CHILD AND FAMILY SERVICES AGENCY AND DEPARTMENT OF HUMAN SERVICES

NOTICE OF FINAL RULEMAKING

The Director of the Child and Family Services Agency (hereinafter "the Director"), the Director of the Department of Human Services (hereinafter "the Director"), and the Administrator of the Youth Services Administration (hereinafter "the Administrator"), pursuant to the authority set forth in the *Youth Residential Facilities Licensure Act of 1986*, effective August 13, 1986, D.C. Law 6-139, D.C. Code § 3-803(a)(1) (hereinafter "the Act") the Mayor's Order 86-202, dated November 12, 1986, ("Delegation of Authority Pursuant to D.C. Law 6-139, the Youth Residential Facilities Licensure Act of 1986"), and the order of Judge Thomas C. Hogan, United States District Court for the District of Columbia, in the case *LaShawn v. Barry*, No. 89-1754 (Modified Final Order dated November 18, 1993), hereby give notice of the adoption of the following new Chapter 62 of Title 29 of the District of Columbia Municipal Regulations (hereinafter DCMR), entitled "Licensing of Youth Shelters, Runaway Shelters, Emergency Care Facilities, and Youth Group Homes".

The purpose of these rules is to establish criteria and procedures for the licensure of youth residential facilities by the Child and Family Services Agency and the Department of Human Services, Youth Services Administration, respectively.

As required by section 4 of the Act (D.C. Code § 3-303(d)), substantial weight was given to the formulation of these regulations, as provided in *Recommendations From The Mayor's Advisory Task Force On Regulations for Licensing Youth Residential Facilities*, dated June 30, 1987.

These rules first were published on May 11, 2001, at 48 DCR 4188. Changes were made based upon comments received at that time, and the rules were republished on July 27, 2001 at 48 DCR 6787. There are no changes to the republished rules.

Chapter 62 of Title 29 DCMR is added to read as follows:

CHAPTER 62

LICENSING OF YOUTH SHELTERS, RUNAWAY SHELTERS, EMERGENCY CARE FACILITIES, AND YOUTH GROUP HOMES

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6201 STATEMENT OF PURPOSE

- 6201.1 The purpose of this Chapter is to provide for the health, safety, and welfare of children who are receiving care in a youth shelter, runaway shelter, emergency care facility, or youth group home through the formulation, application, and enforcement of minimum standards and requirements for the licensing and operation of facilities serving children. Nothing shall prevent the contracting entity from imposing more stringent standards by contract.
- 6201.2 Providing for the health, safety, and welfare of children in youth residential facilities requires a collaboration between the facility, the licensing agency, and the contracting entity.
- 6201.3 Ensuring the health, safety, and welfare of children in youth residential facilities requires the placement of children in facilities serving children of similar ages, levels of development, and clinical needs in the least restrictive, most normative environment that is clinically appropriate.

6202 APPLICABILITY

- 6202.1 This Chapter applies to youth residential facilities which shall include youth shelters, runaway shelters, emergency care facilities, and youth group homes.
- 6202.2 This Chapter does not apply to foster homes, independent living programs, secure juvenile institutions, and residential treatment centers. Regulations governing foster homes, independent living programs, secure juvenile institutions, and residential treatment centers are contained in separate Chapters.
- 6202.3 This Chapter does not apply to informal substitute care provided by friends or neighbors or those facilities licensed under the Health-Care and Community Residence Facility, Hospice and Home Care Licensure Act of 1983, effective February 24, 1984, D.C. Law 5-48, D.C. Code § 32-1301 et seq.
- 6202.4 The Child and Family Services Agency (CFSA) shall license all youth residential facilities except for those facilities intended primarily for detained or delinquent youth or persons in need of supervision (PINS). The Department of Human Services, Youth Services Administration (YSA) shall license youth residential facilities intended primarily for detained or delinquent youth or PINS.

6203 STATEMENT OF RESIDENTS' RIGHTS AND RESPONSIBILITIES

- 6203.1 The facility shall conspicuously post the "Statement of Residents' Rights and Responsibilities" in the facility. This statement shall include all of the residents' rights and responsibilities contained in this section.
- 6203.2 A resident has the right to be treated with fairness, dignity, and respect.

- A resident has the right to receive appropriate and reasonable adult guidance, support, and supervision, consistent with the resident's age and level of development.
- 6203.4 A resident shall not be abused, mistreated, threatened, harassed, or subjected to corporal punishment or to other unusual or extreme methods of discipline.
- 6203.5 A resident has the right to have his or her opinion heard and to be included, to the greatest extent possible, and consistent with the resident's age and level of development, when any major decisions, including regular case planning meetings, are being made affecting his or her life.
- 6203.6 A resident has the right to reasonable and clinically appropriate visitation, mail, and telephone communication with relatives, friends, significant others, attorneys, social workers, therapists, and guardians ad litem.
- A resident has the right to have his or her relatives and designated representatives, who are authorized in writing by the contracting entity, to communicate with the facility, ask questions of the facility, and have their questions answered promptly by the facility.
- 6203.8 A resident has the right to language translation, if necessary.
- 6203.9 In accordance with the District of Columbia Human Rights Act of 1977, as amended, effective December 13, 1977, D.C. Law 2-38, D.C. Code section 1-2501 et. seq., a resident shall not be discriminated against on the basis of race, color, religion, national origin, sex, age, marital status, personal appearance, sexual orientation, familial status, family responsibilities, matriculation, political affiliation, disability, source of income or place of residence or business.
- 6203.10 A resident shall have all other rights specifically set forth in this Chapter.
- 6203.11 A resident shall accept responsibility, consistent with his or her age and level of development, for keeping his or her room(s) and possessions in good order and for completing assigned daily or weekly chores.
- 6203.12 A resident shall comply with the policies and procedures governing his or her conduct.
- 6203.13 A resident shall participate in the facility's programs and activities.
- 6203.14 A resident of school age shall attend school or other alternative education programs, except in extenuating circumstances and such circumstances shall be documented in the resident's case record.
- 6203.15 A resident shall follow appropriate minimum personal care and hygiene standards established by the facility, consistent with each resident's physical and developmental capabilities.

6204 REPORTING OF ABUSE, NEGLECT OR OTHER RISKS TO RESIDENTS' HEALTH AND SAFETY

- Any staff member who receives information concerning, or personally observes, an incident of alleged or actual child abuse or neglect, or has any other information indicating an alleged or actual risk to a resident's health or safety, shall make an immediate oral report and a written report within twenty-four (24) hours to the:
 - (a) CFSA's twenty-four (24) hour Child Abuse and Neglect Hotline (202 671-SAFE);
 - (b) Contracting entity social worker, case manager, or supervisor for the resident who is the subject of the report;
 - (c) Court Social Services Division (CSSD) social worker, where applicable;
 - (d) Licensing agency;
 - (e) Contracting entity; and
 - (f) CSSD, where applicable.
- 6204.2 Any staff member who believes that a resident is in serious and immediate danger shall take immediate steps to protect the resident including, as appropriate, removing the resident from the danger.
- 6204.3 In the oral and written report required in § 6204.1, the staff member shall state:
 - (a) The name, age, sex, and address of the resident who is the subject of the report;
 - (b) That the resident who is the subject of the report is a resident of the facility;
 - (c) The name, address, and telephone number of the facility;
 - (d) The name, occupation, address, and telephone number of the staff member making the report;
 - (e) That the resident is in the custody of CFSA or YSA, or under the supervision of CSSD;
 - (f) The name and telephone number of the contracting entity social worker or case manager for the resident who is the subject of the report;
 - (g) The name and telephone number of the CSSD social worker for the resident who is the subject of the report, where applicable;
 - (h) The nature and extent of the alleged or actual child abuse or neglect, or alleged or actual risk to the resident's health or safety;

- (i) The person responsible for the alleged or actual child abuse or neglect, or alleged or actual risk to the resident's health or safety;
- (j) The staff member's actions taken in response to the alleged or actual child abuse or neglect, or alleged or actual risk to the resident's health or safety;
- (k) Any previous reports of alleged or actual child abuse or neglect, or alleged or actual risk to a resident's health or safety;
- (l) Any other information which may be helpful in establishing the cause of the alleged or actual child abuse or neglect, or alleged or actual risk to a resident's health or safety; and
- (m) Any other information required by law, including but not limited to the requirements contained in section 103(b) of The Prevention of Child Abuse and Neglect Act of 1977, effective September 23, 1977, D.C. Law 2-22, D.C. Code § 2-1351.
- 6204.4 In the written report required in § 6204.1, for each resident in the facility the staff member shall state the:
 - (a) Name of the resident;
 - (b) Name of the contracting entity;
 - (c) Telephone number of the contracting entity;
 - (d) Name of the contracting entity social worker or case manager and, where applicable, the name of the CSSD social worker; and
 - (e) Telephone number of the contracting entity social worker or case manager and, where applicable, the telephone number of the CSSD social worker.
- 6204.5 Upon receipt of notification pursuant to § 6204.1, the Child Abuse and Neglect Hotline shall immediately notify:
 - (a) The CFSA and YSA joint Office of Licensing and Monitoring;
 - (b) If the resident is in the custody of CFSA, placement staff and the CFSA Director;
 - (c) If the resident is in the custody of YSA, placement staff and the YSA Administrator;
 - (d) If the resident is under the supervision of CSSD, the Director of CSSD;
 - (e) The contracting entity social worker, case manager, or supervisor for the resident who is the subject of the report; and

- (f) The CSSD social worker for the resident who is the subject of the report, where applicable.
- 6204.6 CFSA shall investigate each report provided pursuant to § 6204.1. As part of this investigation:
 - (a) Within twenty-four (24) hours of receiving notification pursuant to § 6204.1, the CFSA intake social worker and the licensing monitor shall jointly commence the investigation;
 - (b) Within forty-eight (48) hours of receiving notification pursuant to § 6204.1, the Office of Licensing and Monitoring shall convene a meeting to share necessary information and develop a plan for completing the investigation;
 - (c) The Office of Licensing and Monitoring shall convene further meetings necessary to complete the investigation;
 - (d) The licensing agency shall remove residents from the facility, if appropriate;
 - (e) The licensing agency shall not place any additional residents in the facility until the investigation is complete;
 - (f) The facility and staff shall cooperate fully and shall not interfere with the investigation; and
 - (g) The licensing agency shall visit the facility at least once a week until the investigation is complete.
- 6204.7 Within thirty (30) calendar days, CFSA shall complete the investigation undertaken pursuant to § 6204.6, document its findings in a written report, and provide a copy of this report to the CFSA and YSA joint Office of Licensing and Monitoring, the contracting entity, the licensing agency, the facility, any court which has jurisdiction over any resident in the facility, the parent(s) or guardian(s) of any resident in the facility, the guardian ad litem of any resident in the facility and, where applicable, the CSSD.
- 6204.8 Following receipt of each oral report provided pursuant to § 6204.1, the licensing agency shall investigate the facility to assess compliance with this Chapter and the facility's ability to provide for the residents' health and safety.
- 6204.9 Within five (5) business days of receiving the written report required under § 6204.7, the licensing agency shall complete a separate written report indicating whether the licensing agency intends to take any action as a result of the licensing agency's investigation, including but not limited to the imposition of civil fines, penalties, and related costs against the facility, the conversion of the facility's license to a provisional license, the conversion of the facility's license to a restricted license, the suspension of the facility's license, or the revocation of the facility's license. The licensing agency

shall provide a copy of this report to the persons listed in § 6204.7 and discuss this report with the facility.

6204.10 The contents of the report required under § 6204.9 shall not affect the licensing agency's authority under this Chapter to take any action as a result of the investigation, including but not limited to the right to impose civil fines, penalties, and related costs against the facility, to convert the facility's license to a provisional license, to convert the facility's license to a restricted license, to suspend the facility's license, or to revoke the facility's license.

6204.11 The facility shall:

- (a) Inform all staff and residents of the facility's policies and procedures relating to child abuse or neglect and risk to resident's health or safety; including how to report suspected abuse or neglect and risk to resident's health or safety;
- (b) Require staff to immediately report, and cooperate with officials investigating, all alleged or actual child abuse or neglect, or alleged or actual risk to a resident's health or safety;
- (c) Inform all residents and staff that they do not have to notify or obtain permission from the facility or another staff member before reporting any incidence of alleged or actual child abuse or neglect, or alleged or actual risk to a resident's health or safety;
- (d) Place staff identified as allegedly responsible for the alleged or actual child abuse or neglect, or alleged or actual risk to a resident's health or safety, on administrative leave or reassignment to duties involving no contact with residents until the investigation required by § 6204.6 is complete; and
- (e) Ensure that residents and staff may report incidents involving alleged or actual child abuse or neglect, or alleged or actual risk to a resident's health or safety, without threat of discharge or other retaliation.
- 6204.12 The provisions of this section are in addition to any other legal requirements related to the reporting of child abuse and neglect, including but not limited to the requirements contained in section 103(b) of The Prevention of Child Abuse and Neglect Act of 1977, effective September 23, 1977, D.C. Law 2-22, D.C. Code § 2-1351.

6205 GRIEVANCE PROCEDURES

6205.1 A grievance is a complaint based upon relations between residents, relations between residents and staff, the facility's programs and physical conditions, the use of discipline, or other issues concerning the resident's care, but not based upon alleged abuse or neglect or alleged criminal activity. A grievance may be brought by a resident or brought on a resident's behalf by his or her representative, parent(s) or guardian(s), attorney, guardian ad litem, or staff. Allegations of abuse or neglect shall be reported

- pursuant to § 6204. Alleged criminal activity shall be reported to the Metropolitan Police Department.
- 6205.2 Each facility shall develop and follow a written plan for clear and simple grievance procedures regarding the receipt, consideration, and resolution of grievances.
- 6205.3 The facility shall post a copy of the grievance procedures in the facility and explain and give a copy to each resident, and to the resident's parent(s) or guardian(s) upon admission
- 6205.4 The facility shall obtain a statement signed by each resident, and the resident's parent(s) or guardian(s), acknowledging receipt of a copy of the facility's grievance procedures or documentation of efforts made to obtain the signature.
- 6205.5 The facility shall ensure that a person filing a grievance is not required to transmit a grievance through the person who is the subject of the grievance.
- 6205.6 The facility shall ensure against retaliation by staff or by other residents against the person making the grievance and, where the grievance is filed by the resident's representative, parent(s) or guardian(s), attorney, guardian ad litem, or staff, the facility shall ensure against retaliation against the resident.
- 6205.7 Each facility shall establish and maintain a grievance board composed of at least two staff members and one resident. The grievance board shall resolve all grievances.
- 6205.8 The facility shall ask each resident filing a grievance or who is the subject of a grievance whether the resident objects to having another resident participate in the resolution of the grievance. If the resident filing the grievance or who is the subject of the grievance objects, no resident shall serve on the grievance board resolving the grievance.
- 6205.9 Under no circumstances shall the resident making the grievance or who is the subject of the grievance participate on the grievance board. If the resident member of the grievance board makes a grievance or is the subject of a grievance, the facility shall appoint a separate resident to the grievance board to resolve the grievance.
- 6205.10 The facility shall ensure that a grievance is resolved within fourteen (14) calendar days of the filing of the grievance.
- 6205.11 The facility shall promptly inform in writing the person filing the grievance and the resident who is the subject of the grievance of the results of the grievance.
- 6205.12 The facility shall file the written results of the grievance in the case record of the resident who filed or is the subject of the grievance.
- 6205.13 The facility shall maintain written records of all grievances filed and all grievance decisions and, upon request, shall make those records available to the licensing agency.

