REFERENCE MATERIAL

FOR

FACILITY EVALUATION/VISIT
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The purpose of this section is to provide the Licensing Program Analyst with a basic understanding of their role and responsibilities and how to conduct a facility evaluation. Emphasis will be placed on the facility evaluation process to enable the Licensing Program Analyst to recognize the various degrees of deficiencies and to determine the appropriate course of action because of assessing the “total picture.”

The mission of the Community Care Licensing Division is to protect the health and safety of children and adults in out-of-home community care facilities through the administration of a regulatory enforcement program.

The Licensing Program Analyst is the key staff person who is responsible for carrying out the mission of the Community Care Licensing Division in the field. To fulfill this responsibility, the Licensing Program Analyst uses the three Community Care Licensing Division program components:

1. **Prevention** - The reduction of predictable harm by screening out unqualified applicants and by providing applicants and licensed providers with information regarding the laws and regulations concerning the operation of Community Care Licensing Division facilities.

2. **Compliance** - The process that ensures that Community Care Licensing Division facilities are operated according to applicable laws and regulations. Compliance will be maintained through facility inspection, issuing deficiency notices, and providing consultation regarding the correction of deficiencies.

3. **Enforcement** - A range of corrective actions (from civil penalties to facility closure) taken when a provider fails to protect the health and safety of people in care or is unwilling or unable to maintain compliance with licensing laws and regulations.

The Licensing Program Analyst has contact with licensees, clients and others. The manner in which the Licensing Program Analyst conducts himself/herself is critical to the public image and success of the program. The attitude and approach that the Licensing Program Analyst exercises during this contact must reflect the Core Values of the Department:

**Compassion**
Treat all people with dignity, fairness and courtesy.

**Diversity**
Solicit and listen to all ideas from people of various backgrounds and philosophies. Include these same people in policy and program considerations.

**Simplification**
Eliminate unnecessary regulations and paperwork, de-emphasize process, and emphasize goals and outcomes.

**Service**
Provide effective and responsive service with skill and integrity.
3-4100  LICENSING PROGRAM ANALYST ROLE  (Continued)  3-4100

The expectation is that services are delivered in a courteous, prompt and professional manner. Rudeness or intimidation is never justified regardless of the level of cooperation from the licensee or facility representative. Unprofessional conduct nullifies or diminishes the authority needed to administer the program.

In order to be successful, the Licensing Program Analyst must have the ability to develop and sustain a well-balanced and business-like relationship with the licensee. This requires impartial evaluation of facilities to measure compliance, documentation of findings and providing verbal/written consultation. The Licensing Program Analyst must be objective and use good judgement when considering the intent of regulations, the context of the violation and the impact on those in care. Improper application of licensing laws and regulations invalidate legitimate citations and are more subject to challenges, appeals and unnecessary correspondence.

Advising (consultation) a provider on how to meet a regulatory requirement is an essential part of the Licensing Program Analyst role and is used in all three components of the program. The Licensing Program Analyst should be able to advise a provider as to how they can meet a regulatory requirement or correct a cited deficiency. Licensing Program Analysts have the authority to seek compliance with regulations through providing alternative solutions to a situation. Consultation to seek compliance must be restricted to regulatory requirements. Consultation also includes providing the licensee with information on their rights to appeal decisions and file complaints.

There is no requirement that Licensing Program Analysts must find some kind of a deficiency every time a site visit is made. The facility evaluation process (Section 3-4200) allows for a variety of actions to be taken by the Licensing Program Analyst to facilitate correction. The actions available to the Licensing Program Analyst range from issuing citations with very short correction times to not issuing a citation and providing advisory notes under specified conditions. In some instances the Licensing Program Analyst may observe conditions that require referral for suspension or revocation of license or involvement by law enforcement agencies. The following sections will provide the Licensing Program Analyst with the basic procedures to perform a facility evaluation.

3-4120  IDENTIFYING LICENSES THAT HAVE BEEN FORFEITED  3-4120

As part of effective caseload management, it is necessary to maintain an accurate database of currently licensed facilities. A well maintained database will prevent unnecessary site visits and provide management with accurate information that can be used in planning caseload assignments and allocating personnel. In order to achieve this goal, an ongoing effort should be made to identify facilities that are no longer currently licensed because the licenses have been forfeited by operation of law and to make sure this fact has been noted in the Licensing Information System (LIS).

While planning a facility visit of any type, the Licensing Program Analyst is presented an opportunity to update the licensing status in those cases where circumstances indicate forfeiture has or may have occurred. Please see Evaluator Manual Reference Material Section 3-4150 for information on the review of a facility file prior to conducting a visit.
IDENTIFYING LICENSES THAT HAVE BEEN FORFEITED (Continued) 3-4120

FORFEITURE:

The law provides for various situations in which the license shall be forfeited. If the license has been forfeited, the license is no longer valid. A facility that is no longer licensed should be removed from the database of currently licensed facilities, by the Licensing Program Analyst.

A license shall be forfeited (per Health and Safety Code Sections 1524; 1568.061; 1569.19 and 1596.858) under the following conditions:

1. The licensee sells or otherwise transfers the facility or facility property, except when change of ownership applies to transferring of stock when the facility is owned by a corporation and when the transfer of stock does not constitute a majority change of ownership.

2. The licensee surrenders the license to the department.

3. The licensee moves a facility from one location to another. NOTE: Except when the licensee follows procedures for relocating the facility.

4. The licensee is convicted of certain offenses as stated in Statute.

5. The licensee dies. NOTE: Check regulations promulgated for expediting applications submitted when licensee dies.

6. A license shall be forfeited when the certification issued by the State Department of Developmental Services to a licensee of an Adult Residential Facility for Persons with Special Health Care Needs (ARFPSHN), licensed pursuant to Article 9 of the Health and Safety (HS) Code (commencing with HS Code Section 1567.50), is rescinded.

7. The licensee abandons the facility.

In addition, failure of a licensee to pay all applicable and accrued fees shall constitute grounds for forfeiture of a license (See Health and Safety Code Sections 1523.1; 1568.05; 1569.185; 1596.803 and Evaluator Manual Section 3-1050).
3-4120 IDENTIFYING LICENSES THAT HAVE BEEN FORFEITED (Continued) 3-4120

FORFEITURE BY ABANDONMENT:

Except for Residential Care Facilities for the Chronically Ill and Family Child Care Homes, abandoning a facility means either:

1. The licensee informs Community Care Licensing that they no longer accept responsibility for the facility (Licensing Program Analyst enters LIS code 9 “licensee initiated” and sends letter 3-4126 confirming the forfeiture of their license).

   Or:

2. The licensing agency is unable to determine the licensee's whereabouts after the following:
   a. Information of the licensee's whereabouts could not be obtained from the facility's staff if any staff can be contacted and;
   b. The licensee has failed to respond to daily phone inquiries made for five consecutive days to the licensee’s last phone number of record and;
   c. The licensee fails to respond to a certified letter sent to the licensee’s last mailing address on record requesting the licensee to contact the agency within seven (7) calendar days.

