATION TRAINING PROGRAM  
APPROVAL REQUIREMENTS (Continued)****87730**

- (e) If a request for approval or renewal of an Initial Certification Training Program is incomplete, the Department shall, within thirty (30) days of receipt, give written notice to the vendor applicant that:
- (1) The request is deficient, describing which documents or information are outstanding and/or inadequate, and informing the vendor applicant that the information must be submitted within thirty (30) days of the date of the notice.
- (f) If the vendor applicant does not submit the requested information within thirty (30) days, the request for approval or renewal shall be deemed withdrawn provided that the Department has not denied or taken action to deny the request.
- (g) Within thirty (30) days of receipt of a complete request for an approval, the Department shall notify the vendor applicant in writing whether the request has been approved or denied.
- (h) The Initial Certification Training Program shall consist of the following components:
- (1) A minimum of forty (40) classroom hours with the following Core of Knowledge curriculum:
    - (A) Eight (8) hours of instruction in laws, including residents' personal rights, regulations, policies, and procedural standards that impact the operations of residential care facilities for the elderly.
    - (B) Three (3) hours of instruction in business operations.
    - (C) Three (3) hours of instruction in management and supervision of staff.
    - (D) Five (5) hours of instruction in the psychosocial needs of the elderly.
    - (E) Five (5) hours of instruction in the physical needs of the elderly.
    - (F) Two (2) hours of instruction in the use of community and support services to meet residents' needs.
    - (G) Five (5) hours of instruction in the use, misuse and interaction of drugs commonly used by the elderly.
    - (H) Five (5) hours of instruction on admission, retention, and assessment procedures.



**87730****INITIAL CERTIFICATION TRAINING PROGRAM  
APPROVAL REQUIREMENTS (Continued)****87730**

- (I) Four (4) hours of instruction in the care of residents with Alzheimer's Disease and other dementias.

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- (J) Topics within the basic curriculum may include, but not be limited to, topics as specified in the Department's Core of Knowledge Guideline for each of the nine (9) Core of Knowledge components specified in Sections 87730(h)(1)(A) through (I). The guideline is available from the Department upon request.
- (K) Core of Knowledge information is derived from a variety of sources governing the operation of licensed residential care facilities for the elderly, including but not limited to, pertinent statutory provisions of the Health and Safety Code, Welfare and Institutions Code, Education Code, Business and Professions Code, Penal Code, and applicable provisions of Title 22 of the California Code of Regulations, Sections 87100 et. seq.

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- (2) A standardized test administered by the Department.
- (A) Individuals completing an Initial Certification Training Program must pass the test with a minimum score of seventy percent (70%).
- (B) The test questions shall reflect the hour value of the nine (9) Core of Knowledge areas specified in Sections 87730(h)(1)(A) through (I).

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**87730 INITIAL CERTIFICATION TRAINING PROGRAM APPROVAL REQUIREMENTS (Continued)** **87730**

- (i) Initial Certification Training Program vendors shall:
- (1) Offer all forty (40) of the classroom hours required for certification.
  - (2) Establish a procedure to allow participants to make up any component necessary to complete the program.
  - (3) Within seven (7) days of determination that an individual has completed 40 hours of class instruction, submit the participant's name to the Department.
  - (4) Maintain and ensure that written records are available for review by Department representatives. Records shall be maintained for three (3) years. These records shall include the following information:
    - (A) Class schedules, dates and descriptions.
    - (B) List of instructors and documentation of qualifications of each, as specified in Section 87730(i)(6).
    - (C) Names of registered participants and documentation of completion of the program.
    - (D) Evaluations by participants of courses and instructors.
  - (5) Ensure that all classes are open to monitoring and inspection by Department representatives.
  - (6) Have persons as instructors who have knowledge and/or experience in the subject area to be taught and who meet at least one of the following criteria:
    - (A) Possession of a four (4) year college degree and two (2) years' experience relevant to the course(s) to be taught, or
    - (B) Four (4) years' experience relevant to the course(s) to be taught, or
    - (C) Be a professional, in a related field, with a valid license to practice in California, or
    - (D) Have at least four (4) years' experience in California as an administrator of a residential care facility for the elderly, within the last eight (8) years, and with a record of administering facilities in substantial compliance, as defined in Section 87101(s)(6).
  - (7) A minimum of ten (10) hours of instruction must be provided by an instructor(s) who meet(s) the criteria specified in Section 87730(i)(6)(D).

