

EVALUATOR MANUAL TRANSMITTAL SHEET

<u>Distribution:</u> <input type="checkbox"/> All Day Care Evaluator Manual Holders <input checked="" type="checkbox"/> All Residential Care Evaluator Manual Holders <input type="checkbox"/> All Evaluator Manual Holders	<u>Transmittal No.</u> 98APX-02 Errata <u>Date issued.</u> February, 1998
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Subject:

APX - CCF: 1997 Chaptered Legislation and Implementation

(Appendix tab A - Community Care Facilities/Residential Care Facilities for the Chronically III)

Reason For Change:

This transmits summaries of legislation chaptered in 1997 affecting Community Care Facilities/Residential Care Facilities for the Chronically III. The summaries are divided into three sections as follows:

- I. Immediate Action Required - Interim instructions are provided and will be incorporated into the appropriate Evaluator Manual section as soon as possible.
- II. No action pending regulations or further instructions.
- III. Information only - No action required.

Additionally, an index is attached to assist staff in locating specific bills. Statutes referenced in this document become operative on January 1, 1998, unless other wise indicated.

Filing Instructions:

REMOVE - 98APX-02 - CCF Chaptered Legislation, January 1998

INSERT - The attached pages into Appendix A. Do not remove similar document from previous years.

(due to a distribution error holders of the Child Care Manual received material intended for Residential Manual holders.)

Approved:


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**COMMUNITY CARE FACILITIES AND RESIDENTIAL CARE
FACILITIES FOR THE CHRONICALLY ILL**

SUMMARY OF 1997 CHAPTERED LEGISLATION

SECTION I

Immediate Action Required

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SECTION II

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None This Legislative Cycle

SECTION III

Information Only

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**COMMUNITY CARE FACILITIES AND RESIDENTIAL CARE
FACILITIES FOR THE CHRONICALLY ILL**

SUMMARY OF 1997 CHAPTERED LEGISLATION

**SECTION I
IMMEDIATE ACTION REQUIRED**

Assembly Bill (AB) 323 (Baca), Chapter 561, Statutes of 1997

Affects: Group Homes located in San Bernardino County

Subject: Complaint Pilot Project

Summary: AB 323 created a pilot project to reduce group home related complaints in San Bernardino County. The goal of the project is to encourage group home licensees to work with neighborhood residents to resolve issues. The pilot will be deemed successful if there is a 10% reduction in the number of group home complaints filed with the local licensing district office.

AB 323 amends the Health and Safety (H&S) Code as follows:

- Health and Safety Code Section 1524.6 is added to require group homes located in San Bernardino County to develop procedures for responding to neighborhood complaints. The procedures must be approved by CCLD and be in place by July 1, 1998. The requirement terminates January 1, 2001, unless extended by statute.
- Health and Safety Code Section 1538.7 is added to require all group homes located in San Bernardino County to provide written notice on how to make a complaint to: a) anyone who makes a verbal or written complaint to the group home, or; b) anyone who asks the group home how to make a complaint. The notification requirement is effective July 1, 1998 and terminates January 1, 2001, unless extended by statute.
- Health and Safety Code Section 1538.6 is added to require the Department to develop a plan for a toll free "800" number for the Inland Empire Residential District Office, to allow the public to file complaints regarding group homes in San Bernardino County.

Implementation: The statute is sufficiently clear to implement without regulations. Use the Health and Safety Code as the authority to cite a facility. Examples of citation language are included in the implementation guidelines below.

1. Effective January 1, 1998, the Inland Empire Residential District Office will establish a separate log for San Bernardino County group home complaints received on and after January 1, 1998. At the conclusion of every month, the District Office will total these complaints, and maintain these statistics separate from other complaint totals. The log and monthly totals must be maintained through the end of the pilot project, January 1, 2001.
2. Effective January 1, 1998, **any group home serving seven or more children, located in San Bernardino County**, must develop a procedure for responding immediately to incidents and complaints. The procedure must address the following:
 - a. Method of ensuring that the owner, licensee, or person designated by the owner or licensee, is notified of the incident or complaint; and,
 - b. Method of ensuring that the owner, licensee, or person designated by the owner or licensee, personally investigates the incident or complaint; and,
 - c. Method of ensuring the person reporting the incident or complaint receives a written response indicating action taken, or the reason why action is not needed.

