

## **7.711 RULES REGULATING CHILDREN'S CAMPS**

In addition to the General Rules for Child Care Facilities, children's camps shall follow the rules specified in this section.

### **7.711.1 DEFINITIONS**

- A. A residential camp is a facility operating for three or more consecutive 24-hour days during one or more seasons of the year for the care of five or more children. The program shall have as its purpose a group living experience offering education and recreational activities using an outdoor environment. The campers shall have completed kindergarten or be at least 6 years old to 16 years old. The recreational experiences may occur at the permanent camp premises or on trips away from the camp.
- B. A residential camp may have a primitive camp which is a portion of the permanent camp premises or another site at which the basic needs for camp operation, such as places of abode, water supply systems, and permanent toilet and/or cooking facilities, are not usually provided.
- C. A travel-trip camp shall be known as a camp in which there is no permanent camp site and children move from one site to another. The travel-trip camp either originates in Colorado or moves into and/or through Colorado from another state and operates for three or more consecutive 24-hour days during one or more seasons of the year for the care of five or more children who are at least 10 years old or have completed the fourth grade to 18 years old. The program shall have as its purpose a group learning experience offering educational and recreational activities utilizing an outdoor environment.
- D. A non-medical religious camp is a camp operated by a religious organization which does not believe in the use of medical practice in physical examination or treatment of illness or injury.

#### **7.711.11 Purpose and Goals**

Each camp shall submit to the department a statement of goals and objectives. This statement shall be kept on file, updated periodically, made known to staff, and available for licensing inspection.

#### **7.711.12 Governing Body**

The governing body shall be identified by its legal name. The names and addresses of individuals who hold primary financial control and officers of the governing body shall be disclosed fully to the Colorado Department of Human Services. When changes of governing body occur, the department shall be informed within 30 calendar days.

- A. If the governing body lets, leases, or rents the licensed facility to any group or organization whose program falls under the definition as found at Section 7.711.1 and verifies in writing to the Department that the lessee meets the licensing standards, an application is not required of the lessee. If the governing body does not verify that the lessee meets the licensing standards, an application is required of the lessee and the license must be issued to the lessee before the camp opens.
- B. When the facility is let, leased, or rented, the governing body shall report the following in writing at the request of the department: name of the group, number and ages of children, length of time for use of the facility, and the purpose of the camp.

#### **7.711.13 Financial Support**

The governing body shall satisfy the department upon request that there is sufficient financial support to operate and maintain a camp in accordance with these rules and camp goals and objectives.

#### **7.711.14 Insurances**

- A. Every facility shall carry public liability insurance. The applicant or licensee shall submit the amount of the insurance and the name and the address of the insurance agency providing the insurance to the camp. The camp shall maintain information about the insurance at the campsite. A camp need not carry public liability insurance if the camp's governing body determines that insurance is unnecessary due to its financial ability to meet all possible claims. The basis of such judgment must be revealed to the department.
- B. Camps operating their own transportation vehicles shall carry liability insurance in compliance with the minimum limits required by Article 10, Chapter 7, Colorado Revised Statutes.

#### **7.711.15 Written Agreements, Reports, and Logs**

- A. There shall be on file at the campsite and annually-dated a written agreement with a licensed physician or nearby health care facility stating that the physician or health care facility will furnish the necessary medical services for campers at the camp and medical help as a backup to the camp staff members responsible for health supervision.
- B. A travel-trip camp is not required to have a written agreement, but must have a list of all medical facilities in areas where the travel-trip camp will be traveling.
- C. The camp shall report to the state department in writing within 48 hours each injury or illness which required that the camper be sent home. The report shall include name, age and address of the camper name of camper's parent(s) or guardian(s) and their address if different; date of accident or illness; description of accident or diagnosis of illness; treatment given; name and address of physician prescribing treatment; and where treatment was given and disposition of the case.
- D. The camp shall maintain at the campsite a medical record keeping system, listing name of camper, ailment, treatment prescribed and administered date and name of person administering care. This record keeping system shall be available to licensing personnel.
- E. Within 24 hours of each incident, the camp shall submit to the state department a written report about any camper who has been lost from the campsite and for whom a report has been made to the local sheriffs department for search and rescue. Such report shall indicate the name, age and address of the camper; the name of parent(s) or guardian(s) and their address if different; the date when the child was lost; the location, time and circumstances when the camper was last seen, circumstances of locating the camper.
- F. Each camp shall have a plan for action in case of natural disasters lost campers/swimmers, injuries, and illnesses. These plans shall be in writing and shall be on file at the camp office. The staff shall receive training regarding the implementation of these plans, in the case of a travel-trip or primitive camp, these plans shall accompany the staff members and campers.

#### **7.711.2 PERSONNEL**

##### **7.711.21 General Requirements for All Personnel**

- A. All paid employees at the camp shall be sixteen (16) years of age or over. Employment of maintenance staff including kitchen service, grounds, and housekeeping employees under 16 years of age must be in compliance with Colorado labor laws.