**87730 INITIAL CERTIFICATION TRAINING PROGRAM APPROVAL REQUIREMENTS (Continued) 87730**

- (A) Where good faith efforts to employ an instructor who meets the criteria specified in Section 87730(i)(6)(D) are unsuccessful, vendors may apply to the administrator certification section for a waiver of this requirement.
- (j) Initial Certification Training Program Vendors shall allow Department representatives to monitor and inspect Training Programs.
- (k) Initial Certification Training Program Vendors shall not instruct or "co-locate" more than one program type (ARF, RCFE, GH) at one time.
- (l) Initial Certification Training Program Vendors that are also seeking certification shall not be permitted to receive credit for attending the vendor's own Initial Certification Training Program.

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

**87730.1 DENIAL OF REQUEST FOR APPROVAL OF AN  
INITIAL CERTIFICATION TRAINING PROGRAM****87730.1**

- (a) The Department may deny a request for approval of an Initial Certification Training Program in accordance with Section 1569.616(i)(l) of the Health and Safety Code. The Department shall provide the applicant with a written notice of denial.

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Health and Safety Code Section 1569.616(i)(l) provides in part:

The department may deny vendor approval to any agency or person that has not provided satisfactory evidence of their ability to meet the requirements of vendorization set out in the regulations adopted pursuant to subdivision (j).

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- (b) The applicant may appeal the denial of the application in accordance with Section 1569.51 of the Health and Safety Code.
- (c) Any request for approval submitted by a vendor applicant whose application has been previously denied shall be processed by the Department in accordance with the provisions of Health and Safety Code Section 1569.16(b).

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Health and Safety Code Section 1569.16(b) provides:

(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.

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NOTE: Authority cited: Sections 1569.23(d), 1569.30, and 1569.616(j), Health and Safety Code. Reference: Sections 1569.16, 1569.23, and 1569.616, Health and Safety Code.

**87730.2 REVOCATION OF AN INITIAL CERTIFICATION TRAINING PROGRAM****87730.2**

- (a) The Department may revoke an Initial Certification Training Program approval and remove the vendor from the list of approved vendors if the vendor does not provide training consistent with Section 87730, or
- (1) Is unable to provide training due to lack of staff, funds or resources, or
  - (2) Misrepresents or makes false claims regarding the training provided, or
  - (3) Demonstrates conduct in the administration of the program that is illegal, inappropriate, or inconsistent with the intent or requirements of the program, or
  - (4) Misrepresents or makes false statements in the vendor application.
- (b) The vendor may appeal the revocation in accordance with Health and Safety Code Section 1569.51.
- (c) Any application for approval of an Initial Certification Training Program submitted by a vendor applicant whose approval has been previously revoked shall be processed by the Department in accordance with the provisions of Health and Safety Code Section 1569.16.

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Health and Safety Code Section 1569.16 in pertinent part provides:

(a)(1) If an application for a license indicates, or the department determines during the application review process, that the applicant previously was issued a license under this chapter or under Chapter 1 (commencing with Section 1200), 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.

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NOTE: Authority cited: Sections 1569.23(d), 1569.30, and 1569.616(j), Health and Safety Code. Reference: Sections 1569.16, 1569.51, and 1569.616, Health and Safety Code.

**87731 CONTINUING EDUCATION TRAINING PROGRAM  
VENDOR REQUIREMENTS 87731**

- (a) Any vendor applicant seeking approval as a vendor of a Continuing Education Training Program shall obtain vendor approval by the Department prior to offering any course to certificate holders.
- (b) Any vendor applicant seeking approval to become a vendor of a Continuing Education Training Program shall submit a written request to the Department using the forms LIC 9140 and LIC 9141, or a replica. The request shall be signed under penalty of perjury and contain the following:
- (1) Name, address and phone number of the vendor applicant requesting approval and the name of the person in charge of the Program.
  - (2) A statement of whether or not the vendor applicant held or currently holds a license, certification or other approval as a professional in a specified field and the license or certificate number.
  - (3) A statement of whether or not the vendor applicant held or currently holds a community care facility license or was or is employed by a licensed community care facility and the license number.
  - (4) A statement of whether or not the vendor applicant was the subject of any administrative, legal or other action involving licensure, certification or other approvals as specified in Sections 87731(b)(2) and (3).
  - (5) A processing fee of one hundred dollars (\$100).
- (c) Continuing Education Training Program vendor approval shall expire two (2) years from the date the vendorship is approved by the Department.
- (d) A written request for renewal of the Continuing Education Training Program shall be submitted to the Department using the forms LIC 9140 and LIC 9141, or a replica, and shall contain the information and processing fee specified in Section 87731(b).
- (e) If a request for approval or renewal of a Continuing Education Training Program is incomplete, the Department shall, within thirty (30) days of receipt, give written notice to the vendor applicant that:
- (1) The request is deficient, describing which documents or information are outstanding and/or inadequate and informing the vendor applicant that the information must be submitted within thirty (30) days of the date of the notice.
- (f) If the vendor applicant does not submit the requested information within thirty (30) days, the request for approval or renewal shall be deemed withdrawn, provided that the Department has not denied or taken action to deny the request.
- (g) Within thirty (30) days of receipt of a complete request for an approval or renewal, the Department shall notify the vendor applicant in writing whether the request has been approved or denied.