6206 TYPES OF LICENSES

- All facilities, whether public or private, for profit or not for profit, shall be licensed in accordance with this Chapter no later than six (6) months after the effective date of this Chapter, provided however that the continued operation of a facility pending action by the licensing agency on an application for an original license or the renewal of an annual license shall not be deemed unlawful if a completed application timely was filed but, through no fault of the facility, the licensing agency failed to act on the application before the expiration of the facility's authorized period of operation. A facility operating under this section shall comply with all other provisions of this Chapter.
- An annual license permits a facility to operate a youth residential facility pursuant to the terms of this Chapter and sets forth the conditions under which the facility may operate. An annual license shall be valid for a period of no longer than one (1) year from the date it is issued. As provided in § 6209, an original annual license is the initial annual license for a new facility. As provided in § 6210, a facility obtains a subsequent annual license by applying for the renewal of an annual license.
- 6206.3 As provided in this Chapter, the applicable licensing agency may:
 - (a) Modify an existing license;
 - (b) Grant a facility a variance;
 - (c) Impose civil fines, penalties, and related costs against a facility;
 - (d) Convert a license to a provisional license;
 - (e) Convert a license to a restricted license;
 - (f) Suspend an existing license; or
 - (g) Revoke an existing license.
- 6206.4 A provisional license allows the facility to continue operating while attempting to satisfy the requirements of an annual license. A provisional license shall expire in no more than ninety (90) calendar days and shall be renewed no more than once (1).
- 6206.5 A restricted license allows the facility to continue operating but prohibits the facility from accepting new residents or providing certain specified services that it otherwise would be authorized to provide. A restricted license shall expire in no more than ninety (90) calendar days and shall not be renewed.
- 6206.6 As provided in § 6211, the applicable licensing agency may modify any existing license if the facility intends to operate under conditions which are different than those provided in the existing license. A facility whose license has been modified shall comply with the provisions of this Chapter.

As provided in § 6212, the applicable licensing agency may grant a facility permission to depart from a requirement of this Chapter. The applicable licensing agency may approve such a variance upon showing of hardship and manifest public need, provided that the variance is not deleterious to the residents' health, safety, or welfare.

6207 GENERAL LICENSING PROCEDURES

- 6207.1 Applicants shall file a license application with the applicable licensing agency, including applications for an original annual license, applications for renewal of an annual license, and applications for modifications of a license. The applicable licensing agency shall not charge the facility a fee for any license or license application.
- 6207.2 Upon receipt of an original annual license application or application for renewal of an annual license, the applicable licensing agency shall conduct a sanitary and environmental inspection of the facility and request a fire inspection of the facility.
- 6207.3 Prior to issuing the original or renewal of an annual license, the applicable licensing agency shall conduct an on-site inspection of the facility to ensure compliance with this Chapter. The facility's failure to cooperate during the inspection is grounds for denial of the original annual license application or application for renewal of an annual license.
- 6207.4 A license shall be valid for the person(s), address, and type and capacity of facility stated on the license.
- 6207.5 A license automatically expires upon a change of address of the facility.
- 6207.6 Facilities that are planning to transfer ownership shall give the licensing agency at least sixty (60) calendar days advance written notice before transferring ownership of a facility, including, in the case of a corporate licensee, any transfer of the legal or beneficial ownership of ten percent (10%) or more of the stock of the corporation. Upon notification, the licensing agency may conduct an investigation or require reinspection to ensure that the facility will remain in compliance with this Chapter.
- 6207.7 Each facility shall submit to the applicable licensing agency such periodic and special reports as may be required, including service, financial, personnel, and statistical information, and a periodic census of residents under care.
- 6207.8 The licensing agency may enter the facility at any hour for the purpose of conducting an announced or unannounced inspection to check for compliance with this Chapter or any other law.
- 6207.9 The facility's records shall be made available to the applicable licensing agency and contracting entity upon request.
- 6207.10 The licensing agency shall make all licensure and inspection reports available to the public upon request and shall notify CFSA, YSA, CSSD, the Department of Mental Health, the District of Columbia Public Schools, and any child-placing agency

whenever a facility's license is suspended, revoked, converted to a provisional or restricted license, or not renewed, as required by section 6 of the Act (D.C. Code § 3-805(d)).

6208 FACILITIES IN OTHER JURISDICTIONS

- 6208.1 At least once (1) a year, the applicable licensing agencies shall conduct site visits of all facilities caring for District of Columbia children outside the District of Columbia to ensure that each of these facilities is in substantial compliance with these rules and all other applicable laws, as required by section 6 of the Act (D.C. Code § 3-805(a)(2)).
- 6208.2 All facilities caring for District of Columbia children outside the District of Columbia shall provide the licensing agency with a current copy of a valid license from the jurisdiction in which the facility is operating.

6209 ORIGINAL ANNUAL LICENSE

- An applicant for an original annual license for a youth residential facility shall submit an application on a form available from the applicable licensing agency.
- 6209.2 The applicant shall file the following materials with the application for an original annual license:
 - (a) A statement of the ownership of the facility, including the names and addresses of all owners or, in the case of corporations, both profit and non-profit, the officers and board members:
 - (b) Copies of all certificates of approval, authority, occupancy, or need that are required as a precondition to lawful operation in the District of Columbia;
 - (c) A projected one year operating budget, and documentation of sufficient funds for at least three (3) months;
 - (d) Financial statements (including without limitation cash flow statement, income statement, and balance sheet), audited or unaudited, prepared in accordance with generally accepted accounting principles for each of the immediately preceding two (2) years, or the duration of the applicant's existence, whichever is shorter;
 - (e) Certificates of insurance required under § 6221;
 - (f) A plan for satisfying the requirements of the District of Columbia Fire Prevention Code Supplement, Title 12D District of Columbia Municipal Regulations (DCMR), including a fire evacuation plan and exit drills;
 - (g) A description of the intended staffing of the facility that will ensure coverage on a twenty-four (24) hour per day, seven (7) day per week basis including availability of emergency on-call staff and job descriptions and qualifications for all intended staff;

- (h) A written procedure for reporting abuse, neglect and other risks to residents' health or safety;
- (i) A plan for meeting the emergency medical needs of the residents and evidence of access to emergency mental health services for residents;
- (j) Documentation establishing that all prospective and existing staff have undergone a criminal records check;
- (k) Documentation establishing that all prospective and existing staff have undergone a child protection register check;
- (l) Documentation establishing that all prospective and existing staff have undergone medical examinations, including a physician's opinion concerning the prospective or existing staff member's general physical condition, freedom from disease in a communicable form, and ability to work closely with or care for children without danger to the children; and
- (m) Documentation establishing that all prospective and existing staff have undergone drug and alcohol testing.
- (n) A list of other youth residential facilities the applicant presently operates or operated within the past three (3) years.
- (o) A detailed statement identifying, describing, and summarizing the current status of all court and administrative proceedings involving or relating to the applicant, the applicant's staff, youth residential facilities the applicant operates or ever operated, staff of youth residential facilities the applicant operates or ever operated, facilities in other jurisdictions that the applicant operates or ever operated and that is or was functionally similar to a youth residential facility, and staff of facilities in other jurisdictions that the applicant operates or ever operated and that is or was functionally similar to a youth residential facility.
- (p) A detailed statement identifying, describing, and summarizing the current status of all corrective actions, fines and penalties presently or previously imposed against the applicant, the applicant's staff, youth residential facilities the applicant operates or ever operated, staff of youth residential facilities the applicant operates or ever operated, facilities in other jurisdictions that the applicant operates or ever operated and that is or was functionally similar to a youth residential facility, and staff of facilities in other jurisdictions that the applicant operates or ever operated and that is or was functionally similar to a youth residential facility.
- 6209.3 An applicant for an original annual license shall accompany the application with an outline of the facility's plan to comply with the requirements set forth in this Chapter concerning the following:
 - (a) Continuing care, emergency care, therapeutic care, and aftercare:

- (b) Educational, medical, rehabilitative, and mental health services, recreational activities, parental and family involvement, the use of discipline and restraint, and the prevention of abuse;
- (c) The ratio of staff to residents (excluding volunteers and staff not providing direct care and supervision of residents), caregiver qualifications, and ongoing staff training;
- (d) Resident nutrition and hygiene;
- (e) Confidentiality and privacy with respect to a resident's person, property, living quarters, case records, and subjection to searches for contraband;
- (f) Safety and sanitation with respect to all parts of the facility and grounds, fire protection and prevention, first aid, and the facility's electrical, heating, cooling, ventilation, and water systems;
- (g) Environment, structure, and architecture; and
- (h) Resident admissions and discharges, operating procedures, fiscal management, complaint investigation and review, quality assurance, recordkeeping and reporting.
- 6209.4 The applicable licensing agency shall review the information provided pursuant to §§ 6209.2 and 6209.3, the sanitary and environmental inspection and fire inspection reports of the facility required under § 6207.2, and the on-site inspection report of the facility required under § 6207.3, and either grant or deny an application for an original annual license within ninety (90) days of receiving the information required by §§ 6209.2 and 6209.3. If the applicable licensing agency denies the facility's application for an original annual license, the applicable licensing agency may issue the facility a provisional license.
- 6209.5 The applicable licensing agency shall notify the applicant in writing of the decision to grant or deny an original annual license application, including a statement of the grounds for the decision and notification of the facility's right to a fair hearing in accordance with 29 DCMR Chapter 59.
- 6209.6 If the licensing agency denies an application for an original annual license and issues the facility a provisional license, and the licensing agency determines that the owner of the provisional license satisfies the requirements of an annual license, the applicable licensing agency shall issue the facility an original annual license.
- 6209.7 Upon approval of an application for an original annual license, the applicable licensing agency shall mail the applicant a license that sets forth the conditions under which the facility may operate.

6210 ANNUAL LICENSE RENEWAL

- An applicant for the renewal of an annual license shall submit the application on a form approved by the applicable licensing agency. The applicant shall submit the application to the applicable licensing agency at least two (2) but not more than three (3) months prior to the expiration of the current annual license.
- 6210.2 The applicant shall file the following materials with the application for the renewal of an annual license:
 - (a) A report of any changes in the information required by §§ 6209.2 and 6209.3, including copies of any applicable documents and any major changes contemplated for the coming year;
 - (b) Documentation establishing that staff medical examinations have been performed every twenty-four (24) months, as required in § 6228.6 herein;
 - (c) Documentation establishing that criminal records checks have been performed on all staff within the past two years;
 - (d) Documentation establishing that child protection registry checks have been performed on all staff within the past year;
 - (e) An annual financial statement (including without limitation a cash flow statement, income statement and balance sheet), audited or unaudited, prepared in accordance with generally accepted accounting principles (GAAP);
 - (f) A copy of the facility's budget; and
 - (g) Certificates of insurance required under § 6221.
- 6210.3 The applicable licensing agency shall review the information provided pursuant to §§ 6210.2, the sanitary and environmental inspection and fire inspection reports of the facility required under § 6207.2, and the on-site inspection report of the facility required under § 6207.3, and either grant or deny an application for a renewal of an original annual license within ninety (90) days of receiving the information required by § 6210.2. If the applicable licensing agency denies the facility's application for renewal of an annual license, the applicable licensing agency may issue the facility a provisional license or a restricted license.
- 6210.4 The applicable licensing agency shall notify the applicant in writing of the decision to grant or deny an application for renewal of an annual license, including a statement of the grounds for the decision and notification of the facility's right to a fair hearing in accordance with 29 DCMR Chapter 59. A facility whose license has expired and whose request for renewal of an annual license has been denied may not continue to operate while a request for a fair hearing is pending.

- 6210.5 If the applicable licensing agency determines that the owner of a provisional license or a restricted license satisfies the requirements of an annual license, the applicable licensing agency shall issue the facility a renewal of an annual license.
- 6210.6 Upon approval of an application for renewal of an original annual license, the applicant will receive by mail a license that sets forth the conditions under which the facility may operate.

6211 MODIFICATION OF LICENSES

- 6211.1 The applicable licensing agency may modify any existing license at any point during the licensing year upon request by a facility or the applicable licensing agency, provided that the modification is not deleterious to the residents' health, safety, or welfare.
- A facility seeking a modification shall apply in writing to the applicable licensing agency stating the reasons for the request, attaching all relevant information, and providing any additional information that the applicable licensing agency may require. The facility shall state the different conditions under which the facility intends to operate.
- 6211.3 The applicable licensing agency shall review and either grant or deny an application for modification of an annual license. The applicable licensing agency shall notify the facility in writing of the decision to grant or deny an application for a modified license, including a statement of the grounds for the decision and notification of the facility's right to a fair hearing in accordance with 29 DCMR Chapter 59.
- Upon modification of a license, the licensing agency shall mail the facility a modified license that sets forth the conditions under which the facility may operate.

6212 VARIANCES

- 6212.1 The facility may submit a written request for a variance to the applicable licensing agency. The facility shall include documentation sufficient to establish that the facility's procedures comply with the intent of this Chapter.
- 6212.2 The applicable licensing agency may approve a variance to any requirement contained in this Chapter upon showing of hardship and manifest public need, provided that the variance is not deleterious to the residents' health, safety, or welfare.
- 6212.3 A variance shall remain in effect for no longer than the duration of the license.
- 6212.4 The applicable licensing agency shall review and either grant or deny an application for a variance. The applicable licensing agency shall notify the facility in writing of the decision to grant or deny an application for a variance, including a statement of the grounds for the decision and notification of the facility's right to a fair hearing in accordance with 29 DCMR Chapter 59.

- 6212.5 The applicable licensing agency shall issue no variances to facilities owned or operated by the District of Columbia government.
- 6212.6 Upon approval of a request for a variance, the licensing agency shall mail the applicant a copy of the variance. The licensing agency shall keep copies of the variance on file.
- 6212.7 Variances shall be made available to the public, upon request.

6213 SUSPENSION, CONVERSION, AND REVOCATION OF LICENSES

- 6213.1 The applicable licensing agency shall have the discretion to revoke any existing license, suspend any existing license for a period of no longer than sixty (60) calendar days, or convert any annual license to a provisional or restricted license if it finds an immediate or serious and continuing danger to the health, safety, or welfare of the residents of the facility. An immediate or serious and continuing danger to the health, safety, or welfare of the residents of the facility includes, but is not limited to, numerous deficiencies or a serious single deficiency with respect to the requirements of this Chapter.
- 6213.2 The applicable licensing agency shall immediately remove all residents from a facility when it suspends or revokes a facility's license.
- 6213.3 The licensing agency shall immediately give the facility written notice of a revocation, suspension or conversion, including a statement of the grounds for the decision and notification of the facility's right to a fair hearing in accordance with 29 DCMR Chapter 59.
- 6213.4 If the facility whose license has been suspended agrees to take appropriate corrective actions in accordance with a specific time frame acceptable to the applicable licensing agency, and the facility agrees to extend the suspension, the applicable licensing agency may extend the suspension for no longer than an additional sixty (60) calendar days.
- 6213.5 If the facility whose license has been suspended does not request a fair hearing in accordance with 29 DCMR Chapter 59, and the facility whose license has been suspended has not either agreed to take appropriate corrective actions in accordance with a specific time frame acceptable to the applicable licensing agency or taken the appropriate corrective actions in accordance with the specific time frame acceptable to the applicable licensing agency, the applicable licensing agency may revoke the facility's license. If the applicable licensing agency revokes the facility's license, the applicable licensing agency shall give the facility written notice of the revocation, including notification of the facility's right to a fair hearing in accordance with 29 DCMR Chapter 59.
- 6213.6 If the applicable licensing agency determines that a facility whose license has been suspended satisfies the requirements of a license, the applicable licensing agency shall reinstate the facility's license.