The Licensing Program Analyst must refer to the following applicable California Code of Regulations, Title 22 regulations to determine whether the licensee has abandoned their license:

- 82035(b) Adult Day Programs
- 80035(a)(1) Community Care Facilities
- 87112(a)(1)(B) Residential Care Facility for the Elderly
- 101186(a)(2) Child Care Center

The sample letter in section 3-4125 (possible forfeiture of a license due to abandonment) may be used to fulfill the regulatory requirement to send a letter requesting the licensee to contact the department. While the Licensing Program Analyst is required to send it out Certified Mail it is also recommended to send an additional copy via regular mail. The sample letter in Reference Material Facility Evaluation/Visit Section 3-4126 (confirming forfeiture) may be used to notify the licensee once it is confirmed the license has been forfeited.

In the event that it is determined that a facility license has been forfeited due to abandonment, the Licensing Information System closure code “9 – Licensee Initiated” should be used. The Licensing Program Analyst is responsible to verify that the forfeiture/closure process is completed.
Abandonment (for Residential Care Facilities for the Chronically Ill and Family Child Care Homes)

For Residential Care Facilities for the Chronically Ill, Health and Safety Code Section 1568.061 and California Code of Regulations section 87835 provide for a forfeiture of license in the situations mentioned above, except for abandonment. The Licensing Program Analyst should consult legal counsel.

For Child Care Facilities (both centers and homes), Health and Safety Code 1596.858 provides for a forfeiture of license by operation of law in all situations, including abandonment. However, only the child care center regulations provide a meaning of “abandonment”. Family Child Care Homes’ regulations do not define “abandonment”. Therefore, if it appears that the licensee has abandoned the Family Child Care Home, the Licensing Program Analyst should consult legal counsel.

FORFEITURE BY FAILURE TO PAY FEES:

The failure of a licensee to pay all applicable and accrued fees shall constitute grounds for forfeiture of a license. Please see Health and Safety Code Sections 1523.1; 1568.05; 1569.185; 1596.803 and Evaluator Manual Section 3-1050.

The Licensing Program Analyst may use this opportunity to follow-up with a forfeiture letter if appropriate, update the facility file and input this information on the Licensing Information System (LIS).

It should be noted that for all facility types, except Foster Family Homes and Foster Family Agency Suboffices, a processing fee is required for an initial application, annual renewal, a change of location, a change of facility type, a change of ownership, and a change of capacity.

For specific instructions on processing a forfeiture due to the failure of the licensee to pay the fees please refer to the additional instruction references below.
3-4120  IDENTIFYING LICENSES THAT HAVE BEEN FORFEITED (Continued) 3-4120

ADDITIONAL INSTRUCTIONS REGARDING FORFEITURE:

In addition to the information provided in this section, please refer to Office Procedures Manual Sections 510, 511 and 521; Reference Material Facility Evaluation/Visits Sections 3-4120 and Reference Material Annual Visits/Fees Section 3-1050; and the following Evaluator Manual Regulation Interpretations and Procedures Sections:

- General Licensing Requirements (covering Small Family Homes, Community Treatment Facilities, Group Homes, Transitional Housing Placement Programs, Foster Family Agencies, Adoption Agencies, Social Rehabilitation Facilities, Adult Residential Facilities, and Adult Residential Facilities for Persons with Special Health Care Needs) 80035 and 80036
- Family Child Care Homes 102368
- Child Care Centers 101186 and 101187
- Residential Care Facilities for the Elderly 87112
- Residential Care Facilities for the Chronically Ill 87836

UPDATING THE STATUS OF THE LICENSE:

Effective case-load management will help the Licensing Program Analyst reduce the number of unnecessary visits to facilities that are not operating due to a change in the status of the license. The Licensing Program Analyst should always watch for indicators which could suggest the status of the facility license has changed. For instance, when reviewing the monthly “Comprehensive Visit List” or facility file prior to a visit, indicators of a change could include any of the following:

- Returned mail
- Facility is unresponsive to attempted contact.
- Licensing Program Analyst has had little contact with the facility for a prolonged period and has reason to question whether the facility is still operating. It is the responsibility of the Licensing Program Analyst (with supervisory guidance) to determine what constitutes a prolonged period of time.
- Failure to pay all applicable and accrued fees shall constitute grounds for forfeiture of a license. Refer to Reference Material Annual Visits/Fees Section 3-1050.
IDENTIFYING LICENSES THAT HAVE BEEN FORFEITED (Continued)

The Licensing Program Analyst may in some circumstances call the licensee to determine the current status of the facility. However, the Licensing Program Analyst must remember that in nearly all circumstances the law requires facility visits to be unannounced. Any person without lawful authorization who informs an owner, operator, employee or resident of a pending and unannounced site visit is guilty of a misdemeanor. Therefore, the Licensing Program Analyst must keep in mind that at no time during the interaction with a licensee should the Licensing Program Analyst divulge that the Department is about to make an unannounced comprehensive visit. See Health and Safety Code Sections 1540.2 (Community Care Facilities), 1568.0823 (Residential Care Facilities for the Chronically Ill), 1569.406 (Residential Care Facilities for the Elderly), and 1596.8915 (Child Care Facilities) regarding misdemeanors related to this type of action.

The following are some suggested examples for follow-up calls:

**RETURNED MAIL:**

Returned mail could suggest the facility has moved from one location to another; the licensee has died; or the licensee no longer accepts responsibility for the facility (abandoned) and thus the license can be forfeited by operation of law. If the Licensing Program Analyst determines the licensee no longer wishes to operate the business of running the facility, the license may be surrendered to the department, which shall also constitute a forfeiture of the license.

“We have sent Official California Department of Social Services correspondence via mail which was returned to us, has your mailing address changed?”

Or:

“Is the facility still located at this address of record?”

The Licensing Program Analyst must make sure that the Licensing Information System (LIS) has been updated to indicate the facility is no longer licensed. This will ensure that the license status data is current and the forfeited location will not be subject to unannounced site visits in future years.

However, if the licensee indicates the facility address is not current, but the licensee is operating at a new location, the Licensing Program Analyst must follow-up pursuant to regulations for that facility-type related to relocation fees. The Licensing Program Analyst will be required by law to make the unannounced random sample visit to the licensed location.
“What address would you like us to send your correspondence to?”

Or:

“What address should we be sending your correspondence to?”

UNRESPONSIVE FOR A PERIOD OF TIME:

If the licensee has been unresponsive for a period of time, depending on the type of facility, this could suggest the facility has moved from one location to another; the licensee had died; or the licensee no longer accepts responsibility for the facility (abandoned) and thus the license has been forfeited by operation of law.

If the facility has been unresponsive to attempted contacts or has not been recently contacted, the Licensing Program Analyst may inquire:

“We are updating our records and have not had any contact with you in some time. I’m calling to see if you are still in operation?”

Or:

“Are you operating?”

Or:

“Are there currently any clients at the facility?”

Or:

“Are you still responsible for running the facility?”

If the response indicates that the licensee no longer accepts responsibility for the facility, the license has been abandoned and thus forfeited by operation of law. The Licensing Program Analyst should refer to regulations for the facility type and send the appropriate forfeiture letter (abandonment).
CERTIFIED MAIL

Date

Name
Facility
License #
Address

SUBJECT: NOTICE OF POSSIBLE FORFEITURE OF LICENSE
(Due to Abandonment)

As Licensee of the facility at the above-referenced address, you are being asked to contact your local Community Care Licensing office at _________________.