All effected group homes must have procedures approved by the Inland Empire Residential District Office in place by July 1, 1998. Procedures must be in force through the end of the pilot project, January 1, 2001.

[SAMPLE CITATION LANGUAGE: H&S Code Section 1524.6(a)]

- *Licensee has failed to develop procedures for responding immediately to incidents and complaints, by July 1, 1998.*
- *Licensee has failed to submit to CCLD, for approval by July 1, 1998. procedures for responding immediately to incidents and complaints.*
- *Licensee has failed to implement approved procedures for responding immediately to incidents and complaints, by July 1, 1998.*
- *Licensee has not complied with the facility's procedures for ensuring that the owner, licensee, or person designated by the owner or licensee, is notified of the incident or complaint.*

- *Licensee has not complied with the procedures for ensuring that the owner, licensee, or person designated by the owner or licensee, personally investigates the incident or complaint.*
 - *Licensee has not complied with the procedures for ensuring the person reporting the incident or complaint receives a written response indicated action taken, or the reason why action is not needed.*
3. Effective January 1, 1998, **all group homes in San Bernardino County**, must establish a fixed time on a weekly basis when the owner, licensee or person designated by the owner or licensee, will be present at the facility to:
- a. Ensure complaints are made directly to the owner or licensee or designee; and,
 - b. Ensure the residents have the opportunity to meet with the owner or licensee or designee; and,
 - c. Ensure the owner or licensee or designee, learn of problems in the neighborhood.

All affected group homes must establish and implement a fixed time by July 1, 1998. This requirement terminates at the end of the pilot project, January 1, 2001.

[SAMPLE CITATION LANGUAGE: H&S Code Section 1524.6(b)]

- *Licensee has failed to establish a fixed time per week for the owner, licensee or designee to be present at the facility, by July 1, 1998.*
 - *Licensee has failed to designate the owner, licensee or designee to be present at the facility at (insert fixed time), by July 1, 1998.*
 - *{Insert owner, licensee or designee} has failed to be present at the facility {insert fixed time}.*
4. Effective July 1, 1998, **all group homes in San Bernardino County**, must provide a written complaint notice, a) to anyone who makes a verbal or written complaint to the group home; or, b) to anyone who asks the group home how to make a complaint. The notice must contain the following information:
- a. **Group homes serving seven or more** must provide the procedures required in Health and Safety Code Section 1524.6.
 - b. **All group homes** must include the right of any individual to request an inspection of a group home in accordance with Health and Safety Code Section 1538.

- c. The following statement in 14 point boldface type:

"NOTICE: The Department of Social Services will not conduct an inspection if the department determines that a complaint is willfully intended to harass a licensee or is without any reasonable basis. (H&S Code Section 1538).

- d. The telephone number of the Inland Empire Residential District Office.

The notification requirement terminates at the end of the pilot project, January 1, 2001.

[SAMPLE CITATION LANGUAGE: H&S Code Section 1538.7(a)]

- *Licensee has failed to develop written complaint notice, by July 1, 1998.*
- *Licensee has failed to distribute the written complaint notice to {an individual} who has made a verbal or written complaint to the facility.*
- *Licensee has failed to distribute the written complaint notice to {an individual} who has asked how to make a complaint about the facility.*
- *Licensee has failed to implement the written complaint notice, by July 1, 1998.*

[SAMPLE CITATION LANGUAGE: H&S Code Section 1538.7(a)(1)]

- *Facility's written complaint notice does not include the facility's procedures for responding to incidents and complaints.*

[SAMPLE CITATION LANGUAGE: H&S Code Section 1538.7(a)(2)]

- *Facility's written complaint notice does not include the right of any individual to request an inspection of a group home, alleging a violation of a regulation or statute*

[SAMPLE CITATION LANGUAGE: H&S Code Section 1538.7(a)(3)]

- Facility's written complaint notice does not include the following statement:

"NOTICE: The Department of Social Services will not conduct an inspection if the department determines that a complaint is willfully intended to harass a licensee or is without any reasonable basis. (H&S Code Section 1538).

- Facility's written complaint notice does not include the above statement in 14 point type.
- Facility's written complaint notice does not include the above statement in boldface type.

[SAMPLE CITATION LANGUAGE: H&S Code Section 1538.7(a)(4)]

- Facility's written complaint notice does not include the telephone number of the Inland Empire Residential District Office.