- B. All counselors and staff members having a supervisory role with campers shall be at least eighteen (18) years of age and have interest in, respect for, and ability to work with children.
- C. There shall be a letter of agreement with each volunteer or employed staff member which includes listing of specific responsibilities/job description and referring to information contained in the hiring packet or staff manual. Days or hours of employment/time off, personal conduct, and necessary medical examinations must be provided in writing and may be provided in the hiring packet or the staff manual. The letter of agreement shall be signed by both the employer and the volunteer or staff member. In the case of staff members or volunteers who are younger than eighteen (18) years old, the letter of agreement shall also be signed by the parent or guardian.
- D. There shall be at least three references about each staff member of the camp attesting to the individual's character and suitability to work with children. The written references shall be in the personnel file or there shall be an indication in the personnel file that a reference has been obtained by telephone.
- E. Each staff member must complete a current health history and must have been examined within the last 24 months by a licensed medical health care professional approved to perform physical examinations. A statement signed by the health care professional completed within 90 calendar days of the beginning of working at the camp and the health history completed by the employee shall be maintained in the personnel file at the camp. The staff members of a non- medical religious camp are exempt from this regulation.
- F. If a staff member wishes an exemption from an examination performed by a licensed medical health care professional due to religious beliefs, the staff member shall submit a signed, written statement, which states the reason for the religious exemption and that the individual is in good health. A camp retains the right to ask a staff member for a written statement prior to employment at the camp.
- G. Each staff member shall be trained and given written instructions as to camp policy when emergencies occur, such as fires, lost campers, and injuries.

#### **7.711.22 Necessary Camp Personnel**

- A. Each camp shall have an onsite director who shall be at least twenty-one (21) years of age. The director shall have a maturity of judgment and prior verified adult leadership experience in an administrative or supervisory position at an organized camp and twelve months employed adult leadership with groups of children since he/she attained the age of 18 years.
- B. At each permanent camp there shall be a health care provider who shall be responsible for monitoring the overall health of the camp and creating a healthy camp community. The health care provider may be qualified by one of the following: a licensed physician, a registered nurse, a licensed practical nurse, a licensed physician's assistant, a staff member who holds a current American Red Cross Emergency Response Certificate or a current certificate as an Emergency Medical Technician or equivalent. Such an individual shall be at the camp 24 hours per day that the camp is in session. Any health care provider other than a licensed physician, registered nurse, or licensed practical nurse must also hold a current certificate indicating completion of the Department approved and required medication administration course.
- C. At any primitive camp within 60 hiking minutes of the base camp, where children may be away from the base camp for up to six nights, there must be at least one staff member qualified with community first aid training, C.P.R., and medication administration training if children taking medicine accompany the trip.
- D. At any primitive camp where children are either more than 60 hiking minutes away from the camp

and/or are away from the base camp for seven or more nights, there must be at least one staff member with each group of children with wilderness first aid training, C.P.R., and medication administration training.

- E. At any primitive camp where children are away from camp for seven or more nights and are more than one hour away from emergency medical services, there must be at least one staff member with each group of children with wilderness first responder training, C.P.R., and medication administration training if children taking medicine accompany the trip.
- F. There shall be sufficient camp counselors or staff members who have a supervisory role with children at the camp to meet the staff ratio as indicated in Section 7.711.23.
- G. If the camp has counselors-in-training, they must be directly accountable to a qualified counselor or specialized staff member and must be directly supervised by those individuals in their role when caring for children. The counselors-in-training who are less than eighteen years old shall not be counted as staff members in the maintenance of the staff ratio for supervision of children as found at Section 7.711.23.
- H. There shall be specialized staff members who are responsible for specific portions of the camp program. Requirements for those specialized staff members are found among the requirements for the specialized activity areas at Section 7.711.3.

#### **7.711.23 Necessary Staff Supervision**

- A. The camp shall have an accurate system whereby staff members who are responsible for the supervision of children shall know where each child is at all times.
- B. At no time shall a camper be left without qualified supervision. Sleeping quarters of the counselors shall be in close proximity to sleeping Quarters of the children whom they supervise. Children may sleep alone for specific program functions such as solos or survival experiences and then only when regularly monitored pursuant to the camp's written program.
- C. Each special activity shall be supervised by a staff member currently qualified in first aid and C.P.R. training, and by the experience and training in that special activity as specified in Section 7.711.3.
- D. In a residential camp, ratio of one staff member having a supervisory role with children per number of campers or fraction thereof shall be maintained at all times as follows:  
[Ratio of Children to a Supervisory Staff Member in a Residential Camp](#)  
[12CCR2509\\_8\\_08302006\\_table20.jpg](#)
- E. In a trip away from the residential camp premises or at the primitive camp, the staff ratio given at Section 7.711.23, 0, shall be maintained, but there shall be at least two staff members accompanying each trip, and one staff member shall hold at least a current Red Cross community first aid and safety certificate or equivalent. If the trip exceeds two nights, there shall be with the group a staff member who has maturity of judgment and has been trained in trip leading procedures.
- F. In a travel-trip camp, the staff ratio given at Section 7.711.23, D, shall be maintained, but there shall be at least two staff members at all times with the campers. One of those staff members must be at least twenty-one (21) years old and one staff member shall meet qualifications of the health care provider (see Section 7.711.22. B).
- G. In the case of trips away from the permanent residential camp, including overnights, there shall be a day-to-day itinerary prepared prior to departure. The resident camp headquarters shall keep a copy of the itinerary. The itinerary shall be followed as closely as possible. Resident camp

headquarters shall be notified of an itinerary change as soon as possible.