Attempts by Community Care Licensing to contact you at the facility have failed. The Licensing agency is unable to determine your whereabouts.

Information of your whereabouts could not be obtained from the facility's staff, if any staff were contacted.

You have failed to respond to daily phone inquiries made for five consecutive days from __/____/____ through __/____/____ at the telephone number of record you provided to Community Care Licensing.

Your failure to respond to this letter within seven (7) calendar days will result in a forfeiture of your license due to your abandonment of the facility, pursuant to Health and Safety Code Sections 1524, 1569.19, or 1596.858.

The forfeiture of your license does not deprive the Department of its authority to institute or continue an administrative action against your license. If administrative action results in the revocation of your license, your application for a new license will not be processed until two years have elapsed from the date of the revocation pursuant to Health and Safety Code Section 1520.3, 1569.16, and 1596.851.

Sincerely,

______________________
[Name]
Regional Manager or designee
SUBJECT: FORFEITURE OF LICENSE

The license issued to you at the above facility address is forfeited pursuant to Health and Safety Code Sections 1524, 1568.061, 1569.19, or 1596.858. Your license is no longer valid and all provision of care and supervision must cease at this location. The reason for the forfeiture is:

[ ] Licensee has sold or transferred the facility or property

[ ] Licensee has surrendered the license to the Department. We acknowledge receipt of your license and/or your statement that you are surrendering your license. The surrender or your license does not deprive the Department of its authority to institute or continue an administrative action against you.

[ ] Licensee has moved from one location to another.

[ ] Licensee has been convicted of an offense specified in Section 220, 234.4 or 264.1, or paragraph (1) of Section 273a, Section 273d, 288, or 289 of the Penal Code, or is convicted of another crime specified in subdivision (c) of Section 667.5 of the Penal Code.

[ ] Licensee has abandoned the facility by informing Community Care Licensing that he/she no longer accepts responsibility for the facility.

[ ] Licensee has abandoned the facility due to the following:

1. Community Care Licensing has been unable to determine the licensee's whereabouts and information of the licensee's whereabouts cannot be obtained from the facility's staff, if any staff can be contacted; and
2. Licensee has failed to respond to daily phone inquiries made for five consecutive days from ___/____/____ through ___/____/____; and
3. Licensee failed to respond to letter dated ___/____/____.
Licensee has failed to pay the annual fee pursuant to Health and Safety Code Sections 1523.1 (Community Care Facilities), 1568.05 (Residential Care Facilities for the Chronically Ill), 1569.185 (Residential Care Facilities for the Elderly), or 1596.803 (Child Care Facilities). The forfeiture of your license does not deprive the Department of its authority to institute or continue an administrative action against your license. If administrative action results in the revocation of your license, your application for a new license will not be processed until two years have elapsed from the date of the revocation pursuant to Health and Safety Code Sections 1520.3, 1568.065, 1569.16, and 1596.851.

If you have not already done so, please send your license to the above address.

If you continue to operate a facility without a license you are in violation of the Health and Safety Code and may be subject to civil penalties. If you wish to operate a facility again, you must reapply and be approved for a new license.

If you have any questions about this action, you may call your Licensing Program Analyst at [Licensing Program Analyst’s phone number] or write to [local Community Care Licensing office’s address].

Sincerely,

_________________________
[Name]
Regional Manager or designee
3-4150 REVIEW OF FACILITY FILE

One of the most important functions prior to conducting a visit is reviewing the facility file. This review gives the licensing staff an overview of the facility’s history regarding previous visits, complaints, etc. The file review is also necessary to ensure all required forms and verifications are on file and up-to-date. Use the Facility Visit Checklist (forms LIC 9118 – 9123) for the appropriate facility type to review the file.

These forms include directing the Licensing Program Analyst to verify that all applicable licensing fees have been paid. Failure to pay licensing fees may be grounds for forfeiture of the license. Please refer to Office Procedures Manual Sections 510, 511 and 521; Evaluator Manual Reference Material Facility Evaluation/Visit Section 3-4120 and Reference Material Annual Visits/Fees Section 3-1050; and the following Evaluator Manual Regulation Interpretations and Procedures Sections:

- General Licensing Requirements (covering Small Family Homes, Community Treatment Facilities, Group Homes, Transitional Housing Placement Programs, Foster Family Agencies, Adoption Agencies, Social Rehabilitation Facilities, Adult Residential Facilities, and Adult Residential Facilities for Persons with Special Health Care Needs) 80035 and 80036
- Family Child Care Homes 102368
- Child Care Centers 101186 and 101187
- Residential Care Facilities for the Elderly 87112
- Residential Care Facilities for the Chronically Ill 87836

There are several reasons why a license may be forfeited in addition to failure to pay fees. An important step in preparing for a visit is to determine whether the license has been forfeited by operation of law and therefore is no longer valid. Please refer to Evaluator Manual Reference Material Facility Evaluation/Visit Section 3-4120; and the following Evaluator Manual Regulation Interpretations and Procedures Sections:

- General Licensing Requirements 80035
- Family Child Care Homes 102368
- Child Care Centers 101186 and 101187

PREPARING FOR THE VISIT:

In order to limit the likelihood that there will be a history of unsuccessful facility visit attempts and to minimize the number of return-visit efforts required of the field, the following strategies have been developed:

Licensing Program Managers will assist the Licensing Program Analysts to improve planning and time management by reviewing visit itineraries, particularly for any facility where a pattern of attempted yet failed visits has occurred.
Prior to any facility visit, the Licensing Program Analyst will review the facility files. The Licensing Program Analyst should note those instances where there may be a history of unsuccessful visit attempts at certain times of the day, or days of the week and plan the facility visit accordingly. For example, there may be programs where clients are routinely absent from the facility at certain times or days.

The Licensing Program Analyst should be prepared to use their field time as efficiently as possible by preparing ahead of time a list of other facilities in the area to visit in the event an initial facility visit is not successful due to reasons related to momentary non-operational status such as the absence of the licensee or staff, no clients present at the time of the visit, etc.

Licensing Program Analysts should prepare for a day of field facility visits by noting ahead of time the licensee and staff telephone numbers so that upon arrival at the facility site, if the necessary facility persons are absent, the Licensing Program Analyst can readily phone so that the visit can be completed. This will cut down on spending excessive time waiting at a facility, or leaving and returning multiple times. Any time spent waiting at the facility and subsequent attempts shall be documented on the LIC 812 and be available for future file review and facility visit planning.

In all cases where an attempted facility visit could not be completed, the Licensing Program Analyst must include a written explanation in the facility file concerning the reason/s the visit could not be completed. These field notes will be relied upon for future planning.

For State licensed facilities, the Central Operations Branch in Sacramento will receive a computer generated copy of the “Notice of Facility/Home Roster” 150 days prior to the anniversary date of the facility license. It will be the responsibility of Central Operations Branch to mail this Roster out to the licensee 120 days prior to the anniversary date of the license. The roster lists all persons associated with the facility/home, either cleared, exempted or pending.
The licensee is instructed to update the roster and return it to the Licensing Program Analyst with any required documents or verifications. This form will be helpful when the Licensing Program Analyst conducts the visit to verify the background check status of all persons working or residing in the facility. Whether the licensee returns the roster or not, the Licensing Program Analyst should print out a current copy of the roster to take to the facility for the visit.