Assembly Bill (AB) 747 (Alby) Chapter 617, Statutes of 1997

Affects: Foster Family Homes (FFH), Community Care Facilities, Residential Care Facilities for the Elderly (RCFE), Residential Care Facilities for the Chronically Ill (RCF-CI).

Subject: Facility Exclusions and License Ineligibility

Summary: This statute provides that anyone whose license has been revoked or who has been excluded from a community care facility is ineligible for licensure as follows:

- **Certified Foster Family Homes:**
 - a. **Revocation.** Health and Safety Code Section 1506(e)(1) and (2) are added to require that *Foster Family Agencies* cannot certify, nor is an *individual* eligible for, a foster home certificate if *within the last two years* the Department revoked: (1) a CCLD license, or (2) a Foster Family Agency certificate pursuant to Health & Safety Code section 1534(b).
 - b. **Reinstatement.** Health and Safety Code Section 1506(e)(3) requires that an individual is not eligible for a certificate if they are excluded from a licensed facility after January 1, 1998, *unless* the Department has reinstated the person.

- c. **Denials.** Health and Safety Code Sections 1506(f) and (g) state an individual is ineligible to be a certified foster parent for one year after the effective date of the administrative decision or the date of the denial letter if the person did not appeal, and if:
 - (i) The Department has denied them licensure; or,
 - (ii) The Department told the Foster Family Agency to deny the person's certificate of approval.

- **Community Care Facilities:**

Health and Safety Code Sections 1520.3, 1568.065(f), 1569.16 and 1569.59 are amended to require that a person is not eligible for licensure if the Department ordered the revocation or denial of the certified foster home. For revocations, the time period is two years, and for denials, one year. A person is not eligible for licensure if they were excluded from a community care facility after January 1, 1998, unless the Department reinstates them.

- **Exclusion Actions**

Health and Safety Code Sections 1558, 1568.092 and 1569.58 are amended to require that if a person is excluded from one kind of community care facility, then they are deemed excluded from all kinds of community care facilities.

- a. If a person does not contest the exclusion, or loses an administrative hearing, the law excludes that person from all community care facilities for the remainder of the person's life.
- b. *However*, the person may petition the Department for reinstatement after waiting one year subsequent to the exclusion order becoming final; and,
- c. The law mandates that the Department provide the excluded person a copy of Government Code section 11522, which governs reinstatement, in the exclusion letter. It states:

"A person whose license has been revoked or suspended may petition the agency for reinstatement or reduction of penalty after a period of not less than one year has elapsed from the effective date of the decision or from the date of the denial of a similar petition. The agency shall give notice to the Attorney General of the filing of the petition and the Attorney General and the petitioner shall be afforded an opportunity to present either oral or written argument before the agency itself. The agency itself shall decide the petition, and the decision shall include the reasons therefor, and any terms and conditions that the agency reasonably deems appropriate to impose as a condition of reinstatement. This section shall not apply if the statutes dealing with the particular agency contain different provisions for reinstatement or reduction of penalty."

- **Revocation Actions**

Health and Safety Code Sections 1558.1, 1568.093, and 1569.59 are amended to require that if the Department revokes a person's license or foster family home certificate after January 1, 1998, that person cannot be present in a community care facility for two years after the effective date of the revocation order, or for one year after the effective date of the denial order.

Implementation: Effective January 1, 1998, a person who has had a Department ordered certified foster home revocation will not be issued a license by CCLD for a period of two years.

Effective January 1, 1998, the new waiting periods will be imposed:

- (1) **Revocation and Denials.** If a person has had a *Department-ordered* revocation or denial of a certificate to be a certified foster home; or, a CCLD license revocation or denial, then that person can not be present in any facility licensed by CCLD. The period of ineligibility is two years for revocation, and one year for denial of the certificate of approval.
- (2) **Exclusions.** A person who has a *Department-ordered* exclusion from any facility licensed by community care licensing will not be granted a license to operate any licensed facility, nor can that person be present in any licensed facility until reinstated by the Department. The person must wait at least one year from the effective date of the exclusion order before they can petition the Department for reinstatement.

General Notification Processes: *Department-ordered* revocations and denials of foster care certifications and of community care licenses, or a *Department-ordered* exclusion will all be reflected as a flag on the criminal record if the Department filed a Statement of Issues or Accusation and prevailed. These flags will be identified by the Criminal Record Clearance Bureau and the affected District Office will then be notified that the individual is ineligible for licensure.