- H. A travel-trip camp shall establish a day-to-day itinerary. A copy shall be on file at the camp headquarters. The itinerary shall be followed as closely as possible. In case of emergency, if a change in the itinerary is necessary, the camp headquarters shall be notified as soon as possible.

### **7.711.3 SPECIAL ACTIVITIES**

#### **7.711.31 General Provisions**

- A. There shall be a written program that reflects the purpose of the camp, including a list of activities at the camp. The written program must be provided to parents.
- B. Parents shall be given the opportunity to indicate to camp staff if they do not wish their child to participate in an activity (see Section 7.711.61, A. 10).
- C. Each phase of the camp program shall be under the supervision of a resident qualified staff member who shall be responsible for health and safety precautions. Verification of experience and/or certification shall be in the staff members personnel files at the camp office.
- D. If the camp participates in special activities other than those for which regulations are found in this section (for example, ballooning or winter camping), the camp shall develop and follow a written plan which includes at least the following:
  - 1. The qualifications of the supervisor of the activity.
  - 2. The qualifications of any other staff members necessary for proper supervision of the activity.
  - 3. The number of necessary staff members needed to supervise the activity.
  - 4. Conditions under which a child may participate in the activity, such as age of or skill of the child.
  - 5. Any special equipment necessary, its supply and condition.
  - 6. Access to medical treatment.
  - 7. Development of an emergency plan.
- E. The staff member supervising special activities, such as, but not limited to, horseback riding, hiking, rock climbing, riflery, canoeing, or aquatic events, shall possess evidence of appropriate experience, training, and/or certification in the program specialty. Said staff member shall be present at the site of the activity whenever the activity is being carried out unless otherwise indicated in these regulations.
- F. The qualified supervising staff member of special activities shall have the following duties:
  - 1. Direct training of other staff members working in the activity.
  - 2. Assign duties to staff members.
  - 3. Assure that all necessary equipment is complete, in good repair, and safe to use.
  - 4. Assure that environmental hazards are not severe enough to cause danger to campers.

- G. Rules shall be reviewed with campers at the beginning of each activity.
- H. First aid supplies shall be available at each special activity site.

### **7.711.32 Swimming**

- A. There shall be a swimming supervisor who, as a minimum, holds a current Red Cross life guard training certificate or equivalent, such as a YMCA or Boy Scout aquatics instructor's certificate. If the camp is offering swimming instruction, the swimming supervisor must also hold a Red Cross water safety instructor certificate or equivalent.
- B. At any time the swimming area is open, there shall be at the swimming area a staff member who holds at least a current life guard training certificate or equivalent for each thirty campers in the water. There shall be present as least one staff member for each ten campers in the water.
- C. The swimming area shall be off limits when appropriate numbers of qualified staff members are not present.
- D. If the camp uses a pool for which the camp is not responsible, the camp need not provide a lifeguard if there is a qualified lifeguard provided by the pool, if the pool does not provide a qualified lifeguard, staff members meeting qualifications stated at Section 7.711.32, B. must be provided by the camp. There shall be at least one staff lookout counselor at the pool for each ten campers in the water.
- E. Swimming area rules and emergency procedures shall be posted in a visible location at the swimming area.
- F. The swimming pool or swimming area shall meet the standards of the Colorado Department of Public Health and Environment.
- G. If campers are permitted to swim in a lake or pond, swimming areas shall be clearly designated
- H. Before campers are permitted to swim in deep water, swimming skills must be tested by properly trained staff members.
- I. There shall be a system known to child and lookout staff for checking the children when campers are in the water.
- J. The following equipment must be available for use at the pool side or the take shore in which swimming is permitted:
  - 1. A rescue tube.
  - 2. Reach pole.
  - 3. Backboard.
- K. Where the size of the body of water makes it impossible to reach victims by reach pole, rescue tube or other rescue device, a rescue boat must be available at all times.
- L. If a camp has shoreline activities such as wading, fishing, ecology or nature studies, the camp shall have a written policy which defines qualifications of persons accompanying the group and safety, factors to be followed. Staff members shall be acquainted with the policy.
- M. In the case of a travel-trip camp, there shall be a minimum of one staff member who holds at least

current Red Cross life guard training certificate who is responsible for all swimming activities.