6213.7 If the applicable licensing agency determines that a facility whose license has been converted satisfies the requirements of an annual license, the applicable licensing agency shall reinstate the facility's annual license.

6214 FAIR HEARING PROCEDURES

6214.1 A facility aggrieved by a licensing agency's decision to deny an application for an original or renewal of an annual license, to deny an application for modification of an annual license, to revoke a license, suspend a license, or convert an annual license to a provisional or restricted license, or to deny an application for a variance may appeal the decision in accordance with 29 DCMR Chapter 59.

6215 PENALTIES

- 6215.1 The applicable licensing agency may impose civil fines, penalties, and related costs against a public or private facility for the violation of any provision of this Chapter.
- 6215.2 A violation shall be considered an infraction under the Department of Consumer and Regulatory Affairs Civil Infractions Act of 1985, effective October 25, 1985, D.C. Law 6-42, D.C. Code § 6-2701 et seq.
- 6215.3 Except as provided in §§ 6215.5 and 6215.6, the procedures for adjudication and enforcement and the applicable fines, penalties, and costs shall be those established by or pursuant to the Department of Consumer and Regulatory Affairs Civil Infractions Act of 1985, effective October 25, 1985, D.C. Law 6-42, D.C. Code § 6-2701 et seq.
- 6215.4 Governmental immunity shall not be a defense to any civil fine, penalty, or cost imposed.
- 6215.5 Civil fines, penalties, and related costs imposed against a facility shall not come out of funds needed to provide quality care and services to residents. The licensing agency shall conduct an audit at least annually of every facility against which civil fines, penalties, or costs have been imposed. Civil fines, penalties, and costs imposed against any facility owned or operated by the District of Columbia government shall be paid into a special account to be used for the personal needs of residents.
- Notwithstanding the availability of any other means of enforcement, the licensing agency may directly deduct the amount of civil fines, penalties, and related costs imposed against a facility from amounts otherwise payable by the District of Columbia government to the facility.
- 6215.7 The applicable licensing agency shall maintain in a manner accessible to the public a record of all decisions to impose penalties or fines.

6216 COURT ACTIONS

Notwithstanding the availability of any other remedy, the Corporation Counsel, a resident, or any person acting on or in behalf of a resident may maintain an action in

court to enjoin a facility from violating the terms of its license, the Youth Residential Facilities Licensure Act of 1986, effective August 13, 1986, D.C. Law 6-139, D.C. Code § 3-801 et seq., or this Chapter.

6217 OPERATION OF FACILITIES

- 6217.1 A facility may be publicly or privately owned or operated, for profit or not for profit.
- 6217.2 A facility owned or operated by a corporation shall maintain its corporate status in accordance with the laws of the District of Columbia.
- 6217.3 If a corporation is not organized and empowered solely for the purpose of operating and maintaining a youth residential facility, the charter of the corporation shall provide for operation of such a facility in its statement of purpose.

6218 LOCAL ADVISORY COMMITTEE

- Each facility shall have a local advisory committee made up of no less than three (3) members, including at least one (1) representative of the neighborhood in which the facility is located who is otherwise unaffiliated with the facility and who is not employed by the contracting entity or licensing agency.
- 6218.2 Multiple facilities operated by the same person may have one (1) local advisory committee for all of the facilities so long as the local advisory committee includes at least one (1) representative of each neighborhood in which a facility is located.
- 6218.3 The local advisory committee shall:
 - (a) Meet with the facility administrator at the facility at least quarterly to review programs, policies, citizen complaints, and police contacts;
 - (b) Inform the contracting entity and licensing agency in writing of any situation that a majority of the committee believes warrants correction and that the facility has failed to correct within a reasonable period of time after being notified by the committee; and
 - (c) Report annually to the contracting entity and licensing agency on the number of admissions, the number, outcome, and length of stay of planned and unplanned discharges, staff turnover rate and efforts to reduce it, and program effectiveness in meeting the needs of residents.
- 6218.4 The facility shall provide the local advisory committee the information necessary to prepare the report required under § 6218.3(c). The local advisory committee shall not have access to identifying information regarding individual residents.
- 6218.5 The administrator and the local advisory committee shall biannually conduct an open community meeting to facilitate communication between the facility and the community.

6218.6 The facility shall maintain copies of the minutes of the local advisory committee meetings.

6219 OPERATING PROCEDURES AND STAFFING

- 6219.1 Each facility shall designate an administrator who is responsible for the overall management and fiscal operation of the facility. Whenever this Chapter requires that a facility undertake or perform any act or obligation, the administrator shall be responsible for the performance of such act or obligation.
- 6219.2 The administrator or his or her designee shall be available by telephone at all times.
- 6219.3 All staff on-duty shall know, and be able to contact, the person who is responsible for administrative supervision of the facility at any given time.
- 6219.4 The facility shall maintain all policies and procedures required under this Chapter in a designated location that is easily accessible to staff.
- 6219.5 There shall be at least two staff persons (excluding volunteers and staff not providing direct care and supervision of residents) present and on-duty in the facility at all times when a resident is present in the facility. Except for facilities staffed with live-in house parents, staff asleep within the facility shall not be considered on-duty.
- 6219.6 The requirement in § 6219.5 that at least two staff persons be present and on-duty in the facility at all times shall apply even if the result of this requirement is that there are more staff present and on-duty at the facility than otherwise required by the minimum resident-to-staff ratios provided elsewhere in this section.
- 6219.7 All facilities serving residents younger than five (5) years old shall have a minimum resident to staff ratio (excluding volunteers and staff not providing direct care and supervision of residents) of 2:1.
- 6219.8 Emergency care facilities serving residents five (5) years old or older shall have a minimum resident to staff ratio (excluding volunteers and staff not providing direct care and supervision of residents) of 2:1 during waking hours and 3:1 during sleeping hours.
- 6219.9 Youth shelters, runaway shelters, and youth group homes serving residents five (5) years old or older who were allegedly abused or neglected shall have a minimum resident to staff ratio (excluding volunteers and staff not providing direct care and supervision of residents) of 4:1 during waking hours.
- 6219.10 Youth shelters, runaway shelters, and youth group homes serving residents five (5) years old or older who are on detention or commitment shall have a minimum resident to staff ratio (excluding volunteers and staff not providing direct care and supervision of residents) of 5:1 during waking hours.
- 6219.11 Youth shelters, runaway shelters, and youth group homes serving residents five (5) years old or older shall have a minimum resident to staff ratio (excluding volunteers

- and staff not providing direct care and supervision of residents) of 10:1 during sleeping hours
- 6219.12 CFSA shall not place residents in a facility with a capacity of more than eight (8) residents without the express written approval of the CFSA Director, as detailed in § 6256.3.
- 6219.13 The contracting entity shall have the sole discretion to require by contract a more restrictive ratio of residents to staff (excluding volunteers and staff not providing direct care and supervision of residents) in any particular facility housing residents with special needs.

6220 FISCAL MANAGEMENT

- 6220.1 The facility shall keep and maintain a current and accurate record of receipts and expenditures and be able to demonstrate fiscal accountability.
- 6220.2 The facility shall not enter into a service contract with any corporation, firm, association, or business in which any facility owner, employee, member of the board of directors, or member of their immediate families, has any direct financial interest, unless the service contract contains terms equal to or more favorable to the facility than those terms offered to the general public. The facility shall maintain a written record of any service contract in which any owner, employee, or member of the board of directors, or their immediate families, is involved.
- 6220.3 The facility shall maintain copies of all leases entered, and all such leases shall include the location and description of the rented property, monthly or annual rent, and the period of time covered.
- 6220.4 The facility shall maintain adequate bonding for all persons delegated the authority to manage funds.

6221 INSURANCE

- The requirements of this section shall be explicitly stated in the resident's contract for placement.
- 6221.2 The facility shall secure and maintain the insurance policies required in this section. All policies shall be written by insurers which are licensed as regulated insurers by the District of Columbia government and are in good standing under such license, with a rating by the A.M. Best Company of A- or greater, and with a financial class size of VIII or higher, or equivalent ratings from a recognized insurance rating service which the licensing agency has approved in writing.
- The facility shall provide to the contracting entity original certificates of insurance complying with the provisions of this section together with the facility's application for an original annual license, as required by § 6209, and together with the facility's application for annual renewal, as required by § 6210. Such certificate or certificates

shall evidence and summarize the terms of actual policies in force for all the coverages for the contracting entity, licensing agency and the District of Columbia government, as set forth in this section. The cancellation clause in every certificate shall not include the words, "endeavor to" and "but failure to mail such notice shall impose no obligation or liability of any kind upon the company, its agents or representatives," or other similar language.

- As used herein, the term staff member includes all employees of the facility and any other person (including, without limitation, volunteers, independent contractors, and vendors) regularly providing services at the facility. A person regularly provides services at the facility if the person:
 - (a) Visits the facility on at least a weekly basis;
 - (b) Visits the facility for at least ten (10) hours per month; or
 - (c) Provides direct care and supervision of residents.
- The facility shall secure and maintain, and provide evidence that its staff members who are independent contractors secure and maintain (in the form of certificates complying with § 6221.3), commercial general liability insurance, containing contractual liability insurance, insuring the facility as named insured and naming the contracting entity, licensing agency and the District of Columbia government as additional insureds, on an occurrence (not claims-made) basis, with per location or per project limits (exclusive of defense costs) of not less than:
 - (a) One million dollars (\$1,000,000) per occurrence for bodily injury or death or property damage, combined single limit;
 - (b) One million dollars (\$1,000,000) per occurrence for personal and advertising injury;
 - (c) One million dollars (\$1,000,000) per occurrence for products-completed operations; and
 - (d) Subject to a general aggregate of two million dollars (\$2,000,000) per policy year.

All such policies shall be primary coverage and the facility's policies shall provide coverage for all staff members excluding independent contractors. Deductibles under commercial general liability insurance policies shall not exceed five thousand dollars (\$5,000.00) per occurrence.

6221.6 The facility shall secure and maintain business automobile policy insurance for owned, non-owned and hired vehicles with a combined single limit (exclusive of defense costs) of not less than one million dollars (\$1,000,000). All such policies shall be primary coverage and shall provide coverage for all staff members. Limits for uninsured and under-insured motorists shall be not less than one million dollars (\$1,000,000).

- Physical damage deductibles under business automobile policies shall not exceed five thousand dollars (\$5,000.00) per occurrence.
- The facility shall secure and maintain, and provide evidence that its staff members who are independent contractors secure and maintain (in the form of certificates complying with § 6221.3), worker's compensation insurance with statutory worker's compensation limits. The facility's policies shall cover all staff members excluding independent contractors.
- The facility shall secure and maintain, and provide evidence that its staff members who are professional independent contractors secure and maintain (in the form of certificates complying with § 6221.3), professional liability insurance with limits (exclusive of defense costs) of not less than one million dollars (\$1,000,000) per occurrence. The facility's policies shall be primary coverage and shall provide coverage for all of the facility's professional staff excluding independent contractors.
- 6221.9 The facility shall secure and maintain employer's liability insurance with limits of not less than one hundred thousand dollars (\$100,000) per accident, five hundred thousand dollars (\$500,000) disease policy limit, one hundred thousand dollars (\$100,000) disease, each employee. All such policies shall be primary coverage and shall provide coverage for all staff members.
- 6221.10 The facility shall secure and maintain coverage of the building, improvements, furnishings, fixtures and equipment, inventory and other personal property by broad form ("all-risk") commercial property insurance on a full replacement cost, agreed amount basis, waiving subrogation against the licensing agency, the contracting entity and the District of Columbia government and containing an additional insured endorsement naming the licensing agency, the contracting entity and the District of Columbia government as additional insureds. The facility shall secure and maintain time value insurance coverage for one hundred percent (100%) of the loss of income / extra expense coverage incurred in occurrences covered by the facility's commercial property insurance policy. Deductibles under property insurance policies maintained by the facility shall not exceed five thousand dollars (\$5,000.00) per occurrence. All such policies shall be primary coverage. If all or a portion of the above coverages are maintained by the facility's landlord, the facility shall also provide evidence of the landlord's coverage in the form of evidence of insurance complying with § 6221.3, which evidence shall include a waiver of subrogation against the licensing agency, the contracting entity and the District of Columbia government.
- 6221.11 The facility shall secure and maintain excess or umbrella liability insurance with limits of not less than ten million dollars (\$10,000,000) per occurrence, subject to a general aggregate of ten million dollars (\$10,000,000) per policy year, and self-insured retention of no more ten thousand dollars (\$10,000), covering not less than the same liabilities and coverages set forth in §§ 6221.5, 6221.6, 6221.8 and 6221.9 in excess of the limits specified in those policies.

- 6221.12 If any claim has been made under any policy of insurance required hereunder and the limits or coverages of insurance are reduced thereby, the facility shall replenish such insurance to the limits and coverages provided herein.
- 6221.13 The insurance policies required by this section shall contain the following endorsement:

"It is hereby understood and agreed that the insurer may not cancel, fail to renew, or reduce the coverage or liability limits of this policy unless the insurer provides the contacting entity, licensing agency, and the Office of the City Administrator with written notice of an intent to take such action at least ten (10) days in advance of cancellation for non-payment of premium and thirty (30) days in advance of any other such action. The insurer shall serve notice to the following persons by certified mail, return receipt requested:

Director Child and Family Services Agency 400 6th Street SW Washington, D.C. 20024

Administrator Youth Services Administration Central Administration Building 8300 Riverton Court Laurel, Maryland 20707

Office of the City Administrator Attention Risk Management Officer 441 4th Street, N.W. Suite 1150 Washington, D.C. 20001"

- 6221.14 No later than ten (10) days prior to a renewal, cancellation, non-renewal, or reduction in coverage or liability limits, the facility shall obtain and furnish to the contracting entity, licensing agency, and Office of the City Administrator copies of certificates complying with § 6221.3 for replacement insurance policies meeting the requirements of this section.
- 6221.15 The legal liability of the facility to the contracting entity, licensing agency, District of Columbia government, and any person for any of the matters that are the subject of the insurance policies required by this section shall not be limited by such insurance policies or by the recovery of any amounts thereunder.
- 6221.16 Insurance coverage may be provided under policies that cover more than one location; provided, however, that the limits and coverages shall apply separately to each location.

- 6221.17 The facility shall defend, indemnify and hold the contracting entity, licensing agency, and the District of Columbia government, and its elected and appointed officials and officers, employees, agents and representatives, harmless from and against any and all injuries, claims, demands, judgments, suits in law and equity (including without limitation, habeas corpus actions), actions before administrative tribunals, damages, losses and expenses, including reasonable attorney's fees and costs of suit or defense, that actually or allegedly, in whole or in part, arise out of, or result from:
 - (a) The operation of the facility;
 - (b) Performing or failing to perform duties required by or reasonably related to the requirements of the contract between the facility and the contracting entity; or
 - (c) Providing or offering services, whether or not caused by the facility or its affiliates, officers, employees, agents, contractors or subcontractors;

whether or not such acts or omissions were alleged or proven to have been caused in whole or in part by the contracting entity, the licensing agency or the District of Columbia government, and whether or not such acts or omissions are authorized, allowed or prohibited by this Chapter. The facility's indemnity obligations under this section shall not apply to any injuries, claims, demands, judgments, damages, losses or expenses to the extent arising out of or resulting from the gross negligence or willful misconduct by the contracting entity, the licensing agency or the District of Columbia government, or their officials, officers, employees, agents or representatives, provided that no such gross negligence or willful misconduct, alleged or actual, shall affect the facility's obligation to defend the contracting entity, licensing agency, and the District of Columbia government.