In instances where the person did not appeal the Department's order and no legal pleadings filed, the District Office shall note the Department ordered denial or revocation of the certificate of approval on the LIS Supplemental History screen.

Additional Exclusion-Action Notification Processes. When an individual is excluded, they have certain rights to apply for reinstatement. Mandated language explaining these rights will be included in the exclusion letter.

[SAMPLE CITATION LANGUAGE: H&S Code Sections 1558.1, 1568.093, and 1569.59]

- *Licensee has failed to exclude _____ (name) from their facility. _____ (name) had their license revoked or denied, and who does not currently qualify for an exclusion to be present or reside in any CDSS-licensed facility.*

[SAMPLE CITATION LANGUAGE: H&S Code Sections 1558, 1568.092, 1569.58 and 1596.8897]

- *Licensee has failed to exclude from their facility _____ (name) who was an employee that had their criminal record exemption denied, and who does not currently qualify for an exclusion to be present or reside in any CDSS-licensed facility.*

Assembly Bill (AB) 1545 (Aroner), Chapter 526, Statutes of 1997.

Affects: Adult Residential Facilities, Social Rehabilitation Facilities, Adult Day Care Facilities, Adult Day Support Centers

Subject: Incidental medical services for clients with specified medical conditions.

Summary: This statute allows facility staff who are trained and supervised by licensed medical professionals to provide specified incidental medical services to clients with the following four conditions: colostomy, ileostomy, urinary catheter, and gastrostomy.

This statute amends Section 1507 of the Health and Safety Code. Section 1507(b) now specifies that incidental medical services may be provided in adult CCFs by facility staff who are trained and supervised by a licensed health care professional. This section also limits the incidental medical services provided by trained facility staff to the following:

1. Colostomy and ileostomy: changing bags and cleaning stoma.
2. Urinary catheter: emptying bags in day care facilities; emptying and changing bags in residential facilities.
3. Gastrostomy: feeding, hydration, cleaning stoma, and adding routine medication per physician's orders for clients who have chronic, stable conditions.

Section 1507(c) requires that each client have an individualized health care plan which is developed and monitored by health care professionals. Different plans are required for regional center clients and non-regional center clients.

1. For regional center clients:
 - a. A health care team must prepare an individualized health care plan (plan) for each client.
 - b. The health care team is made up of the following persons:
 1. The client or his/her designee if the client is unable to participate in planning his/her health care.
 2. The client's primary care physician or nurse practitioner or another health care professional designated by the primary care physician or nurse practitioner.
 3. The licensee or licensee's designee.
 4. A social worker or regional center worker involved in the client's case.
 5. A health care professional designated to monitor the client's plan.
 - c. The plan must be reassessed at least once a year.
 - d. The client's regional center, primary care physician or nurse practitioner or designee must identify the health care professional responsible for training facility staff.
 - e. The health care professional who provides the training must be practicing within his/her scope of practice, must monitor staff ability to provide the services, and must review, correct, or update staff training as necessary.
 - f. The regional center or placing agency is responsible for evaluating and monitoring the incidental medical services provided in the facility by facility staff.
2. For clients who are not regional center clients:
 - a. A health care team must prepare an individualized health care plan (plan) for each client. The plan must include the physician/nurse practitioner's order for services. (The reference in this paragraph to "day care" is a mistake. In fact, it was the Legislature's intention to refer to both adult day and adult residential care.) The plan must be prepared by a team that includes:
 1. The client or his/her designee if the client is unable to participate in planning his/her health care.

2. The client's social worker, conservator, or legal guardian, as appropriate.
3. A licensed health care professional.
4. The licensee or the licensee's designee.
 - (B) The plan must be reassessed at least once a year.
 - (C) The health care professional who provides the training must be practicing within his/her scope of practice and must review, correct, or update facility staff training as necessary.

Section 1507(d) specifies that facilities providing incidental medical services must remain in substantial compliance with all other regulations.

Implementation: This statute is effective immediately and supersedes Sections 80092.4, 80092.6, and 80092.11 of the existing emergency regulations for Incidental Medical Services in Adult Residential Facilities regulations, which speak to the four specified medical conditions.