### **7.711.33 Boating/Canoeing/Sailing**

- A. The boating supervisor shall hold, as a minimum, a current Red Cross life guard training certificate or equivalent Boy Scout certificate and a basic small craft certificate for the type of craft which is to be supervised, or the boating supervisor shall have appropriate experience in the type of craft to be supervised, on the body of water in which the boating activity will take place, and in the intended use of the craft.
- B. Other staff members shall have appropriate experience and training for the type of craft to be utilized.
- C. Whenever campers are on the water they shall be wearing a United States Coast Guard approved personal flotation device appropriate to the weight of the child.
- D. There shall be a minimum of two lookout staff members at the shoreline and/or on the water at any time when campers are on the water in boating, canoeing or sailing activities. Hazards such as the size of the lake, the skill of the campers, the conditions of the water, the temperature of the water, shall be taken into account by the supervisor of the activity when determining the number and location of lookout staff necessary with the campers, but there shall never be fewer staff with the campers than those required at Section 7.711.23, D.
- E. There shall be a staff member in any boat which holds one or more six- or seven-year-old campers.
- F. At no time shall the occupancy of the craft exceed the capacity established for the craft by the United States Coast Guard standards.
- G. There shall be a warning device, such as a loud whistle, air horn, or other audible signal device, which can readily be heard or seen by persons on the water that indicates the need for campers and staff to return to the campsite.
- H. Where the size and depth of the Body of water indicates, there shall be a rescue boat in close proximity to where the activity takes place. This rescue boat shall be in good repair and shall contain a rescue tube and reach pole, extra oar, or paddle.
- I. Water craft shall not enter a swimming area when swimmers are in the water.

### **7.711.34 Archery**

- A. The archery supervisor shall be an experienced archer.
- B. The archery range shall be free from hazards and well-marked. There shall be a clear path to the target which is not obstructed by such things as rocks, trees or branches. Traffic, trail, or other camp activities shall not be placed in the direction of the flight of the arrows.
- C. Equipment shall be maintained in safe condition. Bows and arrows shall be inspected for fractures, splinters or cracks before each use. Damaged bows and arrows shall not be utilized.
- D. Equipment shall be stored under lock and key when not in use. Bows and arrows shall be used only in the specified archery area.
- E. All archers shall use the same firing line. Arrows shall be issued only at the firing line.
- F. Arrows shall be nocked to bow string after shooters are on the firing line and after the signal to shoot has been given.

- G. Before arrows are released, shooters shall have a definite target.
- H. Movement must be controlled by a supervising staff member. All persons must stay behind the firing line until the signal to retrieve arrows is given. All arrows shall be retrieved at the same time.
- I. If the camp has field archery, a procedure shall be established and posted to provide for the safety of the archers, including issuance of arrows at check-in point of the archery trail, check in of archer at the beginning of the archer trail, and check out when archer has completed the trail.

#### **7.711.35 Riflery**

- A. The riflery supervisor shall hold a National Rifle Association instructor's or assistance instructor's certification in rifle shooting or equivalent certification from a national organization or shall have verified experience equivalent to that necessary to obtain the National Rifle Association Fire Arm certification.
- B. If the riflery supervisor is not present at the rifle range whenever children are firing guns, the staff person(s) trained by the riflery supervisor must be present at all times when campers are present.
- C. The rifle range shall be free from all hazards, away from other activities and traffic of any type; shall be well marked with danger signs or flags; all blind approaches shall be fenced or blocked off.
- D. The range shall be constructed with an appropriately designed bullet-stop so that all bullets will be stopped behind the targets. The bullet-stop shall be free of trees, rocks, boulders, or other objects which may cause a bullet to ricochet away from the bullet-stop.
- E. There shall be a well-defined firing line which shall be level with the targets and elevated off the ground. A minimum space of five feet between firing points shall be established or firing points separated by a permanent divider. Targets must be designed to minimize potential for ricochet. Targets cannot depict human form
- F. Only the following types of guns shall be permitted:
  - 1. .22 caliber rimfire, single-shot, bolt-action rifles having no trigger modification other than the factory setting.
  - 2. Pneumatic spring-type and CO<sub>2</sub>; air guns may be either .22 caliber or .177(BB size).
- G. Proper condition of the firearms shall be maintained by inspection before and after usage, cleaning as necessary. Firearms that do not function properly shall be repaired and tested before usage.
- H. Instruction on the use of firearms shall be presented to the campers prior to the use of the rifle range.
- I. No more than five cartridges at a time shall be distributed to a camper by the responsible supervising staff member and issued only at the firing line.
- J. Firing shall be permitted at the firing line only. Observers shall remain behind firing line.
- K. Actions of uncased firearms shall be kept open except when on firing line ready to fire.
- L. All firearms shall be unloaded immediately upon the command "cease firing" regardless of when this command is given. Actions shall remain open until further commands are given
- M. On ranges where shooters must go down range to change targets and score: movement must be controlled by the supervising staff member.



N. All spent or unspent cartridges must be returned to the supervising staff member.

### **7.711.36 Horseback Riding**

A. The horseback riding supervisor shall have completed at least one of the following:

1. Certificate from nationally recognized organization or riding school.
2. Written verification of successful experience in formal horseback riding instruction.

B. The horseback riding supervisor shall train a sufficient number of camp riding staff members in the supervision of children in the horseback riding program for the anticipated size of the riding program.

C. Camp riding staff shall be trained by the horseback riding supervisor in emergency procedures appropriate to the horseback riding activity.