An individual with a pending status may not work or reside in the facility until he/she receives a clearance or an exemption. If during the visit the Licensing Program Analyst finds evidence that an individual without a clearance or an exemption works or resides in the facility the Licensing Program Analyst must cite a Type A violation and assess an immediate civil penalty.

For County licensed facilities, it is important for the Licensing Program Analyst to verify the background check status of all individuals associated with the home prior to a visit to the home.

**3-4160  DEFINITION OF FACILITY EVALUATION VISITS**

**Pre-licensing Visit**

Pre-licensing visits are conducted prior to licensure to ensure the facility meets licensing requirements. If multiple visits are needed to verify that the facility has made the corrections needed to meet licensing standards, each visit is counted as a pre-licensing visit. Pre-licensing visits are made by appointment.

**Post Licensing Visit**

Post licensing visits are made within 90 days after a facility accepts its first resident for placement following its initial licensure. The department shall inspect the facility to evaluate compliance with rules and regulations and to assess the facility’s continuing ability to meet regulatory requirements. The licensee shall notify the department, within five business days after accepting its first resident for placement, that the facility has commenced operating. Post licensing visits are unannounced. **(Note: This does not apply to Foster Family Homes or Child Care).**

**Required Annual Visit**

Required annual visits are completed to review the facility operation prior to the license anniversary date. Required annual visits are unannounced, except at Foster Family Homes, where Licensing Program Analysts must schedule in advance with the licensee. Required annual visits are conducted for any of the following reasons:

a. When a licensee is on probation.
b. When the terms of agreement in a facility compliance plan require an annual evaluation.
c. When an accusation against a licensee is pending.
d. When a facility requires an annual visit as a condition of receiving federal financial participation.
e. In order to verify that a person who has been ordered out of a facility by the Department is no longer at the facility.

(See Evaluator Manual, Facility Evaluation/Visit, Section 3-4600 through 3-4620)
Random Sample Visit

Random sample visits are unannounced site visits that are to be made to no less than 20 percent of facilities not subject to annual visits to evaluate the facility’s compliance with licensing requirements.

(See Health and Safety Code, Section 1534 (a) (1)(B)

Complaint Visit

Complaint visits are made to facilities to investigate allegations lodged against the facility. If multiple visits are needed to complete a complaint investigation, each individual visit to the facility is recorded as a complaint visit. Visits that are made to verify the correction of deficiencies cited as a result of complaint investigations are counted as plan of correction visits, not as complaint visits. Complaint visits are unannounced.

(See Evaluator Manual, Complaints, Section 3-2010, 3-2011 and 3-3105)

Collateral Visit

Collateral visits are made in connection with complaint investigations, to follow up on incident reports, or to gather additional information needed as a result of any type of facility visit. When a visit is made to a location other than the facility that was the subject of the complaint, other licensing visit or incident, it is a collateral visit. An LIC 809, Facility Evaluation Report, is used to document a collateral visit when it takes place at a licensed facility. An LIC 812, Detail Supportive Information, is used for collateral visits that take place at locations that are not licensed by Community Care Licensing, such as hospitals, police stations or private residences.

Case Management Visit

Case management visits are made to facilities needing increased supervision, to review operational concerns, and/or consultation to the facility. The following are some reasons that case management visits may be generated:

- There is a pending administrative action or compliance plan that requires additional visits to the facility.
- One or more special incident reports raise concerns that the Licensing Program Analyst needs to review on site at the facility.
- The licensee of the facility asks for consultation that requires a visit to the facility.
- Deficiencies are observed during a complaint investigation by licensing program analysts that are not part of the allegations in the original complaint being investigated. For example, a Licensing Program Analyst may be investigating a complaint involving staffing ratios, but also observe a broken window or unlocked medications. Any deficiency associated with the complaint allegation would be documented on an LIC 9099 or LIC 9099D (Field Automated System) as a complaint visit, while the broken window or unlocked medication deficiencies would be documented on an LIC 809 or LIC 809D (Field Automated System) as a case management visit. Both a complaint and case management visit would be entered into the LIS for that facility.
DEFINITION OF FACILITY EVALUATION VISITS

Plan of Correction Visit

Plan of correction visits are made to facilities cited for licensing violations to determine if those deficiencies have been corrected. Plan of correction visits are unannounced.

FACILITY EVALUATION

The facility evaluation is the most important job performed by the Licensing Program Analyst. Through the evaluation process, one, two or all three components of the Community Care Licensing Division’s program (prevention, compliance and enforcement) are implemented. Using this process during the site visit, the Licensing Program Analyst will evaluate whether the facility is in substantial compliance with licensing laws and regulations. Substantial compliance is determined by an evaluation of the overall conditions of the facility and the health and safety of clients in care. During this evaluation, the Licensing Program Analyst will assess the various levels of violations and determine whether to cite the facility, provide verbal or written consultation or initiate no action at all. A flow chart of this process is shown in Section 3-4210. This process applies to all facility categories, including Family Child Care Homes and Foster Family Homes.

The purpose of citing facilities for violations of regulations is to ensure the health, safety and personal rights of the clients in care. When a violation of a regulation is observed, the Licensing Program Analyst has a responsibility to determine and assess if a citation is to be issued and the length of time by which correction must be completed. The basic factors to be considered in making this assessment are the consequences to those in care, the immediacy of the need to correct, the frequency of occurrences and the specific regulatory and/or statutory requirement. This assessment focuses on the type of clients served and the facility plan of operation. After making an assessment based on this criteria, the Licensing Program Analyst may cite a violation giving an immediate (24 hour) plan of correction, cite a violation with a longer plan of correction or provide consultation without issuing a citation. The Department shall specify in its licensing report all violations that, if not corrected, will have a direct and immediate risk to the health, safety, or personal rights of clients in care.

A.B & C Type Violation

The following is an explanation and examples of the three types of violations and how they are to be addressed by the Licensing Program Analyst. Actual documentation samples will be provided in the Documentation Section of the Evaluator Manual and through staff training.

Type A: Immediate Health, Safety or Personal Rights Impact - Are violations of the regulations and the Health and Safety Code that, if not corrected, have a direct and immediate risk to the health, safety or personal rights of those in care. Citations for these violations will always be issued even if the violation is corrected during the site visit (corrections will be noted on the licensing report). In some instances, violations of these types of regulations may present such a severe threat that it would require suspension or revocation of a license. In all cases the licensee must initiate corrective action to render the situation harmless as soon as possible. In most instances, full compliance is to be completed on the spot or within a 24-hour period. However, in some instances the final correction may be extended for up to 30 days if the licensee has initiated corrective action to minimize or eliminate the health and safety risk, the facility has a history of compliance, or other factors such as transfer trauma and the availability of an alternate placement. The Licensing Program Analyst must first consider these elements when granting this an extension.