- 1) Effective immediately for licensees of adult residential facilities, this means the following:
 - The facility must be in substantial compliance with licensing requirements.
 - Facility staff trained and supervised by a licensed medical professional can provide the incidental medical services, specified in Section 1507(b) above, to clients with individualized health care plans as specified in 1507(c) above.
- 2) The Department is continuing the regulatory process for the emergency Incidental Medical Services in adult residential facilities. The regulations have been revised following the public hearings held in March 1997. It is anticipated that these regulations will be adopted in the Spring, 1998.
- 3) The Department has issued a revised Incidental Medical Services Interim Policy dated December 1997 to replace the Interim Policy issued in April 1997. This Interim Policy is meant to provide direction to field staff.

Assembly Bill (AB) 1575 (Assembly Committee on Human Services) Chapter 728, Statutes of 1997

Affects: Community Care Facilities (CCFs), Foster Family Homes (FFHs)

Subject: Temporary Suspension Orders

Summary: AB 1575 changes the Health and Safety Code and the Welfare and Institutions Code as follows:

- The statute formerly provided that the Department could issue a Temporary Suspension Order (TSO) when the action was "necessary." The amended statute authorizes the Department to issue a TSO when the need to protect the health and safety of clients is "urgent."
- Formerly, the law did not require the Department or the licensee to provide discovery before the interim hearing. The new statute requires that, when serving a TSO, the Department must provide the licensee, with all discoverable information available that the Department relied on in issuing the TSO. If the licensee requests an interim hearing, both the licensee and respondent shall serve available discovery, by either overnight delivery or fax, no later than five working days before the interim hearing. Available discovery includes affidavits, declarations, names of witnesses who will testify at the evidentiary hearing, and other evidence relied on to issue the TSO.
- Formerly, when the licensee who received a TSO requested an interim hearing the Administrative Law Judge (ALJ) reviewed the TSO and the accusation and decided whether the Department had sufficient facts to warrant issuing the TSO. This statute now places the burden on the licensee to provide a reasonable likelihood that he/she will prevail at the full evidentiary hearing. The licensee must also establish that the injury to him/her, if the facility remains closed, outweighs the potential harm to the clients/residents if the facility remains open. The ALJ may vacate the TSO only if the respondent proves these two factors.
- No oral testimony may be presented at the interim hearing. The hearing shall be based on declarations and other admissible evidence, such as reports or video or audio tapes. Both the licensee and the Department may use hearsay statements made by victims in lieu of affidavits if permitted by the ALJ.
- Concurrent with the interim hearing process, the licensee may file a writ in a superior Court to challenge the Department's issuance of the TSO. The TSO remains in effect until the hearing is completed.

- The ALJ may issue a verbal decision at the conclusion of the interim hearing followed by a written decision within five working days. The Department or licensee may file a petition for review of the decision, which must be heard by the court within ten days of its filing. The court must issue its judgement on the petition within ten days of the conclusion of the hearing.

Implementation: *[The following will be replaced by Evaluator Manual material from a Northern Region Workgroup upon completion]* When a TSO is served the Department's Legal Division will prepare documents clearly outlining the Licensee's hearing and appeal rights and procedures. The licensee will be provided with all information available which the Department has relied on in deciding to issue a TSO.

The major change this statute imposes on CCLD staff is to provide available discovery to the licensee at the time of TSO. LPAs should get declarations from witnesses prior to the service of the TSO whenever possible. However, the Department is not mandated to have the declaration when the TSO is served, but will need these documents for the interim hearing. If you have any questions whether a declaration is needed, contact the Legal Division.

- Follow the procedures for documentation specified in the Evaluator Manual Section 1-1020 regarding LPA documentation and declarations from witnesses. It becomes more imperative than ever to not leave a witness without their written declaration.
- Note, if the witness cannot write, the LPA may write the declaration for the witness. Begin the declaration by saying, "I have asked (LPA name) to write this for me. On ----I say, heard, etc.". Write what the witness has told you. Have the witness read the declaration, or read it to the witness, ask if it is accurate, and have the witness sign it.
- As soon as the LPA and supervisor believe that an investigation will lead to a TSO. They should contact the Legal Division and ask that an attorney be assigned to the case. That attorney can advise and assist the District Office regarding what information must be obtained.

When the TSO is prepared by the Legal Division they will include all pertinent material and notices required by this legislation.