D. At least two trained riding camp staff members, one of whom holds a current American Red Cross community first aid and safety certificate or equivalent, shall accompany each trail excursion. If the horseback ride is more than one hour from emergency medical services, at least one staff member shall be trained in wilderness first aid training. If the horseback ride is for seven or more nights and is more than one hour away from emergency medical services, there must be at least one staff member with each group of children with wilderness first responder training, C.P.R., and medication administration training. If more than twenty campers participate in the trail excursion, there shall be a trained riding camp staff member assigned for each additional ten or fewer riders.

E. First aid supplies shall be carried on each trail excursion and available at each horseback riding ring/arena.

F. No person is allowed in the riding area unless the horseback riding supervisor or a trained riding camp staff member is present.

G. The riding supervisor shall determine the camper's riding experience and level of skill and must take these into account in assigning which horse each camper should ride and determining the type of riding activity in which each camper should engage. Campers shall be given instruction in basic safety, which shall include at least the following: riding rules in the ring and on the trail, how to approach, mount and dismount.

H. Campers shall be appropriately dressed for riding, which shall include shoes or boots and long pants. The riding supervisor must evaluate the footgear of each camper and make the stirrups safe for each camper's shoe or boot.

I. Protective head gear/helmets are mandatory for campers ring riding and trail rides, except protective head gear/helmets are optional for walking trail rides where the owners of the camp have raised their own horses. Know the history and temperament of the horses, and are directly involved in the horseback riding program.

J. Parents must be notified in advance of what type of protective gear is used by the camp. If campers bring helmets from home, they must be worn correctly.

K. The horseback riding equipment shall be in good condition, properly sized and adjusted for each rider.

L. The horse barn or stable, ring, and commonly used trail(s) shall be in good repair and free of dangerous obstructions.

- M. Horses shall be cared for with evidence of an adequate feeding schedule and a means to care for sick horses.
- N. Horses shall not be permitted in the other designated activity areas.

#### **7.711.37 Trampoline**

- A. The trampoline supervisor shall have documented formal training and experience in use of trampoline and knowledge of safety and spotting techniques.
- B. Trampolines shall be equipped with pads along the sides and shall be kept in good repair.
- C. No person shall be on the trampoline unless a trampoline supervisor is present and spotters are present on all four sides of the trampoline.
- D. Trampolines shall be secured from unauthorized use by any person.
- E. The camper shall dismount the trampoline by sitting on the edge and sliding off. No camper shall jump off the trampoline.
- F. Spotters shall be posted on four sides of each trampoline at all times. Spotters shall not stand, sit, or be on trampoline, but shall stand in a position of readiness, watching the jumper at all times.

#### **7.711.38 Boating, Canoeing, Tubing, and Kayaking on Moving Water**

- A. Campers shall only canoe, tube, or kayak on Class II or less water.
- B. Supervising staff must be experienced and knowledgeable about the river being used, including the height and speed of the river.
- C. The camp must have a written policy on evaluating the safety of the river. Supervising staff must be trained on the policy.
- D. Each camper shall wear a United States Coast Guard approved personal flotation device whenever they are on the moving water.
- E. The supervisor of this activity shall be trained in Red Cross community first aid and safety, and have appropriate experience in the type of craft to be supervised, on the body of water in which the boating activity will take place, and in the intended use of the craft.
- F. The supervisor shall be familiar with rescue techniques with canoes, kayaks, and tubes on moving water and shall train campers in these techniques.
- G. Rescue equipment appropriate to the activity shall be available, such as a rope throw bag and rescue tubes.

#### **7.711.39 White Water Rafting on Class III and IV Rivers**

- A. If the camp operates white water rafting, the camp must be licensed by the Division of Parks and Outdoor Recreation as a river outfitter.
- B. If a camp provides a white water rafting experience by purchase from a river outfitter, the license of the outfitter must be valid.
- C. There shall be sufficient food storage, adequate to keep food dry and large- enough to store food for

the size of the raft and the length of the trip.

- D. Waterproof dunnage bags shall be provided for passengers and shall be secured to the raft.
- E. Anytime a camper is to be near the water, the camper shall wear a United States Coast Guard approved personal flotation device.
- F. A camper shall be at least 12 years old and 50 pounds to ride a paddle raft in a Class III river. A camper shall be at least 14 years old to ride a paddle raft in a Class IV river.
- G. A camper shall be at least 10 years old and 50 pounds to ride an oar raft in a Class III river. A camper shall be at least 14 years old to ride an oar raft in a Class IV river.

Classes of rivers are those as defined by the International Scale of River Difficulty