EXAMPLES OF TYPE A VIOLATIONS: (AS APPLIED TO SPECIFIC HEALTH AND SAFETY SUBJECT AREAS)

- Criminal Record Clearance and Child Abuse Index Check – For all individuals who work, reside or have contact with clients, failure to obtain a criminal record clearance or exemption and, for facilities that care for children, a Child Abuse Index Check clearance.
**Fire Safety** - Violations of fire clearance regulations include over capacity, non-ambulatory clients when cleared for ambulatory only, or failure to maintain smoke detectors and/or fire extinguishers in operating condition. Since the Department is dependent upon fire authorities to determine appropriate fire and life safety standards, the licensee must always operate within the terms and limitations of the license and be approved by the State Fire Marshal or local fire authority.

**Personal Rights** - Violations that have a direct negative impact on either the physical or emotional well being of clients and children in care. These include violations such as: physical abuse, sexual abuse, verbal abuse, neglect, withholding food and water, the inappropriate use of restraints, locking clients/children in buildings (without licensing approval); the use of corporal punishment and the failure to safeguard the cash resources and/or valuables of those in care. In addition to immediate correction of personal rights violations, the licensee may be required to take other appropriate measures such as the suspension of employees and meeting reporting requirements.

**Telephones** - Failure to have a working telephone on the facility premises.

**Health Related Services** - Failure to treat injuries or illness and/or summon emergency medical personnel or a physician for injuries or illness; failure to ensure that needed medical care is provided to those in care; unlocked medications; inappropriate storage of medications (e.g. not refrigerating medications that require refrigeration); using or storing mislabeled, unlabeled, outdated or discontinued medications; not assisting with the taking of medications; or not dispensing medications “as prescribed”.

**Food Service** - Failure to maintain enough food to meet the needs of the clients for the next 24 hours; food contaminated with mold, fungus or bacteria; bloated or ruptured canned foods; infestation of insects or vermin; unsanitary conditions in food preparation areas that present an immediate health hazard; storing food next to or with toxic substances or poisons; or not providing modified diets as prescribed by a physician.

**Care and Supervision** - Failure to meet staffing ratio or staff are not present to meet the needs of clients in care; clients require a level of care that cannot be met by facility staff; Indicators of care and supervision problems include evidence of abuse, neglect, injuries or personal rights violations; wandering and AWOL clients; public nuisance complaints and other incidents that can be directly attributed to a lack of supervision.

**Buildings and Grounds** - No fence or approved cover for bodies of water; broken window glass in accessible areas; exposed live electrical wires; broken stairs or stair railings; poisons, toxic substances, materials with sharp or jagged edges and/or firearms in areas accessible to clients/children; unlit stairwells used by clients; broken or sharp edges on play equipment; or no cushioning under play equipment.

**Fixtures, Furniture, Equipment and Supplies** - Facility toilets are not in working condition or unavailable to clients; garbage is accessible to clients/children (excluding paper waste); unscreened fireplace or heaters that are in use; water is over 120 degrees F.; condition of bedding or towels is unsanitary to the extent it is a health and safety risk; furniture is broken and could cause injury if used; or failure to maintain enough basic hygiene items to meet the needs of those in care for the next 24 hours.
Water Supply - No current bacteriological analysis on private water source which establishes the safety of the water; or drinking water is not available

Type B: Potential Health, Safety or Personal Rights Impact - Violations of the regulations and the Health and Safety Code that, without correction, could become an immediate risk to the health, safety or personal rights of clients, or record keeping violation that would impact the care of clients and/or protection of their resources, or a violation that would impact those services required to meet clients’ needs. If correction is made during the site visit, a verbal or written consultation may be provided to the licensee by the Licensing Program Analyst. However, there may be a situation where the licensee repeats the same violation(s) over and over again due to apparent carelessness or intentional disregard of the regulations, the Licensing Program Analyst may issue a citation, require an explanation of the immediate or potential impact on the clients and/or on the facility’s plan of operation.

The decision by the Licensing Program Analyst to issue a citation or provide either a written or verbal consultation is based on the history of the facility, the frequency and degree of the violation, current overall condition of the facility and the existence of other violations. If the violation is not corrected during the site visit, a citation is always issued. The Licensing Program Analyst must be able to justify all citations, his or her findings and the course of action provided to the licensee to insure correction.

Examples of Type B Violations: (AS APPLIED TO SPECIFIC HEALTH AND SAFETY SUBJECT AREAS)

- **Reporting Requirements** - Failure to notify the Department within the next working day and provide a written report regarding incidents of abuse, neglect, death, injury which requires treatment by a licensed medical professional, fires or other disasters.

- **Record Keeping** - Failure to provide documented verification of staff qualifications; the designated administrator is not certified or has an expired administrator certificate; lack of admission agreements, immunization records, staff medical assessments, needs and services plans; no record of client’s personal and incidental funds; or no client medical records.

- **Personal Rights** - Failure to make arrangements for religious services; opening of client’s mail without authorization; restriction of phone use or visitors without approval from licensing.

- **Health Related Services** - No first aid supplies; failure to isolate clients/children with obvious signs of illness; or failure to notify parents of any illness or injury in a facility more serious than minor cuts and scratches.

- **Food Service** - Failure to maintain the required perishable and non-perishable food supplies; lack of menus to verify that clients’ dietary needs are met; failure to clean and sanitize dishes and utensils to ensure there is an adequate supply for the next meal; or malfunctioning refrigerator, freezer or stove that does not pose an immediate risk to clients, e.g. spoiled food.

- **Planned Activities** - No planned activities or notice of planned activities on file.
• **Buildings and Grounds/Personal Accommodations** - Changes/alterations in the use of the facility that could impact the capacity determination; multiple conditions that indicate an overall deterioration of the facility; or the failure to implement the plan of operation which includes maintenance and housekeeping. Indicators of an overall deterioration and failure to implement the plan of operation include widespread neglect of maintenance or unsanitary living and food preparation areas with no evidence of on-going corrective action.

• **Furniture, Fixtures, Equipment and Supplies** - Quality of furnishings should be cited as a Type B violation only when they are clearly damaged to the extent they are not functional (i.e. dresser is shabby, but operational vs. one that is broken and non-functional; a tear in the seat of a chair vs. exposed springs); inadequate number of toilets and sinks to meet the needs of the clients; or failure to provide a set of linens to each client.

**Type C: Technical Conditions** - Are for violations of the regulations that do not present an immediate (Type A) or potential (Type B) risk to the health, safety or personal rights of clients in care and where the licensee has complied with the regulatory requirements substantially in degree, frequency and intent. No citations will be issued for a technical violation(s).

Frequent Type C violations generally do not pose an immediate health and safety risk, but may be indicators of carelessness, intentional disregard, or problems with the facility plan of operation. Frequent or widespread violations of regulations that are usually considered technical can be elevated to a Type A or Type B if it is determined that an immediate or potential risk exists. In these cases, the violation is no longer considered technical (Type C) and is cited as either a Type A or Type B violation. When writing the deficiency statement on the Licensing Report, the Licensing Program Analyst must describe the condition and the impact on the health, safety or personal rights of the clients and/or the facility plan of operation.