- 6221.18 The facility shall provide copies of the policies for any or all of the insurance required by this section to the contracting entity and licensing agency upon written request.
- 6221.19 All notices and documents required under this section shall be provided to the licensing agency, the contracting entity, and the Office of the City Administrator, at the following addresses:

Director Child and Family Services Agency 400 6th Street SW Washington, D.C. 20024

Administrator Youth Services Administration Central Administration Building 8300 Riverton Court Laurel, Maryland 20707

Office of the City Administrator

Attention Risk Management Officer 441 4th Street, N.W. Suite 1150 Washington, D.C. 20001

6221.20 The requirements of § 6221 shall not apply to facilities owned or operated by the District of Columbia government.

6222 RESIDENTS' ACCOUNTS

- 6222.1 The facility may provide residents with an allowance which is appropriate to the resident's age and level of development. The facility shall not require residents to use an allowance to purchase hygiene products, food, or any other item which the facility is required to purchase pursuant to this Chapter.
- 6222.2 The facility shall encourage residents to save money and promote the development of money management skills.
- Each facility shall maintain a separate accounting system for funds belonging to residents, including complete and accurate records of all transactions regarding these funds. Upon request, the facility shall provide to the resident, the resident's parent or guardian, or the resident's guardian ad litem, an accounting of the resident's funds.
- 6222.4 A resident's funds shall accompany the resident when he or she is discharged from the facility.

6223 QUALITY ASSURANCE

6223.1 Each facility shall cooperate with the licensing agency or contracting entity's monitoring or evaluation efforts and provide or assist in obtaining any information requested to evaluate the facility's operation and services for adequacy, appropriateness, effectiveness, cost-effectiveness, and quality of programs.

6224 RECORDKEEPING

- 6224.1 Each facility shall maintain a separate written case record for each resident. Each facility shall make timely entries in a resident's case record that are legible, dated and signed by the staff member or other person making the entry.
- 6224.2 Each resident's case record shall include:
 - (a) The resident's name, date and place of birth, social security number, date of admission, and citizenship;
 - (b) A description of the resident's identifying features, including but not limited to sex, race, height, weight, color of hair, color of eyes, and identifying marks;
 - (c) A current photograph of the resident;

- (d) The primary language or means of communication spoken and understood by the resident and the primary language used by the resident's family, if other than English;
- (e) Religious affiliation;
- (f) The name, address, and telephone number of the resident's parent(s) or other responsible family members, guardian, attorney, guardian ad litem, and referring agency or case worker, as applicable;
- (g) Medical, mental health and immunization records, including but not limited to identified emergency medical needs, allergies, basic needs, and non-emergency medical conditions and physical infirmities, including all visible signs of illness or injury;
- (h) Dental, vision and hearing records;
- (i) Risk and safety assessments;
- (j) Social history;
- (k) Individual service plans and any changes or updates thereto;
- (l) Discharge plan(s);
- (m) Discipline and restraint records relating to the resident, where applicable;
- (n) All correspondence relevant to the resident;
- (o) Reports of unusual incidents, where applicable;
- (p) Reports related to abuse, neglect, or other risks to the resident's health and safety produced pursuant to § 6204;
- (q) Any required consents to treatment;
- (r) Any restrictions on visitation, mail, or telephone contacts;
- (s) Court orders, if applicable;
- (t) Admission and placement information;
- (u) Signed notification of rights, grievance procedures and applicable consent to treatment protections;
- (v) Records of the contracting entity pertaining to the resident;
- (w) Records of CSSD pertaining to the resident, where applicable;

- (x) Education records;
- (y) Any evaluation or progress reports prepared for the resident;
- (z) The resident's grievance and disciplinary record;
- (aa) Documentation of counseling and treatment sessions; and
- (bb) Weekly documentation of the resident's status and progress.
- 6224.3 The facility shall maintain all information in the resident's case record for so long as the resident is admitted in the facility. Upon the resident's discharge from the facility, the facility shall turn over the original or a copy of the resident's case record to the contracting entity.
- 6224.4 The facility shall maintain each resident's case record in a locked and secure location when unattended.
- 6224.5 The facility, licensing agency, contracting entity, guardian ad litem and, where applicable, CSSD shall have access to the resident's case record. No other person shall have access to the resident's case record unless authorized in writing by the licensing agency.
- Each facility shall maintain a record of each use of discipline and restraint and shall include in such record the information required under §§ 6273-74.
- Each facility shall maintain at the facility easily accessible emergency information for each resident, which shall include the name, address, telephone number and relationship of a designated person to be contacted in case of an emergency, a person able to give consent for emergency medical treatment, if applicable and the resident's physician or source of health care and health insurance information.

6225 REPORTING OF UNUSUAL INCIDENTS

- The facility shall report all unusual incidents to the contracting entity and the licensing agency, the resident's parent and, if applicable, the resident's guardian or custodian and the CSSD, as soon as possible but in no event later than twenty-four (24) hours by oral methods and in writing no later than the next business day.
- 6225.2 The facility shall establish, implement, and describe in writing policies and procedures for the reporting of unusual incidents.
- 6225.3 Unusual incidents include:
 - (a) The death of a resident;
 - (b) The death of a staff member while on duty or at the facility;
 - (c) An attempted suicide;

- (d) A resident's suspension or expulsion from school;
- (e) Any situation in which a resident is missing or in abscondance;
- (f) A resident's alleged delinquent or criminal behavior, including but not limited to the possession or use of controlled substances;
- (g) Any situation in which a resident is the victim of alleged delinquent or criminal behavior;
- (h) A staff member's actual or alleged possession of controlled substances, actual or alleged use of controlled substance, or appearance of being under the influence of controlled substances while on duty or at the facility;
- (i) A staff member's misconduct or fraud;
- (j) An injury, trauma, or illness of a resident requiring treatment at a hospital;
- (k) A violation of a resident's rights;
- (1) Any use of restraint;
- (m) Sexual contact between a resident and another person, consensual or otherwise;
- (n) Abuse or misuse of a resident's funds;
- (o) An outbreak of a communicable disease;
- (p) An incident at the facility requiring the services of the fire or police departments;
- (q) An automobile accident involving residents or staff on duty;
- (r) Destruction of government property;
- (s) A visit, whether announced or unannounced, by the media or high-level government officials;
- (t) A loss of any utilities, including but not limited to power, water, or sewage;
- (u) Any condition which results in the facility's closure; and
- (v) Any other occurrence or event which substantially interferes with the resident's health, welfare, living arrangement, or well being, or in any way places the resident at risk.
- 6225.4 The facility shall report any alleged or actual child abuse, neglect, or other risk to a resident's health and safety in accordance with § 6204.

- 6225.5 The facility shall notify the Metropolitan Police Department (MPD), the contracting entity and, where applicable, the CSSD, within one (1) hour after learning that a resident is missing or absconding.
- For residents placed in the facility by YSA, including residents under the supervision of the CSSD, within one (1) hour of notice to the MPD, the contracting entity, and, where applicable, the CSSD, as required under § 6225.5, the facility shall file by fax a request for custody order of the absconding resident with the District of Columbia Superior Court Juvenile or Neglect clerk.
- 6225.7 For residents placed in the facility by YSA, including residents under the supervision of the CSSD, within one (1) hour of faxing the request to the District of Columbia Superior Court Juvenile or Neglect clerk as required under § 6225.6, the facility shall fax a copy of the request for custody order to the contracting entity, the Office of the Corporation Counsel and, where applicable, the CSSD.
- The facility shall immediately inform the MPD, the contracting entity, the Office of the Corporation Counsel, the District of Columbia Superior Court Juvenile or Neglect clerk and, where applicable, the CSSD, upon the missing or absconding resident's return to the facility.

6226 CONFIDENTIALITY

- A resident's case record is confidential and shall not be disclosed or used other than in the course of official facility duties to provide services to the resident and in such instance shall only be disclosed to the least extent possible, consistent with any court order, the resident's individual service plan, and local and federal law. The facility, licensing agency, contracting entity, guardian ad litem and, where applicable, CSSD shall have access to the resident's case record. No other person shall have access to the resident's case record unless authorized in writing by the licensing agency.
- 6226.2 The facility shall train all staff on the procedures for maintaining the confidentiality of the residents' case records and information contained therein

6227 PRIVACY

- The facility shall endeavor to provide for a resident's reasonable privacy with respect to his or her person, property, and living quarters.
- The facility may limit a resident's privacy as reasonably necessary to protect the health, safety, or welfare of the resident or others.
- 6227.3 The facility shall make reasonable efforts to ensure that the resident's need for medications is kept confidential.
- 6227.4 The facility shall maintain doors on bedroom areas and bathroom enclosures unless there is a clinical justification for their removal.

- 6227.5 The facility shall ensure that a resident has reasonable privacy when using the telephone.
- When the facility limits a resident's use of his or her personal property, the facility shall document its decision and rationale and specify how such limitation is consistent with the resident's individual service plan. The facility shall maintain an inventory of all such personal property, including a description of the condition of the property in its custody as a result of such limitation. The inventory, decision and rationale shall be maintained in the resident's case record. If appropriate, the facility shall return the personal property to the resident upon discharge. The facility shall return the personal property to the resident prior to discharge only if specifically provided in the resident's individual service plan.
- 6227.7 The facility shall prohibit the use of listening devices for routine observation of residents in their rooms, unless otherwise required by court order.
- 6227.8 Other than a photograph taken of a resident upon admission into the facility pursuant to § 6257.3(g), the facility shall not create or use any photograph, audio-tape, artwork, or writing of or concerning a Resident without the written authority of the resident, the resident's parent(s) or guardian(s), and the licensing agency or contracting entity, unless otherwise provided by court order. The facility shall not use the photograph taken of a resident upon admission into the facility for public relations or fundraising purposes.
- 6227.9 A resident shall not participate in a public performance without the written authority of the resident, the resident's parent(s) or guardian(s), and the licensing agency or contracting entity, unless otherwise provided by court order.

6228 PERSONNEL

- Facilities are encouraged to recruit staff members who have specialized knowledge and skills and the cultural competency and sensitivity necessary to provide for the residents' safety and developmental needs. Facilities are encouraged to recruit staff members who are representative of the cultural and ethnic groups served by the facility. Staff members include all employees of the facility, all volunteers, and independent contractors who regularly provide services at the facility.
- 6228.2 All prospective and existing staff shall undergo a criminal records check prior to commencing work at any facility. The facility shall obtain the written approval of the licensing agency and the contracting entity prior to employing any person who has been convicted of the following offenses or their equivalents:
 - (a) Fraud; or
 - (b) A drug-related offense.
- 6228.3 No facility shall allow any person to serve as a staff person who has a conviction for any of the following offenses or their equivalents:

- (a) Child abuse;
- (b) Child neglect;
- (c) Spousal abuse;
- (d) A crime against children, including child pornography; or
- (e) A crime involving violence, including but not limited to, rape, sexual assault, homicide and assault.
- 6228.4 All prospective and existing staff shall undergo a child protection registry check prior to commencing work at any facility. No facility shall allow any person to serve as a staff person who has been:
 - (a) Identified as a possible abuser or neglecter in a currently-pending child abuse or neglect case; or
 - (b) Adjudicated as the abuser or neglecter in a child abuse or neglect case.
- 6228.5 The facility shall keep confidential the results of all criminal records and child protection registry checks.
- All existing staff shall undergo a physical examination sufficient to determine their general physical condition, freedom from disease in a communicable form, and ability to work closely with or care for children without danger to the children. All prospective staff shall undergo a pre-employment physical examination sufficient to determine their general physical condition, freedom from disease in a communicable form, and ability to work closely with or care for children without danger to the children. All staff shall undergo a follow-up examination every twenty-four (24) months. The facility shall obtain the licensing agency's approval prior to permitting any staff person who tested positive for a communicable disease to provide services in the facility. The facility shall keep confidential all information obtained pursuant to this section.
- 6228.7 The facility shall test all prospective and existing staff for drug and alcohol use, in accordance with the following procedures:
 - (a) The facility shall give all existing staff written notice that the facility will implement a drug and alcohol testing program for the purposes of determining whether a staff member has used drugs or alcohol and as a result is unable to satisfactorily perform his or her duties. The facility may not test any existing staff member for drug or alcohol use until thirty (30) days after providing such notice. The facility shall obtain the results of such drug and alcohol testing prior to filing an application for an original annual license, but in no event later than six (6) months after the effective date of this Chapter, as required by § 6206.1.

- (b) The facility shall require all prospective staff to undergo a pre-employment test for drug and alcohol use.
- (c) Drug and alcohol testing shall be performed by an outside contractor certified by the United States Department of Health and Human Services to perform jobrelated drug and alcohol forensic testing.
- (d) Following implementation of the drug and alcohol testing program, the facility shall require the outside contractor to conduct random drug and alcohol testing of staff at an unspecified time. The outside contractor shall conduct any such random drug and alcohol testing at the facility.
- (e) The outside contractor shall collect urine specimens and split the samples. The contractor shall perform enzyme-multiplied-immunoassay technique (EMIT) testing on one sample and store the other sample. Any positive EMIT test shall be confirmed by the contractor using gas chromatography/mass spectrometry (GCMS) methodology.
- (f) The facility shall notify each staff member of the result of the drug and alcohol test. The refusal to submit to a drug and alcohol test shall constitute a positive test result.
- (g) If the result of the test is positive, the staff member may authorize the outside contractor to send the stored sample to another HHS certified laboratory of his or her choice, at his or her expense, for secondary GCMS confirmation.
- (h) If a staff member tests positive for drug or alcohol use, the facility may either terminate or suspend the staff member. If the facility elects to suspend the staff member, the facility may not remove the suspension until the staff member tests negative for drug and alcohol use. A staff member shall be allowed only one (1) opportunity to seek treatment following his or her first (1st) positive test result. Thereafter, the facility shall terminate a staff member who tests positive for drug or alcohol use.
- (i) The results of any drug test conducted pursuant to this section shall be kept confidential and may not be turned over to any law enforcement agency without the written consent of the staff member.

6228.8 The administrator shall:

- (a) Have a master's degree in social work or a related area of study from an accredited college or university and at least two (2) years of experience in the management or supervision of child care personnel and programs; or
- (b) Have a bachelor's degree in social work or a related area of study from an accredited college or university and at least four (4) years of experience in the management or supervision of child care personnel and programs.

- 6228.9 Administrators employed by a facility in operation on the effective date of this Chapter are exempt from the requirements of § 6228.8
- 6228.10 Staff members responsible for the development, implementation, and supervision of the social services of the facility shall have at least a bachelors degree in social work or related area of study from an accredited college or university and at least two (2) years experience in management and supervision of child care services. Staff members providing services at a facility in operation on the effective date of this Chapter who are responsible for the development, implementation, and supervision of the social services of the facility are exempt from the requirements of this section.
- 6228.11 Staff members responsible for performing professional services, including psychological, psychiatric, medical, social work, nursing, dental, and education shall have a professional degree and appropriate license in his or her respective fields from an accredited college or university and a current license, if required by law.
- 6228.12 Staff members responsible for the daily direct care, nurturance, and supervision of residents shall be at least twenty-one (21) years of age and shall have a high school or general equivalency diploma.
- 6228.13 All prospective and existing staff providing transportation services shall provide the facility a current operator's permit and current driving record.
- 6228.14 Whenever food is being prepared, handled, or served for human consumption, one staff member present shall have a Food Handler's Certificate from the District of Columbia Bureau of Food, Drug, and Radiation Protection.
- 6228.15 All prospective and existing staff shall provide documentation sufficient to establish their identity, qualifications and experience, including proof of identification, character and work references, verification of education and current licensure or certification, if applicable. For all prospective and existing staff, the facility shall establish the identity, qualifications and experience, including proof of identification, character and work references, verification of education and current licensure or certification, if applicable.