#### **7.711.40 Rock Climbing and Ropes Courses**

- A. When a camp offers basic/single-pitch rock climbing or advanced/multi-pitched climbing, which includes such topics as the care and use of basic equipment, knots, anchors and belays, verbal signals, safety measures, basic climbing holds and moves, and techniques of rappelling, the following regulations must be complied with:
  - 1. The climbing supervisor shall be at least 20 years old.
  - 2. A climbing instructor shall be at least 18 years old.
  - 3. At least two climbing instructors must be present at the climbing site at all times.
  - 4. There shall be a climbing instructor for each five climbers.
  - 5. There shall be a staff member who holds at least a current Red Cross community first aid and safety certificate or equivalent at the rock climbing site.
  - 6. First Aid supplies, put together by a person knowledgeable in First Aid supplies needed for climbing activities and possible injuries, shall be present at the climbing site.
  - 7. No child shall be forced to participate in this activity.
  - 8. The climbing supervisor shall be responsible for the proper maintenance of all equipment used. Equipment shall be checked by the supervisor immediately prior to use.
  - 9. All rock climbing equipment shall meet industry standards and shall be maintained, visually and physically inspected, and replaced on a timely basis.
  - 10. Climbers must wear helmets at all times.
  - 11. The camp will not permit an unsupervised climb.
- B. If the camp offers basic/single pitch rock climbing and rappelling, the following regulations shall also be complied with:
  - 1. The climbing supervisor and the climbing instructor shall have verified knowledge of technical climbing by completion of a course, climbing school, or a minimum of ten hours of instruction.

2. A climbing instructor or climbing supervisor must be present when campers are participating in basic rock climbing.
  3. The climbing supervisor must have knowledge of where the climb is to occur and must give approval on the day of the climb for the climb to occur.
  4. Each rock climber must be visually supervised.
  5. Campers waiting to climb may be supervised by a counselor.
  6. All climbers shall be belayed in a top rope manner by a climbing supervisor, climbing instructor or a trained staff Delayer. During rappelling a belay must be used.
- C. If the camp offers advanced/multi-pitched climbing, the following regulation is shall also be complied with:
1. The climbing supervisor shall hold a current Red Cross community First Aid and safety certificate or equivalent, and a current certificate for cardiopulmonary resuscitation; shall have been an instructor, under supervision, for two seasons with verifiable experience and a review of any serious accidents; shall have completed a technical climbing school or training in technical climbing with evidence by letter of such completion; shall have led ten additional multi-pitched Class V climbs (the classification of the climbs as defined by the American Alpine Club) within the last two years; and, shall have knowledge of mountain rescue techniques. If the climb is more than 60 minutes from emergency medical services, the climbing supervisor must hold a current wilderness First Aid training certificate or equivalent.
  2. The climbing instructor or the rope leader shall have the same training as the climbing supervisor shall have been an instructor, under supervision, for one season with verifiable experience and a review of any serious accidents: shall have completed a technical climbing school or training in technical climbing; shall have led five additional multi-pitched climbs; and, shall have knowledge of mountain rescue techniques. No instructor shall take campers on a climb he/she has not completed previously.
  3. No camper will be the rope leader.
  4. A camper who is permitted to participate in the climb must be at least 13 years old. The climbing supervisor shall assess the ability of the camper as to the difficulty of the climb.
  5. The climbing instructor and climbing site must be approved by the climbing supervisor for each climb.
  6. The climbing supervisor or an equally qualified person shall be present at the climb site
  7. There shall be one rope leader that is at least 18 years of age 10 each three climbers in an extended climb.
  8. First aid equipment must be carried with the staff on each climb.
- D. If the camp offers high and/or low ropes courses, the following regulations must be complied with at all times;
1. The rope supervisor must have training and experience on the type of rope course being used and must hold a current community first and safety certificate.

2. The rope instructor must have training and experience on the type of rope course being used and must be supervised by the rope supervisor and must have a current community first aid and safety certificate.
3. Ropes courses must be inspected annually by knowledgeable personnel.
4. Bolts must be tight and cables must be in good condition at all times.
5. Ropes courses must be inspected regularly before use by the rope supervisor or the rope instructor.
6. The integrity of all the trees in the ropes course must be inspected regularly.
7. Ropes, cables, and bolts shall be maintained, visually and physically inspected, and replaced on a timely basis.
8. Campers must wear helmets when using the high ropes course.
9. At all times, there must be a rope supervisor or rope instructor on the ropes course with campers.
10. Ropes courses must be off limits to campers when a rope supervisor or rope instructor is not present.
11. Access to ropes courses must be controlled by education, signs, and whatever other means are necessary to control unsupervised access.
12. The camp must have written safety procedures for use of the ropes course(s). Staff must be trained on the safety procedures.

#### **7.711.41 Hiking or Backpacking**

If the camp offers hiking or backpacking activities, the following regulations shall be complied with:

- A. The hiking or backpacking supervisor must hold a current Red Cross Community First Aid and safety certificate or equivalent; shall have knowledge of outdoor experience and the symptoms and correct treatment procedures for hypothermia and dehydration; and, shall have verifiable experience in hiking and backpacking at the elevation where the hike is to take place.
- B. The counselors involved in hiking or backpacking shall be trained by the supervisor shall have knowledge of the symptoms of hypothermia and dehydration and correct treatment procedures; and shall continually observe and monitor campers on the trail for early diagnosis and treatment.
- C. When a group takes a hiking or backpacking trip within 60 hiking minutes of the permanent resident camp, where children may be away from the camp for up to six nights, there must be at least one staff member currently qualified with Red Cross Community First Aid and safety training certificate or equivalent and current training in the department required and approved medication administration training.
- D. When a group takes a hiking or backpacking trip where children are either more than 60 hiking minutes away from the permanent resident camp and/or are away from the camp for seven or more nights, there must be at least one staff member with each group of children with current wilderness first aid training, or equivalent, current C.P.R. training, and current medication administration training.