For violations that are technical, the Licensing Program Analyst has the option of providing verbal or written consultation. The decision to provide either written or verbal consultation depends on the Licensing Program Analyst’s assessment based on the history of the facility, the frequency of the violations, the existence of other violations and the current overall facility operation. Written consultation for technical violations may include a description of specific items or groups of items to describe the general conditions of the facility. Failure to correct past technical violations alone does not warrant citation at subsequent visits if the conditions do not create a potential care and safety consequence. The primary objective of the written or verbal consultation is to ensure that the situation does not deteriorate further. Please refer to Evaluator Manual Section 3-4400 on Verbal/Written Consultation.

**EXAMPLES OF TYPE C VIOLATIONS:**

• **Reporting Requirements** - Failure to either call in or follow up with a written report those incidents not listed in Type B; missing information that is not critical on the incident report; reports not received in a timely manner when the licensee has reported all relevant information by phone.

• **Record Keeping** - Documents that are centrally stored that are required to be in each file; missing information on forms that is not critical to the care and services provided; a review of a significant sample size of required documents indicates only one document missing; or client’s records do not indicate ambulatory status and the evaluator has observed client is fully ambulatory.
• **Health Related Services** - One or two items missing from the first aid supplies.

• **Food Service** - Menus that are not dated; home-canned foods stored at facility and there is no evidence of contamination or that they are used by clients.

• **Building and Grounds** - Failure to obtain prior approval for minor construction or alterations that do not affect the services or capacity determination e.g., new garage door or new windows; defects on walls, ceiling, carpeting, floors, or tiles that do not create a dangerous condition.

• **Fixtures, Furniture, Equipment and Supplies** - Hot water temperature is two or three degrees below the minimum; or drawer space is available but does not meet the minimum requirements, i.e. one drawer large enough to accommodate all clothing instead of the minimum requirement of two drawers.

**VISIT PROTOCOL**

Prior to conducting a site visit, the Licensing Program Analyst must thoroughly review the facility file to familiarize himself/herself with the history of the facility and the client population served. For further instructions see Section 3-4150 Review of Facility File.

The Licensing Report LIC 809 will be used for all Required Annual Visits and Random Sample Visits. Apply the following criteria for all facility categories:

Before or upon entering the facility, the Licensing Program Analyst must identify himself/herself to the licensee or person in charge and explain the purpose of the visit. At this stage of the visit, it is important to establish good communication and allow the facility licensee or person in charge to discuss any concerns he/she may have regarding the visit. The site evaluation then must begin with an overall assessment of the facility. Throughout this evaluation, the Licensing Program Analyst will be making observations and taking notes. The facility evaluation includes, but is not limited to the following:

1. A walk through to inspect the entire facility and overall maintenance and operation, i.e. physical plant, building and grounds, and furniture, fixtures, equipment and supplies. The Licensing Program Analyst should always provide the option for the licensee or person in charge to accompany him/her during the walk through.

2. Interview a small sample of clients/residents and discuss any particular areas of interest and concern (i.e. food services, medication, care and supervision).

3. Determine if records are available and in place to review during the evaluation.

4. A complete review of regulations applicable to the facility category.

5. Documentation of Type A and Type B violations and Type C technical violations using either verbal and/or written consultation.
6. Completion of the exit interview with the facility operator or person in charge. During the exit interview it is the Licensing Program Analyst’s responsibility to review each violation and correction due date and provide verbal or written consultation on how corrections can be made. The licensee or person in charge is responsible for providing a written plan of correction on the licensing report for each violation cited.

Advise the licensee of their appeal rights and the procedures to follow. Provide the licensee with a copy of the LIC 9058 (Applicant/Licensee Rights and Appeal Procedures form). The licensee should also be informed that the appeal must be filed within ten days from the date of the report. Instructions on how to file the appeal are on the LIC 9058 form.

**ASSESSING THE RISK OF VIOLATIONS**

The Licensing Program Analyst must analyze the seriousness of each violation(s), document the findings and the appropriate course of action using the notations and observations he/she has made during the site visit. A risk assessment is necessary at times to help determine whether a violation of a regulation or statute is type A or type B.

1. **Identify the problem (violation)**

   Licensing Program Analyst may only cite a regulation or statute.

   For clarity, the Licensing Program Analyst must refer to the most specific regulation or statute when citing.

   Is the regulation/statute specific or is it general?

   Specific example: 80074(a) Only drivers licensed for the type of vehicle operated shall be permitted to transport clients.

   General example: 80078(a) The licensee shall provide care and supervision as necessary to meet the client's needs.

2. **Determine the Risk**

   The formula for this type of assessment is:

   ![Risk = Severity of the outcome & Probability of harm](formula)

   In order to assess risk, the Licensing Program Analyst must combine the severity of potential outcome with the probability of harm. When both are high, then the risk is high and the violation would most likely be a type A violation. As the risk diminishes, careful consideration should be given to whether the violation is type A or not. The Licensing Program Analyst must use these assessment criteria when evaluating whether to issue a Type A or B citation.

   a. **Assess Severity of Outcome.**

      Gauge the possible negative health or safety outcomes. Include all possible outcomes in the assessment.

      Example:

      One burned out light bulb in an 8 light chandelier would not result in serious harm, whereas a burned out light bulb over a dark stairwell has the potential of a serious injury.
b. **Assess Probability of Harm.**
   How likely is harm to occur as a result of the violation?

   Examples:
   - A broken light bulb with exposed shards in a table lamp in a common living area presents a greater probability of harm than exposed shards on a broken light bulb in a 20 foot high ceiling fixture.
   - A door leading to basement steps is left open:
     - If a client is an infant or physically disabled, the risk may be much greater.
     - If clients are present but are high functioning, there is less risk, but there is still a potential risk

3. **What mitigating factors are present (population type)?**

   Look at the client population to see what the level of risk is. Whether based on their age or on their cognitive level, some activities that contain risk are acceptable.

   Some activities present risk, yet prohibiting it may impinge upon the client’s rights.

   Example:
   - It may be acceptable for some clients to walk or use public transportation to work/school each day. These risks at times are acceptable and would be tolerated in the interest of respecting the dignity of the client as they should be afforded choices based on their legal right and ability to make decisions.

   - Generally facilities are not allowed to lock up food as it may deny clients their basic sustenance as well as impinge upon their personal rights. If the licensee locked up a client’s food, a mitigating factor might be that the client has Prader Willi Syndrome (excessive, uncontrolled eating). Due to this client’s dangerous behaviors and the health needs of the client, locking up the food may actually reduce a more serious risk and hence be appropriate, provided that the licensee adheres to all other nutrition related laws and regulations including food accessibility for the other clients.

   If the facility is located on a busy street, there will be some risk attributed to the location. Some questions to ask when assessing this risk may include:
   - Is this a risk that could be mitigated through maintenance (fencing), or increased supervision?
   - Is the client population at greater risk due to their lack of impulse control or decision making ability?

   These factors may also help in determining the plan for correcting the deficiency. Refer to **Evaluator Manual Section 3-3600, Plan of Correction.**
COLLECTIVE EVALUATION PROCESS - EXPLAIN THE CITATION.