6229 STAFF DEVELOPMENT

- Each facility shall provide a minimum of twenty (20) hours of instructional training and twenty (20) hours of experiential training to each new non-volunteer staff member. Non-volunteer staff members shall complete this training within the first thirty (30) calendar days of employment.
- 6229.2 For volunteer staff members, the Facility shall provide a minimum of twenty-five (25) hours of experiential and instructional training. Volunteer staff members shall complete this training within the first six (6) months of work at the facility.
- 6229.3 The training required by § 6229.1 shall include the following:
 - (a) Familiarization of the staff with emergency and safety procedures of the facility;

- (b) The principles and practices of resident care, including appropriate training on age-specific and special physical, emotional, and medical needs;
- (c) Administrative structure, procedures, and overall program goals of the facility;
- (d) Procedures for maintaining confidential the residents' case records and information contained therein;
- (e) Appropriate techniques of behavior management for staff providing direct care or supervision of residents;
- (f) Techniques and methodologies of crisis management for staff providing direct care or supervision of residents;
- (g) Methods of considering residents' diverse cultures;
- (h) Methods of considering residents' sensitivities;
- (i) Manifestation of and techniques for working with abused, neglected, and traumatized residents;
- (j) Familiarization of the staff with the discipline policy of the facility and acceptable methods of discipline;
- (k) The techniques and methodologies of passive physical restraint;
- (l) Procedures for reporting actual or alleged resident abuse or neglect, and actual or alleged risk to a resident's health or safety, including training on mandatory reporting;
- (m) Recognition and prevention of abuse and neglect and risks to the resident's health or safety;
- (n) Recognition of substance abuse symptoms and treatment resources;
- (o) Universal precautions;
- (p) Identification of, and methods of responding to, suicidal behavior; and
- (q) Intervention with violent residents.
- 6229.4 All staff shall possess current American Red Cross Standard First Aid and CPR certifications or equivalent. Additionally, all staff serving residents five (5) years old or younger shall obtain infant CPR certification. A staff member who does not possess current American Red Cross Standard First Aid and CPR certifications or equivalent shall not provide direct care or supervision of residents unless he or she is accompanied by another staff member who does possess current American Red Cross Standard First Aid and CPR certifications or equivalent. All staff not so certified shall obtain such certifications within forty-five (45) calendar days of the enactment of this Chapter. All

- new staff shall obtain such certifications within forty-five (45) calendar days of becoming new staff.
- Each facility shall provide at least forty (40) hours of in-service training for each staff member each year covering topics determined jointly by the facility and the licensing agency, including, where appropriate, training in acceptable methods of discipline required by § 6273.4 and training in acceptable methods of restraint required by § 6274.3.
- 6229.6 Each facility shall maintain records of attendance at training.

6230 PERSONNEL POLICIES

- 6230.1 At the commencement of employment of each staff person, the facility shall give the staff person a written description of his or her position which defines the qualifications, duties, and responsibilities of the position and his or her salary.
- 6230.2 The facility shall have a written statement of personnel policies which shall be given to staff at the commencement of employment and shall include:
 - (a) Provisions for paid vacation, sick leave, and policy regarding holidays;
 - (b) Provisions for periodic evaluations of work performance; and
 - (c) A description of employment benefits.
- 6230.3 The facility shall maintain an accurate personnel record on each staff person, including all employees of the facility and any other person (including, without limitation, volunteers, independent contractors, and vendors) regularly providing services at the facility. The personnel record shall include:
 - (a) A written application showing qualifications and experience;
 - (b) Reports of medical examinations as required by § 6228.6;
 - (c) Reports of criminal records and child protection register checks as required by § 6228.2 and § 6228.4;
 - (d) Reports of drug and alcohol testing as required by § 6228.7;
 - (e) Dates of employment and separation from the facility with reason for separation;
 - (f) Documentation of training received, including the type, duration, and date of training and the person or agency conducting the training;
 - (g) Annual performance evaluations; and
 - (h) Documentation of all certifications and licenses required under this Chapter.

6230.4 The facility shall keep confidential staff personnel records.

6231 VOLUNTEER SERVICES AND COMMUNITY INVOLVEMENT

- 6231.1 The facility is encouraged to develop and implement a written plan to provide and promote volunteer service, including but not limited to application procedures, selection criteria, selection process, training requirements, supervision, coordination of services, quality assurance, and termination of service.
- 6231.2 All volunteer staff members shall complete the training required pursuant to § 6229.2.
- 6231.3 The facility is encouraged to establish positive relationships with members of the community.
- 6231.4 As provided in § 6218.5, the administrator and the local advisory committee shall biannually conduct an open community meeting.

6232 BUILDINGS, GROUNDS AND EQUIPMENT

- All existing facilities and new facilities shall be constructed and maintained reasonably to protect and to ensure the safety of all present and future staff and residents.
- 6232.2 All existing and new facilities shall be constructed and maintained to promote a homelike environment.
- 6232.3 All existing and new facilities shall comply with all local and federal laws, including but not limited to laws relating to construction, electrical, and lead paint standards.

6232.4 The facility shall:

- (a) Maintain all grounds, structures and equipment free from any hazard to the staff or residents' health or safety;
- (b) Equip with a railing all stairways containing more than four steps that are accessible to residents and guard with a safety gate all stairways accessible to residents aged three (3) and under;
- (c) Assure that all locks on doors to any room or storage area in which a resident could be locked are of the type which permit the door to be unlocked from either side of the door;
- (d) Assure that all doors on toilet stalls and bathtub or shower stalls are of the type which permit the door to be unlatched from either side of the door unless the stall is of such construction as to permit emergency access by climbing over or crawling under the partitions;
- (e) Maintain all exits, exit accesses and exit discharge areas free from obstructions or impediments and clearly marked to facilitate ingress and egress;

- (f) Assure that all areas accessible to residents aged three (3) and under shall be child-proofed appropriately, including but not limited to, covering electrical outlets, latching or locking cabinets, protecting sharp corners, and keeping poisonous plants, cosmetics, appliances and small items that could be swallowed outside a resident's reach; and
- (g) Maintain for all windows operable screens in good repair.

6233 FIRE AND CARBON MONOXIDE PROTECTION AND PREVENTION

- 6233.1 The facility shall have an approved fire inspection prior to the effective date of licensure. The building shall, at all times, maintain the standards established under applicable building and fire codes, including but not limited to the District of Columbia Fire Prevention Code Supplement, Title 12D DCMR.
- 6233.2 The facility shall develop and implement a fire safety and evacuation plan approved by the Department of Fire and Emergency Medical Services. The facility shall fully inform and train staff and residents about the facility's fire, safety and evacuation plan, including individual staff duties, location and operation of fire extinguishers, and telephone procedure for notifying the Department of Fire and Emergency Medical Services. Copies of the plan shall be posted throughout the facility and readily available to staff and residents at all times.
- 6233.3 The facility shall conduct a minimum of one fire drill each month. The facility shall maintain a record of each fire drill.
- 6233.4 The facility shall conduct a minimum of one fire extinguisher and one smoke detector inspection each month. The facility shall maintain a record of each inspection.
- 6233.5 The facility shall maintain at least one working smoke detector on each floor and at least one additional smoke detector for each separate sleeping area not connected by a common hallway.
- 6233.6 The facility shall maintain a working fire extinguisher, subject to annual inspection, for each cooking area and wing of the facility, and all areas used for electrical, gas, or other heating equipment.
- 6233.7 The facility shall be equipped with at least one working carbon monoxide detector on each floor and at least one additional carbon monoxide detector for each sleeping area not connected by a common hallway.

6234 SANITATION

6234.1 The facility and its grounds shall be maintained in a sanitary, comfortable and safe condition, free from rodent and insect infestation, and in accordance with applicable law.

- 6234.2 The facility shall keep trash in kitchens and bathrooms in covered trash receptacles that prevent the penetration of insects and rodents.
- 6234.3 The facility shall keep trash outside the facility in secure, non-combustible, covered receptacles that prevent the penetration of insects and rodents. The facility shall keep trash collection receptacles separate from play areas and located so as to avoid being a nuisance to neighbors. The facility shall remove trash from the premises at least once a week.
- 6234.4 The facility shall store cleaning equipment, cleaning agents, aerosol cans, or other chemical substances in the original or other clearly labeled containers, in a place which is inaccessible to residents. This section shall not prohibit facilities from allowing the residents to use cleaning equipment, cleaning agents, aerosol cans, or other chemical substances under staff supervision or direction.

6235 REPAIRS AND MAINTENANCE

- 6235.1 The facility shall keep records of routine maintenance and cleaning in all areas.
- 6235.2 The facility shall replace or repair broken, run-down or defective furnishings, carpeting, and equipment. Outside doors, windows and other features of the structure necessary for security shall be repaired within twenty-four (24) hours.

6236 BATHROOMS

- 6236.1 The facility shall provide bathrooms with a minimum of one (1) sink with hot and cold water, one (1) flush toilet, and one (1) bath or shower with hot and cold water for every six (6) residents. Each bathroom shall contain a mirror secured to the wall at a convenient height.
- Bathing and toilet facilities shall be maintained in good repair and in clean condition, in accordance with applicable laws and housing codes, including but not limited to the 1995 BOCA International Plumbing Code, District of Columbia Construction Code Supplement, Title 12 DCMR.
- 6236.3 Potty-chairs shall not be located in areas used for food preparation or serving. Potty-chairs shall be emptied and cleaned after each use.
- 6236.4 Toilets shall be disinfected at least once daily or more often as needed using an appropriate germicidal agent.
- 6236.5 In programs serving teen parents, residents two (2) years old and younger shall not be included in the ratio of bathing and toilet facilities required herein.
- 6236.6 Privacy shall be provided by partitions or doors for toilets (unless inconsistent with a toilet training program), showers and bathtubs, unless there is a clinical justification for their removal.

- 6236.7 The facility shall supply each bathroom with toilet paper, soap and a wastebasket.
- 6236.8 Bathrooms shall be located on the same floor as sleeping rooms.
- 6236.9 Bathrooms shall be situated so as to allow direct access to them without the necessity of passing through a bedroom, except when a bedroom has an attached bathroom used only for the residents who reside in that bedroom.
- 6236.10 Bathtubs and showers shall have nonskid surfaces.

6237 BEDROOMS

- 6237.1 No more than four (4) residents may occupy a single bedroom without prior approval from the District of Columbia Department of Consumer and Regulatory Affairs ("DCRA") and the licensing agency. Residents age four (4) and over sharing a bedroom shall be of the same sex. Facilities shall make reasonable efforts to place children of the same or close to the same age and level of development in the same bedroom. In facilities serving teen parents, a resident and his or her child may be housed in a single bedroom.
- 6237.2 The facility shall provide bedrooms which comply with the 1996 BOCA National Building Code and all other applicable District of Columbia laws and regulations and have:
 - (a) Direct outside ventilation;
 - (b) At least one (1) operable window with a source of natural light;
 - (c) A mechanical light;
 - (d) At least seventy (70) square feet of space for single bedrooms, and at least fifty (50) square feet per person in bedrooms for two (2) or more residents;
 - (e) Appropriate individual furniture, and an individual closet or a designated section of a closet with clothes racks and shelves in or near the bedroom; and
 - (f) A separate bed or crib of sufficient size to accommodate each individual resident comfortably. Cots or portable beds may be used on an emergency basis only, which shall not exceed five (5) calendar days.
- Each bed or crib shall have a clean, comfortable, non-toxic and fire retardant mattress that complies with all applicable federal and local laws and regulations.
- 6237.4 Sheets and blankets shall be provided for each bed or crib, and pillows and pillows shall be provided for each bed. Sheets and pillows shall be washed at least weekly, and before use by another resident.

- 6237.5 Each bed shall be at least three (3) feet from any other bed(s) and any unprotected radiator.
- 6237.6 Bunk beds shall allow enough space in between each bed and the ceiling to allow the resident to sit up in bed; and they shall be equipped with safety rails on the top bunk and securely attached ladders capable of supporting an adult.
- 6237.7 The facility shall provide adequate separate bedroom space for those staff who live at the facility.

6238 NUTRITION

- 6238.1 The facility shall develop and follow a written plan for nutritional services including planning and budgeting for the resident's dietary needs, and purchasing, storing, preparing and serving food.
- 6238.2 The plan shall identify one (1) staff person who is responsible for implementing the nutritional service plan.
- 6238.3 The facility shall provide each resident at least three (3) regularly-scheduled meals per day and snacks that meet the National Research Council's recommended dietary allowance (RDA) as adjusted for the age and sex of each resident.
- 6238.4 The facility shall provide food to residents who miss regularly-scheduled meals.
- 6238.5 The facility shall provide food in accordance with a residents' religious beliefs, reasonable dietary preferences, including vegetarianism, or medical or specially prescribed dietary needs.
- 6238.6 The facility shall not deny food for any reason other than as medically directed, and shall not force-feed or otherwise coerce a resident to eat against his or her will except where medically prescribed.
- 6238.7 For facilities that serve food to staff, the facility shall serve to residents food that is substantially the same as that served to staff, unless religious beliefs, dietary preferences, or medical or special dietary needs require differences in diet.
- 6238.8 The facility shall store, prepare, and serve all food in a manner that is clean, wholesome, free from spoilage or pest infestation, and safe for human consumption.
- 6238.9 The facility shall maintain copies of menus for thirty (30) calendar days and records of food purchased for ninety (90) calendar days.

6239 HYGIENE

The facility shall establish procedures to ensure that each resident has the opportunity to practice proper personal care, hygiene, and grooming.

- 6239.2 The facility shall provide instruction on good habits of personal care, hygiene, and grooming that is appropriate to each child's age, sex, race, religion, cultural background level of development and/or disability.
- 6239.3 The facility shall allow each child to have a reasonable degree of freedom in determining his/her personal appearance, subject to the dictates of proper hygiene.
- 6239.4 The facility shall provide an individual towel, washcloth, comb, hairbrush, toothbrush and toiletry items including toothpaste, shampoo, deodorant, soap, and feminine hygiene products, where appropriate, for each resident.

6240 CLOTHING

- 6240.1 The facility shall coordinate with the contracting entity and, where applicable, the CSSD to ensure that each resident has his or her own adequate and appropriate seasonable clothing and footwear.
- Where the facility provides residents a clothing allowance, the facility shall provide the resident a clothing allowance on a regular and timely basis and notify the resident when the clothing allowance will be provided.
- 6240.3 The facility shall involve the resident in the selection of clothing, as appropriate to the resident's age and level of development.
- 6240.4 The facility shall coordinate with the contracting entity and, where applicable, the CSSD to permit each resident to take his or her clothing upon discharge from the facility.

6241 KITCHENS AND DINING AREAS

- 6241.1 The facility shall provide all necessary equipment for the preparation, storage, service and clean up of all meals for all of the residents and staff regularly served by the facility.
- 6241.2 The facility shall maintain all food preparation equipment in a clean and safe working order and meet all applicable health and safety codes.
- 6241.3 The facility shall provide a dining area with furniture that is appropriate for the age, physical condition, developmental stage and number of residents so that residents and staff may eat together.
- 6241.4 The facility shall provide dining utensils and dishes appropriate to the age, physical condition, developmental stage and number of residents and staff.
- Prior to and after each use, a facility shall thoroughly clean, rinse and sanitize all food contact surfaces, utensils and equipment used in preparation or storage of foods.

