

8806 I CCL REPORTING REQUIREMENTS

Each licensee or applicant shall furnish to the licensing agency reports as required by the Department, including, but not limited to, those specified in this section.

PENAL CODE 11166 PROVIDES, IN FOLLOWS:



- ▶ ...any child care custodian...who has knowledge of or observes a child, in his or her professional capacity or within the scope of his or her employment, whom he or she knows or reasonably suspects has been the victim of child abuse, shall report the known or suspected instance of child abuse to a child protective agency **immediately** or as soon as practically possible by telephone and shall prepare and send a written report thereof within **36 hours** of receiving the information concerning the incident.
- ▶ A child protective agency shall be notified and a report shall be prepared and sent even if the child has expired, regardless of whether or not the possible abuse was a factor contributing to the death, and even if suspected child abuse was discovered during an autopsy.

PENAL CODE 11166.5 PROVIDES, IN PART, AS FOLLOWS:

Those who are mandated to report:

- ▶ ..."child care custodian" includes...licensees, administrators, and employees of licensed community care...facilities...foster parents...

- ▶ Penal Code 11165.9 provides as follows:

As used in this article, "child protective agency" means a police or sheriff's department, a county probation department, or a county welfare department. It does not include a school district police or security department.

REPORTS TO CCL IN | WORKING DAY

- ▶ If any of the following incidents occur in a certified family home or in the foster family agency, the foster family agency shall also report it to the CCL Department by the Department's **next working day during the normal business hours by telephone or fax:**
 - ▶ (1) Any suspected physical or psychological abuse of any child.
 - ▶ (2) Death of any child from any cause.

REPORTS TO CCL IN | WORKING DAY CONT.



- ▶ 3. Any injury to any child that requires treatment by a health practitioner
 - ▶ (A) This includes a permanent change in any child from ambulatory to nonambulatory status, if serving this nonambulatory child is inconsistent with the Plan of Operation or if a fire clearance has not been obtained.
 - ▶ (B) Please note the limitations on placing children with specialized health care needs at
 - ▶ Section 88030.1, Section 88030.2, Section 88065.1, and Section 88069.1.
 - ▶ Also, please note the requirement to notify the licensing agency regarding a change in the Plan of Operation at Section 88061(i)(4).

REPORTS TO CCL IN | WORKING DAY CONT.

4. Any unusual incident or child absence that threatens the physical or emotional health or safety of any child.

- (A) Report suicide threats or attempts regardless of injury or treatment.
- (B) Report temporary absences if a personal history or the needs and services plan indicate that the child may be in jeopardy when absent beyond the approved time.



REPORTS TO CCL IN | WORKING DAY

CONT.

- ▶ (5) Epidemic outbreaks.
- ▶ (6) Poisonings.
- ▶ (7) Catastrophes.
- ▶ (8) Fires or explosions that occur in or on the premises.
- ▶ (9) Complaints associated with a certified family home's or foster family agency's compliance with applicable licensing laws and regulations.
 - ▶ (d) Within **7** of the above reported incidents **1-9**, submit to the Department a written report that contains the following: see next slide



WITHIN **7** DAYS OF THE ABOVE REPORTED BY PHONE **9** INCIDENTS (**1** DAY REQUIREMENT TO CCL) , SUBMIT TO THE DEPARTMENT A WRITTEN REPORT THAT CONTAINS THE FOLLOWING:

- (1) Name, address, and telephone number of the certified family parent(s) involved.
- (2) Child's name, age, sex, and date of admission.
- (3) Name, address, and telephone number of the foster family agency or other personnel involved.
- (4) Date and nature of the incident.
- (5) Whether abuse report was required and filed.
- (6) Attending physician's name, findings, and treatment, if any.
- (7) Disposition of the case.
 - ▶ (e) If the analysis of the incident reported takes longer than seven working days, send an interim written report to the Department within seven days and follow-up with the final written report within ten days of concluding the analysis.

THE FOSTER FAMILY AGENCY SHALL REPORT THE FOLLOWING TO THE DEPARTMENT WITHIN **10** WORKING DAYS:

- (1) A change in the licensee's or applicant's mailing address.
 - ▶ (A) Report the individual's name, old address, new address, and date of the change.

- (2) A change in the administrator or chief executive officer.
 - ▶ (A) Include the name, mailing and residence address of the new individual.

 - ▶ (B) Submit the individual's beginning date.

Send verification of the administrator's education, experience, and qualifications.

- ▶ I. See Section 80019, Section 88019, and Section 88019.1 for criminal record and child abuse requirements applicable to a new administrator or chief executive officer.