The effective use of the facility evaluation process requires the Licensing Program Analyst to be familiar with the facility’s history, have an understanding of the characteristics and needs of the client population being served and be able to capture an overview of the conditions which affect the plan of operation. Collectively, this will provide the Licensing Program Analyst with the framework to understand how licensing regulations can be applied so as to temper enforcement with technical assistance and consultation and avoid citations that are trivial and insignificant to the health, safety, and personal rights of those in out-of-home care and the overall operation of the facility.

The Licensing Program Analyst must be able to justify his/her findings and the course of action provided to the licensee to ensure correction. If a statutory or regulatory requirement is specific, the written citation will identify the controlling statute or regulation, the deficiency observed and the location of the deficiency. When a statutory or regulatory requirement is not specific, the deficiency statement will require an explanation of the immediate or potential impact on clients and/or the facility plan of operation or how the specific statute or regulation was violated.

This explanation is critical when citing regulations that have language that is subject to many interpretations such as: “clean, safe sanitary and in good repair” or “safe, and healthful.

When citing regulations that are not specific, the Licensing Program Analyst must determine and analyze how or in what way a particular incident or condition will result in a negative impact to those in care. The responsibility for identifying the adverse impact to clients and providing justification to support the reason for a citation is on the Licensing Program Analyst. This information will enable the licensee to better understand a deficiency citation in terms of the nature of the problem, why it requires correction and what is needed to assure substantial compliance.
Review Facility File

Conduct Assessment of Facility

Evaluate Specific Conditions

Immediate Health, Safety or Personal Rights

TYPE A

Correction on the Spot
Not Corrected on the Spot

Cite – Note Correction
Cite-Give Short POC Due Date

MUST CITE

Potential Health, Safety or Personal Rights

TYPE B

Correction on the Spot
Not Corrected on the Spot

No Citation – LPA Judgement Based on History
Cite-Give Short POC Due Date

CITE OR ADVISE

Technical Conditions

TYPE C

Correction on the Spot
Not Corrected on the Spot

No Further Action Needed
Write Advice
Verbal Advice

DON’T CITE/ADVISE
The verbal/written consultation approach is a way to assist the licensee to maintain compliance with licensing laws and regulations without issuing a citation. The intent is to avoid issuing citations for violations that are technical in nature and do not present an immediate or potential health, safety or personal rights risk to those in care. A plan of correction or civil penalty notice will never be associated with a written consultation.

The Licensing Program Analyst has the option of providing a verbal or written consultation for a technical violation based on the history of the facility, frequency of violations and the existence of other violations. Verbal consultation will not be documented at all and no further action is required. However, a written consultation will be documented separately as “Advisory Notes” and are not to be filed in the public section of the facility file. The Advisory Notes are to be placed in the “Confidential” section of the facility file. Under the Public Information Act, the Department is required to disclose any information placed in the “Confidential” section of a facility file, unless statutory or regulatory requirements prohibit such disclosure. Since the Department has no such laws or regulations in place, Advisory Notes must be made available for public review upon request. The Advisory Notes must always be kept separate and must never be referenced or associated to the Licensing Reports or used as a basis to take administrative action against the licensee. Advisory notes are not citations. These notes will provide the licensee with advisory assistance without issuing a citation. They also provide a record for the Licensing Program Analyst to make reference on future visits for informational purposes only.

The primary purpose/objective of using written (Advisory Notes) or verbal consultation is to ensure that the situation does not deteriorate further. If the technical violation becomes so frequent and widespread as to pose an immediate or potential health and safety risk, Licensing Program Analysts should be citing as immediate or potential risk type violations instead of providing written (Advisory Notes) or verbal consultation. The citation, however, does not make reference to previous written (Advisory Notes) or verbal consultation, but rather, describes the condition and the impact on the health, safety or personal rights of the clients and/or the facility operation.

The notes can be brief and may include a description of the specific item(s) or groups of items to describe the general condition of the facility. These notes should be written in a narrative format, friendly in tone and should not list regulation numbers. Avoid using the terms “violation”, “deficiency”, “correction” and “penalty”. Please see the next page for an example of an advisory note.

In addition, the Licensing Program Analyst has the opportunity to document positive comments as long as they are specific to the condition(s) of the facility or staff. For example, the Licensing Program Analyst observed that on (date) all the children were engaged in an active and fun activity of coloring and painting and the activity room was kept clean and in an orderly fashion. The Licensing Program Analyst must avoid using overly broad or general comments that reflect overall facility operation (e.g. the facility is always clean or in my opinion, the licensee does an excellent job).
The following notes are not kept in the public section of the facility file and are provided to you to assist you in the maintenance and operation of your facility. This is not a citation.

On June 3, 2003, I observed several small holes in the living room walls and a couple of small tears on the curtain. I found these conditions did not affect the operation of the facility; however, you may want to patch up the holes and tears or alert your maintenance staff to these areas.

In addition, I found the food preparation area clean, orderly and in good repair.

Please contact me if you have any further questions at __________.
The information contained in this section is to provide examples that will enable the Licensing Program Analyst to recognize those conditions that are not violations of the regulations nor do they adversely impact the health, safety and personal rights of clients in care. These types of conditions are often a misinterpretation of the regulations. In some situations, the Licensing Program Analyst reads into the regulations more than what is required or applies his/her own standards of operation or housekeeping rules. For example, the Licensing Program Analyst should not cite for a small hole in the wall, or chipped paint, or a missing knob on the dresser unless he/she can apply it to a specific regulation and justify that there is an adverse impact to clients in care. These types of deficiencies are frequently cited under the general regulation section that states “the facility shall be clean, safe, sanitary and in good repair at all times for the safety and well being of clients, employees and visitors.” The Licensing Program Analyst should avoid using the general regulation section as a catch all for those conditions that have no impact or consequence to the clients in care. To cite under these types of situations/circumstances may be viewed as “nitpicking”.

It is the responsibility of the Licensing Program Analyst to present sufficient justification to explain why a condition is a violation of regulations. A citation, as written, must stand on it’s own merit. A licensee, a judge presiding over an administrative hearing, or others reviewing the public record should be able to readily understand the risk involved to clients and why such conditions need to be corrected. The examples below differentiate between those conditions not to be cited as they do not constitute a risk as written, and those conditions identified as having adverse consequences requiring citation and correction.