**87731 CONTINUING EDUCATION TRAINING PROGRAM** **87731**  
**VENDOR REQUIREMENTS (Continued)**

- (h) Continuing Education Training Program vendors shall:
- (1) Maintain and ensure that written records are available for review by Department representatives. Records shall be maintained for three (3) years. The records shall include the following:
    - (A) Course schedules, dates and descriptions.
    - (B) List of instructors and documentation of qualifications of each as specified in Section 87731(h)(2).
    - (C) Names of registered participants and documentation of completion of the courses.
    - (D) Evaluations by participants of courses and instructors.
  - (2) Have instructors who have knowledge and/or experience in the subject area to be taught and who meet at least one of the following criteria:
    - (A) Possession of a four (4) year college degree and two (2) years experience relevant to the course to be taught, or
    - (B) Four (4) years experience relevant to the course to be taught, or
    - (C) Be a professional, in a related field, with a valid license to practice in California, or
    - (D) Have at least four (4) years experience in California as an administrator of a residential care facility for the elderly, within the last eight (8) years, and with a record of administering facilities in substantial compliance as defined in Section 87101(s)(6).
- (i) 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 the technology permits the simultaneous and interactive participation of the certificate holder, provided such participation is verifiable.
- (j) Any changes to courses previously approved by the Department must be submitted and approved by the Department prior to being offered.
- (k) Continuing Education Training Program vendors shall allow Department representatives to monitor and inspect Training Programs.
- (l) Continuing Education Training Program vendors who teach courses that the Department has approved for more than one program type (ARF, RCFE, GH), may provide "multiple crediting," that is, more than one certification for the course, to those who complete the course satisfactorily.



**87731 CONTINUING EDUCATION TRAINING PROGRAM 87731**  
**VENDOR REQUIREMENTS (Continued)**

- (m) Continuing Education Training Program vendors that the Department has approved for more than one program type (ARF, RCFE, GH), may "co-locate" or instruct specified courses for more than one program type.
- (n) Continuing Education Training Program vendors who are also certificate holders shall not be permitted to receive credit for attending the vendor's own Continuing Education Training Program courses.

NOTE: Authority cited: Sections 1569.23(d), 1569.30, and 1569.616(j), Health and Safety Code. Reference: Section 1569.616, Health and Safety Code.

**87731.1 CONTINUING EDUCATION TRAINING PROGRAM 87731.1**  
**COURSE APPROVAL REQUIREMENTS**

- (a) Any Continuing Education Training Program course shall be approved by the Department prior to being offered to certificate holders.
  - (1) At the sole discretion of the Department, continuing education credit may be granted for training provided by the Department's licensing staff.
- (b) Any vendor applicant seeking approval of a Continuing Education Training Program course shall submit a written request to the Department using the forms LIC 9140 and LIC 9141, or a replica. The request shall be signed under penalty of perjury and contain the following:
  - (1) Subject title, classroom hours, scheduled dates, duration, time, location, and proposed instructor of each course.
  - (2) Written description and educational objectives for each course, teaching methods, course content and a description of evaluation methods.
  - (3) Qualifications of each proposed instructor, as specified in Section 87731(h)(2).
  - (4) Types of records to be maintained, as required in Section 87731(h)(1).
  - (5) A statement of whether or not the instructor held or currently holds a license, certification or other approval as a professional in a specified field and the license or certificate number.
  - (6) A statement of whether or not the instructor held or currently holds a community care facility license or was, or is, employed by a licensed community care facility and the facility number.
  - (7) A statement of whether or not the proposed instructor was the subject of any administrative, legal or other action involving licensure, certification or other approvals as specified in Sections 87731.1(b)(5) and (6).