- E. When a group takes a hiking or backpacking trip where children are away from camp for seven or more nights and are more than one hour away from emergency medical services, there must be at least one staff member with each group of children with wilderness first responder training, C.P.R., and medication administration training.
- F. The hiking or backpacking supervisor shall consider the hiker's age, physical condition and experience, as well as the season, weather trends, evacuation and communication, water quality and quantity in selecting the area for hiking or backpacking.
- G. Before participation in a hiking or backpacking activity, the campers shall have a safety orientation and be instructed at least on:
  - 1. The fundamental safety procedures on the trail;
  - 2. Procedures for a hiker if he/she becomes lost;
  - 3. Proper health procedures, including the need for drinking fluids and eating appropriate foods while on the trail;
  - 4. Sanitation procedures on the trail;
  - 5. Rules governing land to be hiked over
  - 6. Potential high-risk areas which may be found on the trail;
  - 7. Fire danger precautions: flash floods; lightening dangers; and,
  - 8. Procedures when encountering wild animals.
- H. Each hiker/backpacker shall be equipped with protective clothing against natural elements such as rain, snow, wind, cold, sun, and insects.
- I. First Aid supplies, put together by a person knowledgeable in First Aid supplies needed for hiking and backpacking activities and possible accidents and/or injuries, shall be present on each hike or backpacking trip. The contents of each kit shall be adequate for the number of campers, the terrain, and the length of the hike or backpacking trip.
- J. An itinerary of the hiking or backpacking trip and a list of all people on the hike or backpacking trip must be kept at the resident camp.
- K. The camp must have written safety procedures for hiking and backpacking, including the written protocol for evacuating a camper that becomes sick or injured on a hike or backpacking trip. Staff and campers must be trained on the safety procedures and protocol.

#### **7.711.42 Biking**

If a camp has bicycling trips either on a public road or on mountain trails, the following regulations shall be complied with:

- A. The bicycling supervisor must be familiar with state laws about bicycling; be knowledgeable about the type of bicycling terrain where the bicycle trips will occur be knowledgeable about bicycling in the mountains, if applicable: shall know how to make simple bicycle repairs; and, shall hold at least a current Red Cross Community First Aid and safety certificate or equivalent.
- B. A bicycling supervisor and counselor must accompany each bicycle trip Ratios as found at Section

7.711.23 must be complied with at all times. There must be one staff member at the beginning and end of each bicycle group.

- C. Each bicyclist shall wear head protection and the bicycle shall be equipped with brakes in good condition. Bicycles shall be in good condition, properly maintained, inspected prior to each bicycling trip, and adjusted to the size of the camper riding the bicycle.
- D. A bicycle repair kit and first aid equipment must be taken on each trip. The First Aid supplies must be put together by a person knowledgeable in First Aid supplies needed for bike trips and possible accidents and/or injuries.
- E. The bicycling supervisor must instruct campers as to emergency procedures, safe riding process and road and trail etiquette.
- F. The bicycling supervisor shall evaluate each camper as to his/her physical capability to participate in the planned bicycling trip, keeping in mind the trip length, terrain, attitude of the trip, and weather conditions.
- G. Water/fluids must be taken on each bicycle trip.
- H. An itinerary of the biking trip and a list of all people on the biking trip must be kept at the permanent resident camp.
- I. The camp must have written safety procedures of bike trips, including the written protocol for evacuating a camper that becomes sick or injured on a bike trip. Staff and campers must be trained on the safety procedures and protocol.

## **7.711.5 CHILD CARE**

### **7.711.51 Health Care**

- A. The camp health program shall be under the supervision of an individual qualified as stated at Section 7.711.22, B.
- B. At the time of admission, each camper shall furnish a health history which indicates communicable diseases and serious illnesses or operations the individual has had, any known drug reactions and allergies, medications being taken, and any necessary special diets at the time of camp admission.
- C. The camper shall present a statement confirming a physical examination which has been performed within the preceding twenty- four months by a licensed physician or qualified, licensed nurse practitioner. The physician or nurse practitioner shall be asked to inform the camp as to any physical problems which would limit the camper's activity, any special care which the child will need, and include a record of up-to-date immunizations which the child has had, including the date of the last tetanus shot.
- D. If the camper wishes an exemption from a statement confirming a physical examination and immunizations due to religious beliefs, the camper shall submit a written statement, signed by the camper's parents or legal guardian, which states the reason for such an exemption and that the individual is in good health. The camp has the right to refuse the admission of a child who has no statement from a physician or nurse practitioner.
- E. Within 24 hours after arrival at camp, each camper shall be observed by camp staff trained to do so to identify noticeable evidence of any illness, communicable disease, or signs of abuse. The camp health care provider shall meet with campers upon arrival at camp that have special medications

or treatment procedures or dietetic restrictions or known allergic reactions or any known physical limitations.