<table>
<thead>
<tr>
<th>Not Citable as Written</th>
<th>Justified as Requiring Citation</th>
</tr>
</thead>
<tbody>
<tr>
<td>One burned out light bulb among many working lights.</td>
<td>The hallway light bulb over the steps leading to the bathroom was burned out causing a nighttime hazard. There is no supply of bulbs on the premises - no staff member is designated to check bulbs.</td>
</tr>
<tr>
<td>Requiring licensee to wash outside Sandbox toy.</td>
<td>There was a large amount of animal excreta among the toys in the sandbox. The sand is contaminated. There is no sandbox cover available to prevent recurrence.</td>
</tr>
</tbody>
</table>
Some other examples of conditions that in most instances/circumstances are not to be cited are:

1. A cobweb on northeast side of the bedroom versus a cobweb with black widow spiders hanging on it;
2. Paint color is too bright or considered inappropriate;
3. Holes in living room walls that present no danger to clients;
4. Requiring a wall be painted because of soiled areas;
5. One burned out light among many working lights;
6. An uncovered pitcher of orange juice in a refrigerator that does not present a health hazard;
7. A small crack in the window versus a broken window;
8. A small tear in a curtain versus a shredded curtain;
9. A small tear in the fabric of a chair versus a chair with a broken leg;
10. Requiring cereals be stored in an airtight container rather than its original packaging or zip-lock bags;
11. Requiring the fireplace flue damper to be locked to prevent children from crawling up the chimney instead of the required screen to prevent access by children;
12. Requiring licensee to wash outside sandbox toys used by children when there is no evidence of health and safety hazards;
13. Requiring client’s records be in alpha order;
14. Requiring the facility to be spotless (white-glove treatment);
15. Citing a Family Day Care Provider that takes a lunch break outside the home once a week because it is not child care related;
16. Requiring both a 5 foot fence around the pool and a cover on the pool when only one or the other is required in regulation;
17. Requiring that dishes, glasses and utensils match;
18. Requiring bedspreads and curtains match;
19. Specifying that “glasses” versus other types of drinking cups be used, i.e. mason jars or disposable paper cups;
20. Citing the licensee for substituting hot turkey sandwich when the menu specified hot beef sandwiches.
As a result of the passage of Assembly Bill (AB) 1752 (Chapter 225, Statutes of 2003), Community Care Licensing will no longer make triennial visits to Family Child Care Homes or annual visits to all other facility categories. AB 1752 provides specific criteria for those facilities that the Department must visit annually. The facilities that meet the specific criteria as defined by statutes must receive an unannounced “Required Annual Visit”. The unannounced “Required Annual Visit” shall consist of a comprehensive evaluation.

In addition, the Department must conduct unannounced annual visits to no less than 10 percent of the other facilities not subject to the “Required Annual Visit”. The unannounced visits to the other facilities shall be conducted based on random sampling. Facilities subject to an unannounced “Random Sample Visit” shall also receive a comprehensive evaluation.

Required Annual Visits and Random Sample Visits to Foster Family Homes shall be announced. Licensing staff will notify the Foster Family Home licensee in advance of all visits, except in response to a complaint. Inspection visits to Foster Family Homes shall be made during normal business hours, unless the serious nature of a complaint requires otherwise. “Normal business hours,” are 8 a.m. to 5 p.m., inclusive, of each day from Monday to Friday, inclusive, other than State holidays.

Timely completion of complaint visits, case management visits, visits to follow-up incident reports, plan of correction visits and processing applications will continue to be priority activities, and will be an essential part of ongoing efforts to provide protection for clients in care.

Refer to Evaluator Manual Reference Material Section titled Comprehensive Evaluation Tools for category specific protocols to conduct a comprehensive evaluation.

Facilities that must receive a required annual visit are facilities that need closer attention either because of their compliance histories, or because of the Department’s inability to do any statistically effective sampling due to the small number of licenses in a given category. Facilities serving persons with developmental disabilities are to receive a required annual visit because the annual visit is a condition of continued federal funding. Following are the circumstances that would identify a facility to be subject to a “Required Annual Visit”:

1. Any facility on Probation or Provisional License status. ([Exception – Family Child Care Homes placed on Provisional License status due to failure to meet the required 15 hours of training on preventative health practices at the time of licensure are not subject to a required annual visit].)

2. Any facility that has had a Non-Compliance Conference with the Regional Manager or county equivalent within the past two years, and has agreed to a Compliance Plan documented by a LIC 9111 Noncompliance Conference Summary or a Compliance Plan Conference Letter, as referenced in the Enforcement Action, Non-Compliance with the Licensing Laws and Regulations Section 1-0110 of the Evaluator Manual.

3. Any facility that has had a license revocation action submitted to Legal. The facility would also be scheduled for a required visit within 90 days after the effective date of the revocation action. There is no need for follow-up by the local licensing office if it is known that the facility is not operating. This can be verified by visits from other
agencies or the execution of a temporary suspension order. At the time the Legal
decision is rendered and effective, and the 90-day visit is completed, the facility is
dropped from the required annual visit requirement unless it is on probation.

4. Any facility in which the licensee resides and an adult family member has been
   excluded during the past year.

5. Any facility where there is reason to believe that the facility may not have removed
   an employee that has been excluded.

6. Any facility which has been vendorized by a Regional Center to serve persons with
developmental disabilities, except for Foster Family Homes and Adult Day Programs.

7. Any facility in the following categories:
   - Child Care Center – Mildly Ill Children
   - Transitional Housing Placement Program
   - Community Treatment Facility
   - Small Family Home
   - Social Rehabilitation Facility
   - Residential Care Facility for the Chronically Ill

Contract counties must maintain a “required visit” list of facilities and the visits made.
Separate lists must be maintained for Foster Family Homes and Family Child Care Homes.

3-4620 RANDOM SAMPLE VISITS

Facilities not identified as needing required annual visits will be subject to a 10 percent
random sampling methodology developed by the Department of Social Services or the
contract licensing county. Facilities selected for the “Random Sample Visit” are to receive a
comprehensive evaluation.

- For all facility types except contract counties Family Child Care Homes and
contract counties Foster Family Homes, the Licensing Information System will
generate the 10 percent random sample visits and monthly lists of selected facilities
by caseload.

- Family Child Care Home contract counties will select a 10 percent random sample.
The method of sampling will be determined by the County based on the size of the
Family Child Care Home caseload. Each county must maintain written
documentation of the facilities visited as part of the sample as well as a tracking list
separate from the “required visit” list.
**Foster Family Home contract counties** will select a random sample of no less than 10 percent of the remaining Foster Family Home caseload. Counties may need to increase the sample to account for facility closures in order to ensure 10 percent of licensed facilities receive a visit. Those Foster Family Homes randomly chosen are to receive a comprehensive visit. The counties must develop their own random sample methodology to ensure that this provision is met. However, it is important to point out that AB 1752 requires that all Foster Family Homes receive a comprehensive visit at least once within five years. That means that, if necessary, the county must modify its sampling model to ensure that all facilities are visited at least once within a five year period.

For example, counties are to visit a 10 percent random sample of the remaining Foster Family Homes. Each county could select a new random 5 percent sample once every six months, commencing with November 2003. The method of sampling could require each county to select every 20th Foster Family Home from an alphabetical list of licensed Foster Family Homes, beginning with the first Foster Family Home on the list. For the second six month period, May 2004, select every 20th subsequent Foster Family Home. Remember to eliminate any Foster Family Home visited from the first sample and begin with the second Foster Family Home on the list.

Each Foster Family Home contract county must maintain written documentation of the Foster Family Homes visited randomly, as a separate list of the Foster Family Homes that receive annual visits. Counties with less than 50 licensed foster homes will instead pull their 10 percent sample twice each year. Counties that have 20 or fewer cases can pull a 10 percent sample once each year.

Facilities in the following categories are subject to a Random Sample Visit unless they meet the criteria for a Required Annual Visit as stated in Section 3-4610:

- Adoption Agency
- Foster Family Agency
- Foster Family Sub-Office
- Foster Family Homes
- Group Homes
- Adult Residential Facility
- Residential Care Facility for the Elderly
- Adult Day Programs
- Family Child Care Home
- School-Age Day Care
- Day Care Center