REPORT THE FOLLOWING EVENTS NO LATER THAN THE **NEXT WORKING DAY**:

- (A) The items specified in Sections 88061(c)(1) through (9).
- (B) The placement or removal of a child in a certified family home or licensed foster family home, under emergency circumstances and without the authorized representative's participation.
- (C) A determination that the child must be relocated to another placement facility, because the foster family agency cannot meet the needs of the child.



REPORT THE FOLLOWING WITHIN **7** DAYS:

(A) The determination that the child must be relocated to another certified family home or licensed foster family home.



(B) Information that the child is not enrolled in or regularly attending school.



CERTIFICATION LOGS

The foster family agency shall provide to the Department a log of family homes certified and decertified during the month by the **10th** day of the following month.

DURING THE MONTH, THE FOSTER FAMILY AGENCY SHALL NOTIFY THE DEPARTMENT WITHIN **1** BUSINESS DAY OF DETERMINING IT NECESSARY TO DECERTIFY A CERTIFIED FAMILY HOME DUE TO ANY OF THE FOLLOWING ACTIONS BY THE CERTIFIED FAMILY PARENT.

- (A) Violating licensing rules and regulations.
- (B) Aiding, abetting, or permitting the violation of licensing rules and regulations.
- (C) Conducting oneself in a way that is inimical to the health, morals, welfare, or safety of a child placed in that certified family home.
- (D) Being convicted of a crime while a certified family parent.
- (E) Knowingly allowing any child to have illegal drugs or alcohol.
- (F) Committing an act of child abuse or neglect or act of violence against another person.

THE FOSTER FAMILY AGENCY SHALL NOTIFY THE DEPARTMENT BEFORE ANY OF THE FOLLOWING OCCURS:

- (1) The establishment of a suboffice.
- (2) A change in location of the administrative office or any suboffice.
- (3) A change in the conditions or limits described on the license.
- (4) Any changes in the plan of operation that affect services to children.
- (5) A change of licensee, as required by Health and Safety Code Sections 1524 and 1524.1, including the following:
 - ▶ (A) Sale or transfer of the majority of stock.
 - ▶ (B) Separation from a parent company.
 - ▶ (C) Merger with another company.

REPORTS TO LOCAL HEALTH OFFICER

- ▶ The licensee shall report to the local health officer all outbreaks or suspected outbreaks involving two or more children of any communicable disease listed in Handbook Section 8806 I(j)(1)(A).

THE FOSTER FAMILY AGENCY SHALL REPORT IMMEDIATELY TO THE LOCAL FIRE AUTHORITY

- ▶ In areas not having organized fire services, the foster family agency shall report to the State Fire Marshal within 24 hours.
- ▶ Report any fires or explosions in or on the premises of a foster family agency, certified family home, or foster family home used by the foster family agency.



THE LICENSEE IS ACCOUNTABLE FOR THE GENERAL SUPERVISION OF THE LICENSED FACILITY AND THE CERTIFIED FAMILY HOMES, FOR THE ESTABLISHMENT OF POLICIES CONCERNING OPERATIONS, AND FOR ENSURING OPERATIONS COMPLY WITH APPLICABLE REGULATIONS AND STATUTES

(1) The licensee shall establish internal procedures to ensure that certified family homes report incidents, complaints, and alleged child abuse to the foster family agency.

(2) The licensee shall establish internal procedures to ensure that reports specified in Section 88063


- ▶ (a)(1) by certified family homes are reported to the Department.

- ▶ (b) Upon substantiation of a complaint against a certified family home, the licensee shall ensure that appropriate action is taken.


- ▶ (1) In the case of a substantiated child abuse complaint, the appropriate action may include removal of the child(ren), removal of a household member or decertification of the home, even though there were not sufficient grounds to warrant criminal prosecution.

- ▶ (2) In the case of some other type of substantiated complaint, the appropriate action must ensure that the certified family home complies with applicable statutes and regulations


THE BOARD OF DIRECTORS SHALL ACTIVELY ENSURE ACCOUNTABILITY AND PERFORM, AT A MINIMUM, THE FOLLOWING RESPONSIBILITIES

- (1) Establish and approve policies and procedures governing the operation of the foster family agency.
 - (2) Approve and monitor a budget for the foster family agency.
 - (3) Access and maintain the level of funds necessary to cover the costs of operating the foster family agency.
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FFA BOARD CONT.

- (4) **Adopt a plan of operation and program statement for the foster family agency that will ensure the services provided by the foster family agency correspond to the needs of the community.**
 - (5) Employ an administrator who meets the requirements of Section 88064 and Section 88065.
 - (6) Maintain in the foster family agency files a written statement describing the duties delegated to the administrator.
 - (7) Ensure that the administrator receives a copy of the statement describing the duties delegated to the administrator.
 - (8) Review all licensing and incident reports provided by the administrator, and based upon such review, ensure that the foster family agency and its certified family homes thereafter comply with all applicable regulations.
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FFA BOARD CONT.