6241.6 The facility shall store, prepare, serve and transport food in a manner ensuring protection from contamination. Refrigeration and freezer storage shall meet all applicable health and safety codes.

6242 LIVING ROOMS, ADMINISTRATIVE AND COUNSELING SPACE

6242.1 The facility shall provide a common living room or day area for the use of all residents, which is equipped with comfortable furnishings, for general relaxation and entertainment which is appropriate to the resident's age and level of development.

6242.2 The facility shall provide:

- (a) Each resident a work area with appropriate lighting that is quiet and conducive to studying;
- (b) Administrative office space separate from the residents' living areas, unless specifically waived by the licensing agency; and
- (c) A designated space to allow private discussions and counseling sessions between individual residents and staff, or between individual residents and their parents, counselors, social workers, guardians ad litem or other advocates.

6243 HEATING AND COOLING

- 6243.1 The facility shall provide heating and cooling systems, which shall meet all applicable codes. All heating systems shall be installed with safety devices to prevent fires, explosions, carbon monoxide release and other hazards.
- 6243.2 The facility shall be adequately heated and cooled.
- 6243.3 The facility shall maintain a temperature of between sixty-eight (68) and seventy-two (72) degrees Fahrenheit, except during winter months, when the facility may maintain a temperature of no lower than sixty-five (65) degrees Fahrenheit during sleeping hours.
- 6243.4 Heat sources, such as hot water pipes, fixed space heaters, hot water heaters and radiators exceeding one hundred twenty (120) degrees Fahrenheit that are accessible to residents shall be equipped with protective guards or insulation to prevent residents from coming in contact with the heat source.

6244 WATER

- 6244.1 The facility shall provide a continuous supply of safe and potable water in all water outlets which is sufficient in quantity and pressure to meet the conditions of peak demand.
- 6244.2 Hot and cold or tempered water shall be provided in each sink, bath and shower.

6244.3 Hot water temperature shall not exceed one hundred twenty (120) degrees Fahrenheit at outlets accessible to residents.

6245 LIGHTING

- 6245.1 The facility shall provide proper lighting that complies with all applicable federal and local laws and regulations.
- 6245.2 Emergency lighting shall be provided and available at all times.
- 6245.3 All rooms, corridors, and stairways within a facility shall be equipped with operable electric illumination.
- 6245.4 All incandescent or fluorescent light fixtures shall be protected with shades or covers.
- 6245.5 The facility shall have working exterior electrical illumination for operable entrances and stairways to occupied buildings.

6246 LAUNDRY FACILITIES

- 6246.1 The facility shall have operable laundry facilities, a contract with a vendor of such services, or access to off-site laundry facilities. The facility shall not charge residents for the use of laundry facilities or services.
- All equipment located at the facility shall be in good repair and have protective safety devices and shall be located in an area which may be readily supervised by staff.
- 6246.3 The facility shall provide necessary laundry supplies.

6247 SPECIAL REQUIREMENTS FOR FACILITIES SERVING RESIDENTS WITH DISABILITIES

A facility providing care for residents with disabilities shall accommodate the needs of residents with disabilities to the extent that is otherwise required by Section 504 of the Rehabilitation Act of 1973, approved September 26, 1973, Pub.L. 93-112, 29 U.S.C. § 794, and the Americans With Disabilities Act, approved July 26, 1990, Pub.L 101-336, 42 U.S.C. § 12101, et seq.

6248 TELEPHONE

- 6248.1 The facility shall provide a sufficient number of telephones to accommodate staff and residents' use, including at least one (1) non-coin operated telephone within each building.
- 6248.2 The facility shall ensure that a resident has reasonable privacy when using the telephone.
- 6248.3 Adjacent to each telephone, the facility shall post emergency telephone numbers, including telephone numbers for the fire department, police department, emergency

physician, poison control center, health agency, contracting entity, licensing agency, CSSD, child abuse and neglect hotline, security service, and ambulance service.

6249 POWER TOOLS AND EQUIPMENT

The facility shall not use lawn mowers, hedge clippers and other similar equipment in an outdoor play area when a resident is present in the play area. The facility shall store such equipment in a locked storage area which is not generally accessible to residents. This section shall not prohibit facilities from allowing the residents to use such equipment under staff supervision or direction. The facility shall have a plan to assure the safe storage or use of such equipment at all times.

6250 RECREATION SPACE AND EQUIPMENT

6250.1 The facility shall provide regular and reasonable access to indoor and outdoor recreational space, equipment and supplies.

6250.2 The facility shall:

- (a) Maintain all recreational equipment and supplies in a safe, clean, durable condition;
- (b) Select such items for suitability to the resident's age and stage of development;
- (c) Maintain stationary outdoor recreational equipment of safe design, in good repair, without sharp protrusions and securely anchored to the ground;
- (d) Maintain recreation areas free from hazards and dangerous machinery;
- (e) Fence or enclose any outside recreation areas, if appropriate for the residents' age and stage of development;
- (f) Enclose with barriers all porches and patios more than thirty-six (36) inches above ground level, elevated walkways, and elevated play areas within or on the grounds; and
- (g) Cover with a protective surface (such as, but not limited to, mats, mulch, sand or wood chips) a tile floor, concrete, asphalt, or other hard surface under any outdoor or indoor climbing apparatus.

6251 MEDICAL EMERGENCY PLAN

6251.1 The facility shall develop and follow a plan for medical emergencies, including but not limited to psychiatric emergencies and contagious illnesses. The medical emergency plan shall include individual staff duties, staff awareness of the specific medical needs of all residents, telephone numbers required pursuant to § 6248.3, and procedures for notifying the relevant emergency response organization.

- 6251.2 The facility shall train staff on medical emergency procedures on an annual basis. The facility shall document that each staff person is trained in implementation of the emergency medical plan.
- One (1) staff person shall be assigned responsibility for coordinating the planning and procedures for meeting potential medical emergencies.
- 6251.4 A copy of the emergency medical plan shall be accessible at all times to staff and residents.

6252 NON-MEDICAL EMERGENCY PLAN

- 6252.1 The facility shall develop and follow a plan for meeting potential emergencies, such as fire, power outage, severe weather conditions and staffing problems including individual staff person's duties, systems for notification of appropriate persons and specification of evacuation routes and procedures, with clearly marked diagrams.
- The facility shall train staff on non-medical emergency procedures on an annual basis. The facility shall document that each staff person is trained in implementation of the non-emergency medical plan.
- One (1) staff person shall be assigned responsibility for coordinating the planning and procedures for meeting potential non-medical emergencies.
- 6252.4 The facility shall post the plans and procedures at suitable locations throughout the facility.

6253 TOXIC AND POISONOUS SUBSTANCES, LEAD PAINT AND ASBESTOS

- 6253.1 The facility shall maintain onsite only those poisonous, toxic or flammable substances which are required to maintain the facility. The facility shall store all such substances in accordance with the manufacturer's instructions, in locked storage areas, separate and apart from food, and in locations that are inaccessible to residents.
- 6253.2 The facility shall label all containers containing toxic or poisonous substances with descriptive information, including the contents and antidote.
- 6253.3 The facility's indoor areas shall comply with all applicable federal and local laws and regulations governing lead paint and asbestos.

6254 FIREARMS AND EXPLOSIVES

6254.1 The facility shall not permit or maintain any explosives, pyrotechnics, firearms, chemical weapons, or other similar device or substance anywhere within the facility. Nothing in this paragraph shall be construed as prohibiting law enforcement authorities from bearing arms when they are present at the facility in conjunction with their official responsibilities.

6254.2 The facility shall have written policies and procedures for handling incidents involving weapons or illegal contraband within the facility. The facility immediately shall contact local law enforcement if there is a reasonable suspicion that a resident or staff member is in possession of a firearm.

6255 FIRST AID

- 6255.1 The facility shall maintain accessible first aid kits in the facility and in the vehicles used to transport residents.
- 6255.2 The facility shall have accessible a first aid kit during all recreational activities.
- 6255.3 The facility shall store all first aid supplies in closed containers that are accessible to staff at all times. These kits shall be checked and restocked regularly.

6256 ADMISSION AND PLACEMENT

- 6256.1 The contracting entity shall place no child under the age of six (6) in a facility unless:
 - (a) The child has documented exceptional needs which cannot be met in another type of care; and
 - (b) The facility has a program to treat the child's specific needs.
- 6256.2 The contracting entity shall place no child under the age of twelve (12) in a facility for longer than thirty (30) calendar days unless:
 - (a) The child has documented special treatment needs which cannot be met in a foster home; and
 - (b) The facility has a program to treat the child's specific needs.
- 6256.3 CFSA shall not place residents in a facility with a capacity of more than eight (8) residents without the express written approval of the CFSA Director. The CFSA Director shall only grant such approval if CFSA provides written evidence that the resident's needs can be met only in that specific facility, and the approval shall include a specific description of the services available in that facility to address the resident's needs.
- 6256.4 The contracting entity shall place no child in a runaway shelter or emergency care facility for longer than ninety (90) calendar days or thirty (30) calendar days if placed by CFSA.
- 6256.5 The contracting entity timely shall provide youth residential facilities with all available information and resources necessary to provide appropriate services to residents, including but not limited to the name of the resident's treating physician and authorization to obtain medical information, and shall cooperate with facilities in serving children.

- 6256.6 Prior to admission, the contracting entity shall make reasonable efforts to determine and document in writing that the facility can provide services, activities, and programs which meet the needs of the child, and that the facility is the least restrictive, most normative environment for the child that is clinically appropriate. In determining whether the facility adequately can meet the needs of the child, the following factors shall be considered:
 - (a) The availability of educational services suitable to the child's needs;
 - (b) The age group of residents currently in the facility relative to the child's age and level of development;
 - (c) The mental, physical, or emotional condition of the residents currently in the facility relative to that of the child;
 - (d) The child's health needs relative to the capabilities of the facility to meet such needs:
 - (e) The availability of trained professional staff necessary to provide the child with maintenance, care, or treatment required by his or her physical, mental, or emotional condition; and
 - (f) The proximity to the resident's family and community.
- Where practicable, the facility shall provide the child's parent(s) or guardian(s), the contracting entity, and, as appropriate to age and level of development, the child, a reasonable opportunity to participate in the admission process and decisions, and provide due consideration to their concerns regarding the placement.
- 6256.8 The facility shall not exceed its licensed capacity.
- 6256.9 The facility shall establish procedures to prepare for the child's arrival, including but not limited to pre-placement visits when possible, designation and preparation of sleeping quarters and space for the child's personal belongings, and assignment of staff to help orient the child and to assist the child with adjustment to the facility.
- 6256.10 The facility shall provide staff with information to facilitate the child's placement, including but not limited to the reason for placement, the child's medical condition and mental health, any medications, allergies, behavioral issues, and any other necessary information or instructions related to the individual needs of the child.
- 6256.11 To the greatest extent practicable, the child's arrival at the facility shall be timed so as to cause the least distress to the child and the least disruption to the staff and residents.
- 6256.12 The facility shall maintain an admissions log that shall include the name and date of birth of each resident, the date of admission, and the date of discharge or transfer.

6257 INTAKE SERVICES

- 6257.1 Immediately upon the admission of a resident, the facility shall identify and provide for the resident's basic needs, including, but not limited to, clothing, food, hygiene, and medications.
- 6257.2 The facility, together with the contracting entity, shall as soon as possible identify and document all emergency medical and mental health needs, allergies, basic needs, and non-emergency medical and mental health conditions and physical infirmities, including all visible signs of illness or injury, and document this information in the resident's case record, along with documentation of a pre-admission medical screen.
- 6257.3 As soon as practicable, and, in any event, not more than forty-eight (48) hours after admission, the facility shall complete an admissions record that includes the following information, where available:
 - (a) The resident's name, date and place of birth, social security number, date of admission, and citizenship;
 - (b) A description of the resident's identifying features, including but not limited to sex, race, height, weight, color of hair, color of eyes, and identifying marks;
 - (c) An accounting of the resident's possessions;
 - (d) The primary language or means of communication spoken and understood by the resident and the primary language used by the resident's family, if other than English;
 - (e) The name, address, and telephone number of the resident's parent(s) or other responsible family members, guardian, attorney, guardian ad litem, case worker, therapist, psychologist, psychiatrist, and other medical professionals, and the contracting entity and CSSD, as applicable;
 - (f) A description of the resident's medical condition, including identification of any allergies, current medications, physical impairments or limitations, and psychological or mental health conditions;
 - (g) A current photograph of the resident;
 - (h) The resident's custody, guardianship and commitment status;
 - (i) An assessment of the resident's family situation, reasons for needing care and options available as appropriate to the resident's situation;
 - (j) The current and planned school placement for school-aged residents; and
 - (k) Any relevant court orders.

As soon as practicable, and in any event not more than forty-eight (48) hours after admission, the facility shall explain to the resident, in a manner consistent with the resident's age and level of development, the resident's rights and responsibilities and the facility's rules and policies, emergency procedures, and grievance procedures.

6258 DEVELOPMENT OF AN INDIVIDUAL SERVICE PLAN

- Within three (3) calendar days of a resident's admission, the facility and the contracting entity shall jointly assess the resident's strengths and needs and develop a written initial individual service plan (ISP) for the resident. To the extent practicable, the initial ISP shall include those items set forth in § 6259.1, as applicable.
- 6258.2 The facility shall provide the resident, the resident's parent(s) or guardian(s), and the resident's guardian ad litem a reasonable opportunity to participate in developing the initial ISP.
- 6258.3 Within fifteen (15) calendar days of a resident's admission, the facility and the contracting entity shall jointly assess the resident's strengths and needs and develop a comprehensive ISP for the resident. The ISP shall include those items set forth in § 6259.1, as applicable.
- 6258.4 The comprehensive ISP shall be developed by a planning team consisting of the administrator, the contracting entity, and staff who will have direct responsibility for implementing the comprehensive ISP on a daily basis. In addition, appropriate health, mental health, and education representatives shall be encouraged to participate.
- 6258.5 The resident's parent(s) or guardian(s), the resident's guardian ad litem, the resident's school/educational representative, other appropriate service providers, and, as appropriate to age and level of development, the resident and those persons invited by the resident who are significant to the resident's life, shall, where feasible, be invited to participate in developing the comprehensive ISP, unless otherwise provided in any court order. The facility shall record and maintain in the resident's case record its efforts to involve the foregoing persons and the reasons why any such persons did not participate.
- 6258.6 The resident's physical, mental, emotional, academic, social, familial, recreational, and life skills needs and strengths relative to the resident's age, level of development, cultural background, and impairments shall be considered, at a minimum, in developing the initial and comprehensive ISP.
- 6258.7 Each person who participated in its development shall sign the initial and comprehensive ISP.
- 6258.8 The facility shall provide the contracting entity and, where applicable, the CSSD with a copy of the resident's initial and comprehensive ISP.
- 6258.9 The facility shall provide the resident with a copy of his or her initial and comprehensive ISP, as appropriate to the resident's age and level of development.