Senate Bill (SB) 381 (Watson) Chapter 555, Statutes of 1997

Affects: Adult Residential Facilities (ARF)

Subject: Administrator Certification Program

Summary: This statute exempts, under certain circumstances, persons employed as administrators of ARFs prior to July 1, 1996, from the requirement to complete 35 hours of classroom instruction.

The statute further clarifies that certificates expire every two years on the day that the certificate was originally issued.

Implementation: A person who was the administrator of an ARF during the period of June 30, 1994, through June 30, 1996, must complete an Application for Certification form and return it to the Department with a check or money order for \$100, to the address listed below on or before April 1, 1998. The application form must include a signature verifying that the applicant was the administrator during the required time period. An application form may be requested by calling (916) 324-4317 or writing to the address specified below.

1) A person who was both the licensee and administrator may sign for themselves. If not, the licensee must verify the administrator status for the period of time specified.

- For efficiency in processing applications, the Department requests that applications be mailed according to the following schedule:

- For last names beginning with: Mail the application in:

A - H	January 1998
I - P	February 1998
Q-Z	March 1998

2) If an application is not received by April 1, 1998, the applicant may be required to complete the 35-hour training and pass the Department administered written test in order to become certified.

- If the applicant does not have a current criminal background clearance, a clearance will be required before an administrator certificate can be issued.

- On the application form mark the box "ARF Challenge". If an application is not received by April 1, 1998, the applicant may be required to complete the 35-hour training and pass the department administered written test in order to become certified.

- Persons who passed the challenged test must mark the box "ARF" Challenge" on the application.

- 3) Application forms and checks made payable to California Department of Social Services should be sent to:

Department of Social Services
Administrator Certification Section
744 P Street, MS 19-47
Sacramento, California, 95814

- 4) Beginning July 1, 1998 licensing staff will cite a facility if the administrator is not certified. A copy of the certification should be maintained in the administrator's personnel file.

[SAMPLE CITATION LANGUAGE: Regulation Section 85064(c)]

- *Administrator _____ (name) is not a certified administrator.*

Senate Bill (SB) 1039 (M. THOMPSON), Chapter 414, Statutes of 1997.

Affects: Adult Residential Facilities (ARFs), Social Rehabilitation Facilities (SRFs), Foster Family Homes (FFHs), Group Homes (GHs), Adult Day Care Facilities (ADCFs), Adult Day Support Centers (ADSCs).

Subject: Regional Center Certification

Summary: This statute strengthens services to developmentally disabled clients of the Department of Developmental Services (DDS). It has several provisions that directly impact CCLD licensees:

- Section 4803 of the Welfare and Institutions Code (W&IC) specifies that the regional center responsible for recommending a developmentally disabled client to a CCF must certify in writing that neither the client nor his/her authorized representative, nor a client advocate, nor the parent of a minor has objected to the placement. Further, CCFs may not admit developmentally disabled clients on recommendation of a regional center unless the licensee has a copy of the certification.
- Anyone who knows of an objection, but certifies there was no objection is guilty of a misdemeanor. Objections to proposed placements must be resolved by a fair hearing procedure specified in Section 4700, W&IC.
- The Health and Welfare Agency must contract with an independent consultant to review services provided to regional center clients and to report their findings to they appropriate policy committees and the fiscal committees of the Legislature by March 15, 1998. The evaluation of client services may include a review of some CCLD-licensed facilities and a review of how well CCLD performs its oversight functions.

- A client or his/her authorized representative may file a complaint with the regional center about a CCF. The regional center and DDS may seek information from licensees and CCLD as part of their complaint investigation and appeals process.
- This statute modifies the needs assessment process for people with developmental disabilities who are in transition from state developmental centers to community living. This assessment will affect CCFs in so far as it alters the quality of the individual program plans (IPPs).

Implementation: This statute is effective immediately. At the next facility visit the LPA should notify the licensee that the certification is now required for all Regional Center clients accepted after September 21, 1997, and must be maintained in the client's file at the facility. The LPA will advise that effective immediately a regional center client may not be admitted without the certification.