**87731.1 CONTINUING EDUCATION TRAINING PROGRAM  
COURSE APPROVAL REQUIREMENTS (Continued)****87731.1**

- (c) Course approval shall expire on the expiration date of the vendor's Continuing Education Training Program vendorship approval, as provided in Section 87731(c).
- (1) To renew a course, the vendor applicant shall submit a written request to the Department using the forms LIC 9139 and LIC 9141, or a replica.
- (d) If a request for approval or renewal of a Continuing Education Training Program course is incomplete, the Department shall, within thirty (30) days of receipt, give written notice to the vendor applicant that:
- (1) The request is deficient, describing which documents or information are outstanding and/or inadequate and informing the vendor applicant that the information must be submitted within thirty (30) days of the date of the notice.
- (e) If the vendor applicant does not submit the requested information within thirty (30) days, the request for approval or renewal shall be deemed withdrawn, provided that the Department has not denied or taken action to deny the request.
- (f) Within thirty (30) days of receipt of a complete request for an approval or renewal, the Department shall notify the vendor applicant in writing whether the course has been approved or denied.
- (g) Any changes to previously approved courses must be submitted to the Department for approval prior to being offered, which shall contain the information specified in Section 87731.1(b).
- (h) Continuing Education Training Program vendors shall allow Department representatives to monitor and inspect the training courses.

NOTE: Authority cited: Sections 1569.23(d), 1569.30, and 1569.616(j), Health and Safety Code. Reference: Section 1569.616, Health and Safety Code.

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**87731.2 ADMINISTRATIVE REVIEW OF DENIAL OR REVOCATION OF A REQUEST FOR A APPROVAL OF A CONTINUING EDUCATION COURSE 87731.2**

- (a) A vendor may seek administrative review of the denial or revocation of course approval as follows:
- (1) The vendor must request administrative review in writing within ten (10) days of the receipt of the Department's notice denying or revoking course approval.
  - (2) The administrative review shall be conducted by a higher-level staff person than the person who denied or revoked course approval.
  - (3) If the reviewer determines that the denial or revocation of course approval was not issued in accordance with applicable statutes and regulations of the Department, or that other circumstances existed, he/she shall have the authority to amend the denial or revocation of course approval.
  - (4) The decision of the higher-level staff person shall be final.

NOTE: Authority cited: Sections 1569.23(d), 1569.30, and 1569.616(j), Health and Safety Code. Reference: Section 1569.616, Health and Safety Code.

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**87731.3 DENIAL OF A REQUEST FOR A APPROVAL OF A CONTINUING EDUCATION TRAINING PROGRAM 87731.3**

- (a) The Department may deny a request for approval of a Continuing Education Training Program in accordance with Health and Safety Code Section 1569.616(i)(l). The Department shall provide the applicant with a written notice of the denial.

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Section 1569.616(i)(l) of the Health and Safety Code provides in part:

The department may deny vendor approval to any agency or person that has not provided satisfactory evidence of their ability to meet the requirements of vendorization set out in the regulations adopted pursuant to subdivision (j).

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- (b) The vendor applicant may appeal the denial of the application in accordance with Health and Safety Code Section 1569.51.
- (c) Any request for approval submitted by a vendor applicant whose application has been previously denied shall be processed by the Department in accordance with the provisions of Health and Safety Code Section 1569.16(b).

**87731.3 DENIAL OF A REQUEST FOR A APPROVAL OF A  
CONTINUING EDUCATION TRAINING PROGRAM (Continued)****87731.3****HANDBOOK BEGINS HERE**

Health and Safety Code Section 1569.16(b) provides:

(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.

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NOTE: Authority cited: Sections 1569.23(d), 1569.30, and 1569.616(j), Health and Safety Code. Reference: Sections 1569.16, 1569.51, and 1569.616, Health and Safety Code.

**87731.4 REVOCATION OF A CONTINUING EDUCATION  
TRAINING PROGRAM****87731.4**

- (a) The Department may revoke a Continuing Education Training Program approval and remove the vendor from the list of approved vendors if the vendor does not provide training consistent with Sections 87731 and 87731.1 or:
- (1) Is unable to provide training due to lack of staff, funds or resources; or
  - (2) Misrepresents or makes false claims regarding the training provided; or
  - (3) Demonstrates conduct in the administration of the program that is illegal or inconsistent with the intent of the program; or
  - (4) Misrepresents or makes false statements in the vendor application.
- (b) The vendor may appeal the revocation in accordance with Health and Safety Code Section 1569.51.
- (c) Any application for approval of a Continuing Education Training Program submitted by a vendor applicant whose approval has been previously revoked shall be processed by the Department in accordance with the provisions of Health and Safety Code Section 1569.16.

**87731.4 REVOCATION OF A CONTINUING EDUCATION  
TRAINING PROGRAM (Continued)****87731.4**

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Health and Safety Code Section 1569.16 in pertinent part provides:

(a)(1) If an application for a license indicates, or the department determines during the application review process, that the applicant previously was issued a license under this chapter or under Chapter 1 (commencing with Section 1200), 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.

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NOTE: Authority cited: Sections 1569.23(d), 1569.30, and 1569.616(j), Health and Safety Code. Reference: Sections 1569.16, 1569.51, and 1569.616, Health and Safety Code.

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