6259 CONTENTS OF THE INDIVIDUAL SERVICE PLAN

- 6259.1 The initial and comprehensive ISP shall:
 - (a) Include the strengths and needs assessment;
 - (b) State the goals to be achieved and evaluate the resident's skill level for each goal;
 - (c) State the timeframes projected for meeting the goals;
 - (d) Describe the activities and services, including but not limited to daily, educational, counseling, recreational, vocational, mental health, and medical activities or services, including the prescription of psychotropic or other medications, that will be provided and who will provide them;
 - (e) Describe proposed involvement, visitation and communication with family and others;
 - (f) Set forth a discharge or transfer plan, where applicable;
 - (g) Describe the objectives and methods to be used to evaluate the resident's progress;
 - (h) Identify the person(s) responsible for coordinating and implementing the ISP;
 - (i) Be consistent with any court orders;
 - (j) Be consistent with the contracting entity and, where applicable, the CSSD's plans for the resident;
 - (k) State the treatment goals and interim objectives, services, and treatment to be provided for each goal, the projected times for achieving each goal, and the responsible service providers; and
 - (l) Identify criteria by which to assess the resident's progress and to determine when each treatment goal has been achieved.

6260 REVIEW OF THE INDIVIDUAL SERVICE PLAN

- 6260.1 The facility shall review the comprehensive ISP with all persons responsible for its implementation and with the resident's parent(s) or guardian(s). The facility shall also review the comprehensive ISP with the resident in a manner consistent with his or her capacity to understand. The comprehensive ISP and all revisions thereto shall be made available to the resident's parent(s) or guardian(s), the contracting entity, the CSSD, where applicable, and the resident, in a manner consistent with his or her capacity to understand.
- 6260.2 A copy of the comprehensive ISP and all revisions thereto shall be kept in the resident's case record.

- 6260.3 The facility shall review the resident's comprehensive ISP, reassess the resident's strengths and needs, and revise the comprehensive ISP as often as necessary and, except for residential treatment centers, emergency care facilities, and runaway shelters, no less frequently than every three (3) months.
- 6260.4 Emergency care facilities and runaway shelters shall review and, when appropriate revise, the resident's comprehensive ISP at least every fifteen (15) calendar days. Each review shall include specific recommendations for appropriate discharge planning, including anticipated date of discharge, recommended placement and identification of persons responsible for implementation of the plan.
- 6260.5 The comprehensive ISP shall be reviewed by a planning team consisting of the administrator, the contracting entity, and staff who will have direct responsibility for implementing the comprehensive ISP on a daily basis. In addition, appropriate health, mental health, and education representatives shall be encouraged to participate.
- 6260.6 To the extent practicable the comprehensive ISP review team shall include those specific individuals involved in the development of the comprehensive ISP.

6261 EDUCATIONAL SERVICES

- Within seventy-two (72) hours of admission, the contracting entity and, where applicable, the CSSD shall provide the facility with the information and documentation necessary for the facility to arrange for and ensure that each school-aged resident attends school or an educational program in accordance with all applicable federal, state, and local laws and the resident's initial ISP. Within forty-eight (48) hours of receiving such information from the contracting entity or the CSSD, the facility shall arrange for and ensure that each school-aged resident attends school or an educational program in accordance with all applicable federal, state, and local laws and the resident's initial ISP. Such school or educational program shall comply with all applicable laws, standards, and licensing requirements.
- The facility shall encourage residents to participate in community, school, recreational, and cultural activities as appropriate to the resident's age and level of development. To the extent practicable, the facility actively shall support and facilitate participation in and transportation to such activities.
- The facility shall maintain the resident's educational records, including, but not limited to, report cards and transcripts, in the resident's case record.

6262 HEALTH CARE PLAN

- The facility shall cooperate with the contracting entity and, where applicable, the CSSD to meet the residents' preventative, routine and emergency health needs, including:
 - (a) An initial medical screen of each resident by a licensed physician within twenty-four (24) hours of admission into a facility;

- (b) A comprehensive medical and dental examination of each resident by a licensed physician within fourteen (14) calendar days of admission into a facility unless the parent(s) or guardian(s), contracting entity or CSSD provides a written report of such examination conducted within the timeframes recommended by the American Academy of Pediatrics. The American Academy of Pediatrics recommends that children receive such examinations at the ages of two (2) days, four (4) days, one (1) month, two (2) months, four (4) months, nine (9) months, twelve (12) months, fifteen (15) months, eighteen (18) months, two (2) years, and annually thereafter;
- (c) Routine medical and dental examinations at intervals recommended by the American Academy of Pediatrics, as specified in § 6262.1(b);
- (d) Maintenance of required immunizations and booster shots recommended by the American Academy of Pediatrics;
- (e) Vision and hearing examinations and provisions for obtaining eye glasses and hearing aids as medically recommended;
- (f) Provision of prosthetic and corrective devices prescribed by a physician;
- (g) Provision of health and sex education as appropriate to the resident's age and level of development;
- (h) Explanation of all medical and/or psychiatric treatments in language as appropriate to the resident's age and level of development;
- (i) Maintenance, storage and supervision of health records; and
- (i) Maintenance, storage, supervision and administration of prescription medications.

6262.2 The facility shall:

- (a) Prohibit the use and possession of alcohol and tobacco products by residents or staff, while on the premises of the facility;
- (b) Cooperate with the contracting entity and, where applicable, the CSSD to involve the resident's parent(s) or guardian(s) in the resident's health and medical care;
- (c) Cooperate with the contracting entity and, where applicable, the CSSD to obtain a general written consent upon admission from the resident's parent(s) or legal guardian(s), or by court order, for the provision of preventative and routine health care; and
- (d) Cooperate with the contracting entity and, where applicable, the CSSD to obtain a separate written consent prior to treatment from the resident's parent(s) or guardian(s), or by court order, for each incidence of non-routine health care.

6263 ADMINISTRATION OF PRESCRIPTION MEDICATION

- 6263.1 The facility shall develop and follow a written plan governing the use and administration of prescription medication to residents.
- Prescription medications shall be administered only by a dentist, physician, physician's assistant, registered nurse, or practical nurse who is a licensed health professional pursuant to the Health Occupations Revision Act, effective March 25, 1986, D.C. Law 6-99, D.C. Code § 2-3301, et seq., as amended.
- 6263.3 When specifically authorized by a physician, the facility may allow a staff person (excluding volunteers and staff not providing direct care and supervision of residents) to administer medications to a resident. In such cases, the facility shall ensure that the staff person is able responsibly to administer medications, shall train the staff person concerning administration procedures, and shall provide supervision and monitoring. The facility shall obtain the consent of the resident and the resident's parent(s) or guardian(s) prior to allowing a staff person to administer medications to a resident.
- 6263.4 When specifically authorized by a physician, the facility may allow a resident to administer or self-administer medications or allow a resident to administer medications to his or her child. In such cases, the facility shall ensure that the resident is able responsibly to medicate or self-medicate, shall train the resident concerning administration procedures, and shall provide supervision and monitoring. The facility shall obtain the consent of the resident's parent(s) or guardian(s) prior to allowing the resident to self-administer medications.
- 6263.5 The facility shall document the prescription and administration of medication, and notify attending physicians of, and record, significant changes in a resident's behavior or health.

6264 THERAPEUTIC USE OF PSYCHOTROPIC MEDICATIONS

- 6264.1 If psychotropic medication is prescribed, the facility shall cooperate with the contracting entity and, where applicable, the CSSD to obtain a written report from the prescribing physician detailing:
 - (a) The type of medication;
 - (b) The dosage;
 - (c) The necessity for the medication;
 - (d) The resident's other medications and the effect of their interaction;
 - (e) The staff monitoring requirements, if any;
 - (f) Potential side effects;

- (g) The next scheduled clinical meeting; and
- (h) A current therapeutic treatment plan or behavioral management plan.
- 6264.2 The facility shall cooperate with the contracting entity and, where applicable, the CSSD to obtain written consent from the resident's parent(s) or guardian(s), or court order, before administering psychotropic medications.
- 6264.3 The facility shall document the prescription and administration of medication, and notify attending physicians of, and record, significant changes in a resident's behavior or health.

6265 STORAGE OF MEDICATIONS

- 6265.1 The facility shall maintain each resident's prescribed medications in a secure area and, within that secure area, maintain each resident's medications separate from that of other residents.
- 6265.2 The facility shall store all medications requiring refrigeration in a locked refrigerator or in a secure container within a refrigerator.
- 6265.3 The facility shall store all medications and medical supplies in their original containers and in an area accessible only to staff members (excluding volunteers and staff not providing direct care and supervision of residents).
- 6265.4 The facility shall safely dispose of all outdated prescriptions or those no longer in use.

6266 MENTAL HEALTH SERVICES

- 6266.1 For residents who are in their initial placement in a facility, the facility shall cooperate with the contracting entity and, where applicable, the CSSD to develop and follow a written plan for providing effective mental health services, including but not limited to:
 - (a) Crisis intervention:
 - (b) A preliminary mental health screen by a qualified mental health practitioner within three (3) business days of admission; and
 - (c) Evaluation and assessment, including a standardized diagnostic mental health assessment completed within fifteen (15) calendar days of admission by a qualified mental health practitioner, unless the parent(s) or guardian(s), contracting entity, CSSD, or other governmental entity provides a written report of such examination conducted no more than thirty (30) calendar days prior to admission.
- 6266.2 For residents who the contracting entity previously placed in another facility, the facility shall cooperate with the contracting entity and, where applicable, the CSSD to

develop and follow a written plan for providing effective mental health services, including but not limited to:

- (a) Crisis intervention:
- (b) An evaluation within seven (7) calendar days of admission by the resident's ISP planning team, as established by § 6258.4, to determine whether another mental health screen or evaluation and assessment is required, including written documentation of the ISP planning team's determination;
- (c) If the planning team determines that another mental health screen is required, a mental health screen by a qualified mental health practitioner within seven (7) business days of this determination; and
- (d) If the planning team determines that another mental health evaluation and assessment is required, an evaluation and assessment, including a standardized diagnostic mental health assessment, shall be completed within thirty (30) calendar days of admission by a qualified mental health practitioner, unless the parent(s) or guardian(s), contracting entity, CSSD, or other governmental entity provides a written report of such examination conducted no more than thirty (30) calendar days prior to admission.
- 6266.3 The facility shall cooperate with the contracting entity and, where applicable, the CSSD to develop and follow a written plan for providing effective mental health services to all residents, including but not limited to:
 - (a) Individualized treatment, including therapy and counseling for individuals and groups;
 - (b) Substance abuse prevention, intervention, and treatment;
 - (c) Clinical consultation with residents, parent(s) or guardian(s), and staff;
 - (d) Access to emergency mental health services on a twenty-four (24) hour per day, seven (7) day per week basis;
 - (e) A standardized system for collecting, recording, and conveying each resident's essential mental health information; and
 - (f) A standardized system for collecting and reviewing the resident's historical mental health records.

6267 TRANSPORTATION SERVICES

6267.1 The facility shall provide or arrange for transportation necessary to implement each resident's ISP and health care plan, including but not limited to relative visitation, medical and counseling appointments, and school and extracurricular activities.

- 6267.2 The facility shall provide vehicles for the transportation of residents and staff in their work with the residents. Such vehicles shall include all safety devices required by law.
- 6267.3 All persons acting on behalf of the facility who drive vehicles used to transport residents shall be locally licensed to operate that class of vehicle.

6268 RECREATIONAL ACTIVITIES

- 6268.1 The facility shall develop and follow a written plan for providing recreational and leisure activities adequate to meet each resident's needs, including:
 - (a) Designated staff for supervising the provision of recreational activities;
 - (b) Sufficient supervised, organized or structured individual and group recreational and leisure programs, both indoors and outdoors, appropriate to the resident's age, interests, and needs, and consistent with the resident's ISP;
 - (c) Free time for residents to pursue their individual interests, with protective supervision as required, unless otherwise provided in the resident's ISP;
 - (d) The maximum use of available community recreational resources, where appropriate;
 - (e) Reasonable access to sufficient recreational supplies, equipment and activities appropriate to the resident's age, interests, and needs; and
 - (f) Usable leisure-time material, including but not limited to books, games, and toys that are appropriate to the resident's sex and stage of development, and transportation to local libraries.

6269 DAILY LIVING EXPERIENCES

- 6269.1 The facility shall develop, conspicuously post in the facility, and follow a written plan of basic daily routines, tasks and work assignments for residents which are consistent with the resident's age and level of development.
- Whenever practicable, residents shall participate in planning daily routines, tasks and work assignments.
- Daily routines, tasks and work assignments shall be consistent with each resident's age and level of development.
- 6269.4 Daily routines, tasks, and work assignments shall not conflict with a resident's ISP or serve as a substitute for sufficient facility staff.
- 6269.5 The facility shall make the plan of basic daily routines, tasks and work assignments for residents available to all residents and staff.

6270 INDEPENDENT LIVING SKILLS

- As early as practicable, but no later than a resident's fourteenth (14th) birthday, the facility shall develop and follow a written plan to teach independent living skills that are individualized, age-appropriate, and in accordance with each resident's ISP, including knowledge, practices and skills in the following areas:
 - (a) General health, general safety and fire safety;
 - (b) Reproductive health and contraception;
 - (c) Parenting skills, including child development, health, and safety;
 - (d) HIV and sexually transmitted disease;
 - (e) Problem solving and decision-making;
 - (f) Conflict resolution, negotiation, team building, peer support, and relationship;
 - (g) Work readiness and employment;
 - (h) Stress reduction;
 - (i) Money management;
 - (j) Meal purchase, preparation and storage;
 - (k) Nutrition:
 - (1) Shopping;
 - (m) Personal grooming and hygiene;
 - (n) Transportation; and
 - (o) Household maintenance.

6271 RESIDENTS' COUNCILS

- 6271.1 Each facility shall establish and maintain a residents' council composed of residents.
- 6271.2 The residents' council shall meet on a monthly basis.
- 6271.3 Each facility shall provide the space for, and post notice of, residents' council meetings.
- 6271.4 The residents' council may make recommendations to the facility to ensure and improve the quality of the facility and its staff and to ensure the protection of residents' rights.

6272 INVOLVEMENT OF FAMILY AND OTHERS

- 6272.1 The facility shall cooperate with the contracting entity and, where applicable, the CSSD to make reasonable efforts to develop a relationship with each resident's family, consistent with any court order, so that the facility is able to:
 - (a) Notify each resident's family of the resident's whereabouts, if appropriate;
 - (b) Obtain any necessary parental consent;
 - (c) Provide necessary crisis intervention services;
 - (d) Obtain information and documentation necessary to conduct an assessment of each resident;
 - (e) Assist each resident's family to adjust to the resident's placement and separation;
 - (f) Develop a visitation plan and encourage each resident's family's continued interaction with the resident in accordance with the resident's ISP;
 - (g) Inform each resident's family of the resident's progress; and
 - (h) Mobilize familial strengths and resources to help the family participate in planning for the resident's return home or to another community environment.
- 6272.2 The facility shall develop and follow written rules for reasonable visitation, mail, and telephone contact between residents and the residents' family, friends, attorney, and guardian ad litem, which shall be consistent with any court order and which shall include:
 - (a) Regular visiting hours and additional visiting hours for visitors who are unable to visit during regular visiting hours;
 - (b) Reasonable conditions of privacy;
 - (c) A designated space, separate from the resident's bedrooms, for visitation purposes; and
 - (d) Procedures for restricting visitation, mail, or telephone contacts.
- 6272.3 The facility may restrict visitation, mail, or telephone contacts with the resident's family, guardian, attorney, or guardian ad litem only for the following reasons:
 - (a) To comply with a court order; or
 - (b) To safeguard against a documented safety or security risk to residents or staff.