- (9) Conduct board meetings on at least a quarterly basis to review and discuss the operation of the foster family agency.
 - (10) Require that the chief executive officer, administrator, or designee be present at all board of directors meetings during which the operation or the policies of the foster family agency are discussed.
 - (11) Ensure that minutes are recorded for all board of directors meetings and retained by the foster family agency as a permanent record of all board meetings.
 - (12) Ensure that all minutes for board of directors meetings are available for review by the licensing agency and include an acknowledgment by the board members that they have received, reviewed, and discussed the licensing and incident reports provided to the board of directors by the administrator.
 - (13) Submit copies of all corporate documents to the licensing agency at the time documents are submitted to the Secretary of State.
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Please use a real form at this time and follow the components.

We will be giving you some vignettes and you will fill out the form using the vignette information.

UNUSUAL INCIDENT/INJURY REPORT

INSTRUCTIONS : NOTIFY LICENSING AGENCY, PLACEMENT AGENCY AND RESPONSIBLE PERSONS, IF ANY, BY NEXT WORKING DAY.

SUBMIT WRITTEN REPORT WITHIN 7 DAYS OF OCCURRENCE.

RETAIN COPY OF REPORT IN CLIENT'S FILE.

NAME OF FACILITY	FACILITY FILE NUMBER	TELEPHONE NUMBER ()
ADDRESS	CITY, STATE, ZIP	

CLIENTS/RESIDENTS INVOLVED	DATE OCCURRED	AGE	SEX	DATE OF ADMISSION

TYPE OF INCIDENT

- | | | | | |
|--|---|--|---|--|
| <input type="checkbox"/> Unauthorized Absence | <input type="checkbox"/> Alleged Client Abuse | <input type="checkbox"/> Rape | <input type="checkbox"/> Injury-Accident | <input type="checkbox"/> Medical Emergency |
| <input type="checkbox"/> Aggressive Act/Self | <input type="checkbox"/> Sexual | <input type="checkbox"/> Pregnancy | <input type="checkbox"/> Injury-Unknown Origin | <input type="checkbox"/> Other Sexual Incident |
| <input type="checkbox"/> Aggressive Act/Another Client | <input type="checkbox"/> Physical | <input type="checkbox"/> Suicide Attempt | <input type="checkbox"/> Injury-From another Client | <input type="checkbox"/> Theft |
| <input type="checkbox"/> Aggressive Act/Staff | <input type="checkbox"/> Psychological | <input type="checkbox"/> Other | <input type="checkbox"/> Injury-From behavior episode | <input type="checkbox"/> Fire |
| <input type="checkbox"/> Aggressive Act/Family, Visitors | <input type="checkbox"/> Financial | | <input type="checkbox"/> Epidemic Outbreak | <input type="checkbox"/> Property Damage |
| <input type="checkbox"/> Alleged Violation of Rights | <input type="checkbox"/> Neglect | | <input type="checkbox"/> Hospitalization | <input type="checkbox"/> Other (explain) |

DESCRIBE EVENT OR INCIDENT (INCLUDE DATE, TIME, LOCATION, PERPETRATOR, NATURE OF INCIDENT, ANY ANTECEDENTS LEADING UP TO INCIDENT AND HOW CLIENTS WERE AFFECTED, INCLUDING ANY INJURIES:

PERSON(S) WHO OBSERVED THE INCIDENT/INJURY:

EXPLAIN WHAT IMMEDIATE ACTION WAS TAKEN (INCLUDE PERSONS CONTACTED):

UNUSUAL INCIDENT/INJURY REPORT LIC 624 (4/99)

<small>NAME OF FACILITY</small> The Northern California Family Center		<small>FACILITY FILE NUMBER</small> 		<small>TELEPHONE NUMBER</small> (925) 370-1990	
<small>ADDRESS</small> 2244 Pacheco Blvd		<small>CITY, STATE, ZIP</small> Martinez, CA 94553			
CLIENTS/RESIDENTS INVOLVED	DATE OCCURRED	AGE	SEX	DATE OF ADMISSION	

TYPE OF INCIDENT

TYPE OF INCIDENT				
■ Unauthorized Absence	Alleged Client Abuse	■ Rape	■ Injury-Accident	■ Medical Emergency
■ Aggressive Act/Self	■ Sexual	■ Pregnancy	■ Injury-Unknown Origin	■ Other Sexual Incident
■ Aggressive Act/Another Client	■ Physical	■ Suicide Attempt	■ Injury-From another Client	■ Theft
■ Aggressive Act/Staff	■ Psychological	■ Other	■ Injury-From behavior episod	■ Fire
■ Aggressive Act/Family, Visitors	■ Financial		■ Epidemic Outbreak	■ Property Damage
■ Alleged Violation of Rights	■ Neglect		■ Hospitalization	■ Other (explain)

LIC 624 (4/99) CONT.