- 1) The certification may be part of the Regional Center Admission Agreement for the client. If the licensee has a copy of that Admission Agreement and it has this certification, that will suffice.
- 2) For residents admitted before the LPA notifies the licensee of the requirement:
 - If the licensee has no certification, advise the licensee that he/she must contact the Regional Center and obtain the certification. Document this on the LIC 809, but do not cite the licensee. Have the licensee mail or FAX a copy of the certification to you for verification that it is received.
 - If the licensee can not obtain the required certification from the Regional Center, this must be documented in the client's record.
- 3) For residents admitted after the LPA has notified the licensee of the requirement:
 - If the certification is not in the client's file, cite the licensee for violation of Welfare and Institutions Code Section 4803:

[SAMPLE CITATION LANGUAGE: Welfare and Institutions Code Section 4803]

- *Welfare and Institutions Code 4803. A community Care Facility shall not admit a developmentally disabled client on recommendation of a regional center unless the regional center has certified in writing that there was no objection to the placement. Licensee has accepted client #_ as a regional center client. There is no certification on file for client # _.*

1997 CHAPTERED LEGISLATION AND IMPLEMENTATION

SECTION III INFORMATION ONLY

Assembly Bill (AB) 1065 (Goldsmith), Chapter 844, Statutes of 1997

Affects: Child Welfare Agencies

Subject: Child Abuse Central Index information

Summary: This statute authorizes the Department of Justice to resume providing Child Abuse Central Index information to county child welfare agencies for placement purposes.

Assembly Bill (AB) 1215, (Mazzoni), Chapter 269

Affects: Residential Care Facilities for the Elderly (RCFE), Community Care Facilities (CCF), and Residential Care Facilities for the Chronically Ill (RCF-CI)

Subject: Long-Term Care Program Report to the Legislature.

Summary: The statute requires the Health and Welfare Agency (HWA), in coordination with the California Department of Aging, the State Departments of Health Services, Social Services, Mental Health and Developmental Services, to prepare a report on long-term care programs for adults administered by State Departments. In preparing the report, the HWA must seek input and comment from long-term care consumers and representatives who participate in long-term care programs. The report must include an inventory of all existing long-term care programs, options for integrating key programs administered by different state departments, and a potential timetable for implementing administrative change options. The HWA is required to submit the report to the Legislature on or before January 1, 1999.

Assembly Bill (AB) 1545 (Committee on Human Services Aroner, Chair), Chapter 526, Statutes of 1997

Affects: Foster Family Homes and Small Family Homes

Subject: Special Health Care Needs of Children

Summary: This statute clarifies the intent of AB 2322 enacted last year. The clarification does not change the implementation instructions on page three of 97 APX-03 issued last year.

Senate Bill (SB) 381 (Watson) Chapter 555, Statutes of 1997

Affects: Adult Residential Facilities (ARF)

Subject: Administrator Certification Program

Summary: This statute clarifies Department authority for approving vendors to conduct the administrator certification training program for the RCFE administrators.

Senate Bill (SB) 916 (Vasconcellos), Chapter 542, Statutes of 1997

Affects: Foster Family Homes

Subject: Foster Parent Training

Summary: This statute adds positive discipline and the importance of self-esteem to the list of training required of licensed foster parents. This addition does not change the implementation instructions on page seven of 97 APX-03 issued last year.

Senate Concurrent Resolution 17, (Watson) Resolution Chapter 92

Affects: Transitional Housing

Subject: Foster care.

Summary: This resolution states legislative findings and declarations regarding the challenges faced by foster youth, their rights and responsibilities in foster care, the need to encourage counties and the State Department of Social Services (DSS) to identify methods of expanding transitional housing services, and the need for DSS to consult with foster youth in improving the foster care system.

Senate Concurrent Resolution No. 27 (Kopp) Chapter 96, Statutes of 1997

Affects: Community Care Facilities, Foster Family Homes, Residential Care Facilities for the Elderly and Residential Care Facilities for the Chronically Ill.

Subject: Long-Term Care Program Report to the Governor and Legislature.

Summary: This resolution creates the Care Facilities Task Force, consisting of 16 representatives from local government and social service groups, to analyze issues related to long term care facilities. The task force will analyze issues related to the integration of residential care facilities; examine State licensing responsibilities, including the adequacy of resources to effectively execute its enforcement duties; examine the responsibilities of local governments in the oversight of residential care facilities; and make recommendations regarding State regulation of residential care facilities.

The resolution requires the Legislative Analyst to organize the task force. The task force must submit a report with recommendations to the Governor and the Legislature on or before January 31, 1998. The task force began meeting in October 1997.