- 6272.4 The facility may restrict visitation, mail or telephone contacts with the resident's friends only for the reasons detailed in § 6272.3 or as a method of behavior management, provided that the restriction is consistent with the resident's ISP.
- 6272.5 The facility timely shall inform the resident and, to the extent practicable, those affected outside the facility, including but not limited to the resident's parent or guardian, attorney, and guardian ad litem, of the nature of the restriction, the reasons for the restriction, and the duration of the restriction.
- 6272.6 The facility shall document in the resident's case record the restriction, the reasons for the restriction, and the duration of the restriction.

6273 BEHAVIOR MANAGEMENT

- 6273.1 Facilities are encouraged to establish behavior management strategies, in accordance with the resident's age and level of development, to provide rewards and praise for appropriate behavior as well as negative consequences for inappropriate behavior. Such strategies may include, but are not limited to:
 - (a) A points or token economy system in which points or tokens are used to purchase privileges; and
 - (b) An oral or written contract between the facility and the resident to help the resident acquire self-discipline.
- 6273.2 The facility shall develop and follow written policies and procedures regarding the discipline of residents, including but not limited to the:
 - (a) Rules each resident shall follow;
 - (b) Reasonable discipline that may be administered for violating those rules, which shall relate to and be proportionate to the unacceptable behavior, and reflect the nature of real world experiences, as appropriate to the resident's age and level of development;
 - (c) Resident's right to appeal a disciplinary decision through the grievance process; and
 - (d) Procedures for appealing a disciplinary decision.
- 6273.3 The facility shall ensure that the policies and procedures regarding the discipline of residents are explained to each resident as soon as practicable, but in no event later than forty-eight (48) hours after admission.
- Only staff who have received specific training in acceptable methods of discipline shall utilize discipline. The facility shall maintain documentation of such training within each staff member's personnel record.

- 6273.5 Only staff who are known to the resident shall administer discipline to the resident.
- 6273.6 The facility shall inform the resident of the nature of and the reason for the discipline prior to administering the discipline.
- 6273.7 The facility shall administer discipline as soon as practicable after the violative behavior occurs and after allowing the resident to explain his or her violative behavior.
- 6273.8 Discipline shall not be arbitrary or capricious and shall be consistent among residents.
- 6273.9 The facility shall document in the resident's case record any disciplinary action and shall include the following:
 - (a) The nature of the violative behavior warranting discipline;
 - (b) The date of the violative behavior warranting discipline;
 - (c) The type of discipline administered;
 - (d) The date the discipline was administered;
 - (e) The name and title of the person who administered the discipline;
 - (f) The resident's response to the discipline; and
 - (g) Any appeal and the outcome of the appeal.
- 6273.10 Approved forms of discipline include, but are not limited to:
 - (a) Time-outs;
 - (b) The elimination or withholding of an allowance provided by the facility but not yet paid;
 - (c) Requiring the resident to prepare a written report about the violative behavior, including the lessons learned, the appropriate ways in which the resident could respond if the situation were to arise again, and the way in which the resident would respond if the situation were to arise again;
 - (d) The prohibition against attendance at or participation in planned activities;
 - (e) The prohibition against the use of entertainment devices, including but not limited to televisions, radios, and computers;
 - (f) Restrictions on contact with friends; and
 - (g) Restrictions on day or weekend passes.

- 6273.11 A time-out is the placement of a resident in a specific location within the facility that is visibly monitored by staff. The length of the time-out shall be determined by the resident's age and level of development, and shall not be for more than thirty (30) minutes, unless otherwise provided by the administrator. Under no circumstance may the facility place a resident in a time-out for more than sixty (60) minutes.
- 6273.12 The facility shall prohibit unusual or extreme methods of discipline, including but not limited to:
 - (a) Corporal punishment;
 - (b) Physical exercise;
 - (c) Requiring or forcing a resident to maintain an uncomfortable physical position, or requiring or forcing a resident to engage in repetitive physical movements;
 - (d) Group discipline for the behavior of fewer than all residents;
 - (e) Verbal abuse, ridicule, or humiliation;
 - (f) The denial of social, mental health, educational or casework services;
 - (g) The deprivation of any meal;
 - (h) The use or denial of any medication;
 - (i) The denial of visitation, mail, or telephone contact with a resident's family, attorney, or guardian ad litem;
 - (j) The denial of sleep;
 - (k) Requiring the resident to remain silent for long periods of time;
 - (l) The deprivation of civil rights provided by law, including, where applicable, the right to privacy, the right to freedom of association, the right to vote, the right to practice or not practice religion or faith of choice, the right to be free from unreasonable search and seizure, the right to be free from sexual harassment, and the right to be free from discrimination, including the right to equal access to services regardless of race, religion, ethnicity, sexual orientation, disability, or gender;
 - (m) The denial of shelter, clothing, bedding, restroom facilities, or other essential personal needs;
 - (n) The withholding of the resident's funds, from whatever source, excluding an allowance not yet paid;
 - (o) Locked isolation;

- (p) Organized social ostracism, including but not limited to codes of silence;
- (q) Continuing discipline when signs of severe emotional or physical distress are apparent;
- (r) Barring the resident from entry to the facility, locking a resident out of the facility, or expulsion of the resident from the facility; and
- (s) Assigning any unduly physically strenuous, harsh, or degrading work.

6274 THE USE OF RESTRAINT

- 6274.1 The facility shall not administer any form of restraint unless the resident is physically endangering himself/herself or others and no other intervention has been or is likely to be effective in averting the danger.
- 6274.2 The facility shall not administer any form of restraint as a method of discipline.
- 6274.3 The facility shall train staff in the acceptable and safe methods of restraint and the need to minimize the use of restraint. Only staff who received specific training in the acceptable and safe methods of restraint shall utilize restraint. The facility shall document such training within each staff person's personnel record.
- 6274.4 The facility shall develop and follow written policies and procedures regarding the use of restraint, including:
 - (a) A list of the less restrictive interventions that shall be utilized, if appropriate, prior to the use of restraint;
 - (b) A list of the approved methods of restraint;
 - (c) For each form of restraint, a list of the least to most restrictive methods of restraint;
 - (d) A requirement that staff utilize the least restrictive method of restraint appropriate under the circumstances;
 - (e) The maximum duration for each form of restraint;
 - (f) The justification for each form of restraint;
 - (g) The procedures for administering each form of restraint;
 - (h) A list of the staff authorized to approve, administer, and monitor restraint;
 - (i) A description of the staff training on the utilization and administration of each form of restraint, which shall occur every six (6) months and be documented in a report maintained at each facility; and

- (j) Procedures requiring a member of the staff who is not administering the restraint to monitor the resident being restrained.
- 6274.5 The facility shall document in the resident's case record any restraint and shall include the following:
 - (a) The nature of the behavior warranting restraint;
 - (b) The date of the behavior warranting restraint;
 - (c) The restraint administered, including the duration of the restraint;
 - (d) The date the restraint was administered:
 - (e) An explanation of less restrictive intervention used prior to the restraint or the reason why such interventions were not utilized;
 - (f) The name and title of the person(s) who ordered, administered, and monitored the restraint; and
 - (g) The resident's response to the restraint.
- 6274.6 The facility shall administer restraint in a manner that is least likely to cause personal injury or pain.
- 6274.7 The facility shall immediately release a restrained resident who exhibits any sign of significant physical distress during restraint and immediately shall provide the resident with any necessary medical assistance.
- 6274.8 The facility shall release a restrained resident as soon as it is safe to do so.
- 6274.9 The facility shall notify the contracting entity and the licensing agency, the resident's parent(s), guardian(s) or custodian(s), the resident's guardian ad litem and, where applicable, the CSSD, as soon as possible but in no event later than twenty-four (24) hours by oral methods and in writing no later than the next business day, of any use of restraint.

6275 DISCHARGE AND AFTERCARE PLANNING

- 6275.1 For each resident, the facility shall prepare a discharge plan, including:
 - (a) A statement of the reason for the discharge;
 - (b) A summary of the services that were provided during care;
 - (c) A summary of the resident's educational and medical histories;
 - (d) A description of the supports and resources to be provided to the resident in preparation for discharge;

- (e) Recommendations for aftercare and the identity of the person(s) responsible for aftercare;
- (f) The resident's expected address and telephone number after discharge; and
- (g) The identity of the person(s) responsible for the resident after discharge, where applicable.
- 6275.2 For residents in emergency care facilities and runaway shelters, discharge planning shall begin commensurately with the resident's admission.
- 6275.3 The discharge plan shall be developed by a planning team consisting of the administrator, the contracting entity, and staff who will have direct responsibility for implementing the discharge plan. Where feasible, the resident, the resident's parent(s) or guardian(s), and the resident's guardian ad litem shall be involved in the development of the discharge plan.
- 6275.4 In the case of a planned discharge, the facility shall work with the resident in advance of the date of discharge to assure a smooth transition.
- 6275.5 The facility may not discharge a resident without the agreement of the contracting entity and, where applicable, the CSSD.
- 6275.6 Upon the resident's discharge from the facility, the facility shall turn over the original or a copy of the resident's case record to the contracting entity.

6299 DEFINITIONS

Act - The Youth Residential Facilities Licensure Act of 1986, effective August 13, 1986, D.C. Law 6-139, D.C. Code § 3-801 et seq.

Administrator - The person responsible for the operation of the facility or that person's designee.

Admission - The administrative process of a child's entry into a facility.

Aftercare - Control, supervision, and care exercised over children released from facilities.

Annual license - A license that is granted to a facility whose program, facilities, and operations meet the standards of this Chapter.

Applicable licensing agency – For youth residential facilities intended primarily for detained or delinquent youth or children in need of supervision, the applicable licensing agency is the Youth Services Administration. For all other facilities, the applicable licensing agency is the Child and Family Services Agency.

Audit - An examination of records or accounts to check their accuracy, which is conducted by a person or persons not directly involved in the creation and maintenance of these records or accounts. An independent audit results in an opinion based on generally accepted accounting principals (GAAP) that either affirms or disaffirms the accuracy of the records or accounts audited.

Business day – All days excluding Saturdays, Sundays, and legal holidays.

Case record – All information maintained by a facility concerning a resident.

CFSA - Child and Family Services Agency.

Child or Children - Any individual who is:

- (a) Under 18 years of age;
- (b) 18 to 20 years of age and the subject of a consent decree or dispositional order entered pursuant to proceedings of the Family Division of the Superior Court of the District of Columbia, D.C. Code § 16-2301 et seq.; or
- (c) 18 to 21 years of age and has an individualized education program pursuant to the Individuals with Disabilities Education Act, approved April 13, 1970, Pub.L. 91-230, 84 Stat. 175, 20 U.S.C. § 1400 et seq.

Children in need of supervision – A child who is in need of care and rehabilitation and who:

- (a) Is subject to compulsory school attendance and is habitually truant from school without justification;
- (b) Has committed an offense committable only by children; or
- (c) Is habitually disobedient of the reasonable and lawful commands of his parent(s), guardian(s), or other custodian and is ungovernable.

Continuing care - Ongoing supervision and care designed to nurture a resident's growth and development, meet basic health needs, and monitor applicable school or work attendance.

Contracting entity - Any public or private entity or individual that places or offers to place a child in a youth residential facility. The term includes, but is not limited to, the Child and Family Services Agency, the Youth Services Administration, and their successors. Where the contracting entity is not also the child's legal custodian, the term shall be read to include, in addition to the contracting entity, the child's legal custodian.

CSSD - Court Social Services Division of the District of Columbia Superior Court.

DCMR - District of Columbia Municipal Regulations.

Emergency care facility(ies) - Facilities that provide temporary supervision and care, usually not exceeding ninety (90) calendar days and provided as a result of an individual or family crisis, that includes monitoring of applicable school or work attendance and an assessment of a resident's physical, psychosocial, and educational needs.

Facility - See youth residential facility.

Independent living programs – Programs for adolescent and young adults that provide monitored residences in apartments or single dwelling units and serviced around preparing the adolescent or young adult to live successfully, on his or her own, in the community. Residents can include teen mothers and their children. Also known as a supervised apartment.

Individual Service Plan (ISP) – A document that sets forth a facility's plan for the resident's health, safety, welfare, and general well-being. The ISP includes the individualized treatment plan, as provided in section 7 of the Act (D.C. Code § 3-806).

Licensing agency - Child and Family Services Agency or Youth Services Administration.

Person - An individual, corporation, trustee, receiver, guardian, representative, firm, partnership, society, school, agency or other entity.

Provisional license - A license that may be issued if the applicant is temporarily unable to comply with all of the requirements of this Chapter and under the condition that the requirements will be met within a specific length of time.

Resident - A child residing in a youth residential facility.

Residential treatment center(s) - Facilities that are characterized by an emphasis on therapeutic intervention for residents who cannot or do not function satisfactorily in their own home or community. Staff provide twenty-four (24) hour supervision and a variety of professional services, such as individual or group psychotherapy, formal schooling, social skills training, recreation, and various other forms of therapy. Usually these facilities are located on a campus setting and utilize dormitory-type housing. These facilities may be locked or staff secure.

Restricted license - A license that is issued to a facility not in compliance with these regulations that prohibits the facility from accepting new residents or providing certain specified services that it otherwise would be authorized to provide.

Runaway shelters - Short-term facilities that house minor children who have departed the parental or legal guardian home, contrary to the wishes of the parent or guardian. Runaway shelters provide safety, twenty-four (24) hour supervision, physical and emotional nourishment and counseling to help resolve the difficulties between the children and their parent(s), so that the children can return to the parental home.

Staff or Staff person or Staff member - All employees of the facility and any other person (including, without limitation, volunteers, independent contractors, and vendors) regularly providing services at the facility. A person regularly provides services at the facility if the person:

- (a) Visits the facility on at least a weekly basis;
- (b) Visits the facility for at least ten (10) hours per month; or
- (c) Provides direct care and supervision of residents.

Therapeutic care - An intensive, professionally supervised program of education and treatment designed to meet a resident's physical, psychosocial, and educational needs as identified in an individualized treatment plan and if applicable, an individualized education program.

Youth group homes - Facilities that provide twenty-four (24) hour care for residents. Youth group homes maintain staff to meet the physical, emotional and developmental needs of their residents and provide supervision, guidance and recreation to their residents.

Youth residential facility - A residential placement providing adult supervision and care for one (1) or more children who are not related by blood, marriage, guardianship, or adoption (including both final and nonfinal adoptive placements) to any of the facility's adult caregivers and who were found to be in need of a specialized living arrangement as the result of:

- (a) A detention or shelter care hearing held pursuant to D.C. Code § 16-2312;
- (b) A dispositional hearing held pursuant to D.C. Code § 16-2317;
- (c) Family crisis, homelessness, runaway status, or other circumstances creating a need for out-of-home supervision and care; or
- (d) A mental or physical disability that requires, in accordance with 20 U.S.C. § 1401, et seq., more services than can be provided by nonresidential programs.

For purposes of this Chapter, the term "youth residential facility" only includes youth shelters, runaway shelters, emergency care facilities, and youth group homes.

Youth shelter – Facilities that provide temporary residential placement for alleged or adjudicated juvenile offenders prior to disposition by a court.

YSA - Department of Human Services, Youth Services Administration.

All persons desiring to comment on the proposed rulemaking shall submit written comments no later than thirty (30) days after the date of publication of this notice in the <u>D.C. Register</u>, to the Office of the Deputy Mayor for Children, Youth, and Families, 441 4th Street, NW, Room 960, Washington, DC 20001. Attn: Lynn French. Copies of the proposed rules may be obtained between the hours of 9:00 A.M. and 5:00 P.M. at the address listed above.

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