- ▶ DESCRIBE EVENT OR INCIDENT (INCLUDE DATE, TIME, LOCATION, PERPETRATOR, NATURE OF INCIDENT, ANY ANTECEDENTS LEADING UP TO INCIDENT AND HOW CLIENTS WERE AFFECTED, INCLUDING
- ▶ ANY INJURIES:
- ▶ PERSON(S) WHO OBSERVED THE INCIDENT/INJURY:
- ▶ EXPLAIN WHAT IMMEDIATE ACTION WAS TAKEN (INCLUDE PERSONS CONTACTED):

▶ LIC 624 (4/99)

▶ OVER

LIC 624 (4/99) CONT.

- ▶ MEDICAL TREATMENT NECESSARY? ■ YES ■ NO
- ▶ IF YES, GIVE NATURE OF TREATMENT:
- ▶ WHERE ADMINISTERED: ADMINISTERED BY: FOLLOW-UP TREATMENT, IF ANY:
- ▶ ACTION TAKEN OR PLANNED (BY WHOM AND ANTICIPATED RESULTS:
- ▶ LICENSEE/SUPERVISOR COMMENTS:
- ▶ NAME OF ATTENDING PHYSICIAN

LIC 624 (4/99) CONT.

REPORT SUBMITTED BY:	NAME AND TITLE	DATE
REPORT REVIEWED/APPROVED BY:	NAME AND TITLE	DATE

AGENCIES/INDIVIDUALS NOTIFIED (SPECIFY NAME AND TELEPHONE NUMBER)

- LICENSING _____
- ADULT/CHILD PROTECTIVE SERVICES _____
- Placement Agency _____
- LAW ENFORCEMENT _____
- LONG TERM CARE OMBUDSMAN _____
- PARENT/GUARDIAN/CONSERVATOR _____

VIGNETTE I

- ▶ Foster child reports to you that the foster parent raised her hand to her, but did not hit her. She tells you she did not like it and it made her cry.
- ▶ Which of the following should you do and how soon? (you can pick more than one)
 1. Investigate and see if the child's allegation is true or not.
 2. Believe the foster parent who says she is lying because she took her phone away.
 3. Call her County Social Worker.
 4. Call Child Protective Service
 5. Call Community Care Licensing.
 6. Write a report for Child Protective Services
 7. Write a report for Community Care Licensing.
 8. Call the child's therapist.



VIGNETTE 2

You have placed a child in new foster home. The foster parent calls you and says that the school district wants all the records and immunization records before they will allow the child to attend school. It is now over a week and you are still waiting for the records to arrive. You are required to and how soon? (more than one may apply) :

- ▶ Call the school principle.
- ▶ Call the County Social Worker
- ▶ Call Community Care Licensing.
- ▶ Write a report for the County Social Worker.
- ▶ Write a report for Community Care Licensing.
- ▶ Home School the child until the child is placed in a classroom.



VIGNETTE 3

- ▶ A foster child sprains his wrist while chasing another child. The foster parent takes the child to emergency care. The doctor treats the sprain and sends the child home with the foster parent.

- ▶ You are required to and how soon (more than one may apply) ?
 1. Investigate and see if the child's story is true.
 2. Ask the foster parent if she injured the child.
 3. Call the foster child's County Social Worker.
 4. Call Child Protective Service
 5. Call Community Care Licensing.
 6. Write a report for Child Protective Services
 7. Write a report for Community Care Licensing.
 8. Call the child's therapist.



VIGNETTE 4



- ▶ You have to move a foster child to another home due to foster parent stating they can no longer handle the child's behaviors. You move the child to another certified foster home.

- ▶ You are required to and how soon (more than one may apply) ?
 1. Investigate and see if the child's behaviors are that bad.
 2. Ask the foster parent if she can keep the child longer.
 3. Call the foster child's County Social Worker.
 4. Call Child Protective Service
 5. Call Community Care Licensing.
 6. Write a report for Child Protective Services
 7. Write a report for Community Care Licensing.
 8. Call the child's therapist.

VIGNETTE 5

- ▶ The foster parent calls and says her foster child is talking about wanting to die.
- ▶ You are required to and how soon (more than one may apply) ?
 1. Investigate and see if the child's behaviors are that bad.
 2. Ask the foster parent if she can keep the child longer.
 3. Call the foster child's County Social Worker.
 4. Call Child Protective Service
 5. Call Community Care Licensing.
 6. Write a report for Child Protective Services
 7. Write a report for Community Care Licensing.
 8. Call the child's therapist.