- F. If a child shows signs of severe illness or communicable disease, the camper shall be separated from other campers, parents shall be notified, and a doctor or medical facility shall be consulted, if appropriate and as required, as to the child's treatment. All items used by the sick child shall be properly disinfected before use by any other person.
- G. The non-medical religious camp shall notify parents immediately when a camper becomes ill, but is exempt from the requirement of consultation with the doctor or medical facility.
- H. When communicable diseases occur, parents and staff members shall be advised what protective measures are available and indicated for the particular disease, and the county or state health officer notified.
- I. If a camper requires medical attention away from the camp site, the camper's parents or guardian shall be notified and necessary medical care shall be sought from a licensed physician or medical facility. Written authorization for medical care shall be in the child's file pursuant to Section 7.711.61, A, 9.
- J. If a camper requires medical attention away from the campsite of a non-medical religious camp, the parents shall be notified and their instructions followed.
- K. In the case of travel-trip camps, primitive camps, or trips away from the camp, a copy of the statement which has been signed by the parent or guardian indicating that the camp staff may obtain emergency medical care shall be in the possession of staff members accompanying the campers. The original signed statement shall be readily accessible.
- L. The camp health care provider shall be responsible for administering medication to campers. The health care provider shall administer only medicines prescribed for an individual camper or medicines listed in written standing treatment procedures from a licensed physician who has agreed to furnish medical services for the camp, pursuant to Section 7.711.61, A. Such medicines shall only be administered by authority of written authorization given to the camp or to the health care provider by the child's physician or camp physician.
  - 1. Medication prescribed for campers shall be from a licensed pharmacy; labeled with the name, address, and phone number of the pharmacy; name of the camper; name and strength of the medicine; directions for use; date filled; prescription number, and, the name of practitioner prescribing the medicine. When no longer needed, the medication shall be returned to the parent or destroyed.
  - 2. A record of any medications administered shall be maintained in a medication administration record pursuant to Section 7.711.15, D.
  - 3. All medication at the permanent camp site shall be kept in a clean, locked container. On excursions away from the camp, medication shall be under the control of an adult and shall be stored inaccessible to children.
- M. First aid supplies shall be located near food service operations, program areas, maintenance areas, the headquarters of the medical supervisor, and in motor vehicles which are used to transport campers.
- N. There shall be an identified headquarters of the health care provider at the campsite.
- O. There shall be a location at the campsite furnished with necessary equipment to care for an individual



who needs to be separated from other campers due to a communicable disease or illness. The isolation quarter shall be located within close proximity of rest room facilities.

- P. A responsible adult shall be present or within hearing distance of any ill child.
- Q. Transportation shall be available at all times in cases of medical emergency according to the written emergency medical evacuation plan of the camp.

#### **7.711.52 Discipline**

- A. The camp shall have a written policy regarding the discipline of children, which shall be explained to staff members before the camp session begins.
- B. Discipline shall be constructive or educational in nature and may include such measures as diversion, separation from problem situations, talking with the child about the situation, or praise for appropriate behavior.
  - 1. Children shall not be subjected to physical harm, fear, or humiliation.
  - 2. Children shall not be punched, shaken, bitten, roughly handled, pinched, or subjected to any physical punishment.
  - 3. Separation, when used as discipline, shall be brief and appropriate to the child's age and circumstances, and the child shall be within hearing of an adult in a safe, lighted, well-ventilated place. No child shall be isolated in a locked room or closet.
  - 4. No child shall be punished for toileting accidents.
  - 5. Verbal abuse or derogatory remarks about the child, his family, his race, religion, or cultural background shall not be used or permitted.
  - 6. Meals may not be denied the camper as a disciplinary measure.
  - 7. Authority to punish shall not be delegated to other children nor shall the camp sanction one camper punishing another camper.

#### **7.711.53 Security Practices**

- A. The camp shall establish a written security procedure and shall train staff members and campers regarding this procedure. Such procedures may include, but are not limited to, the following:
  - 1. The campers and staff organized into a buddy system and trained to report immediately to camp authorities when they believe their buddy is missing.
  - 2. Whistles issued to campers and/or staff who are instructed as to their usage if a camper or staff member is attacked.
  - 3. Campers and staff trained to report to the camp administration any strangers or unidentified person who may be at the campsite.
  - 4. Bumper stickers for each authorized car at camp.
  - 5. Limited advertisement of camp location.
  - 6. Use of intra-camp emergency communication.

- B. The camp shall report to the local law enforcement office or department the dates of the camp sessions and the location of the camp.
- C. When a camper is discharged from camp or when the camp session is over, the child shall be returned to the parent or guardian or to a properly identified adult approved by the child's parent or guardian.

#### **7.711.54 Food and Nutrition**

- A. Each camp shall establish a written policy for its nutrition and food service program. This policy shall include meal hours, type of food service, staff responsibilities during the time food is served, authorization of special diets, and the administration of the food service program. This policy shall be available to all staff members.
- B. All foods shall be stored and prepared in accordance with the rules and regulations governing the sanitation of food service establishments in the State of Colorado.
- C. Foods provided by the camp shall be of sufficient quantity and nutritional quality to provide for the dietary needs of each child. Menus shall meet the most recently revised recommended daily allowances of the Food and Nutrition Board, National Academy of Sciences, National Research Council, adjusted for age, sex, religion, and activity. The only exception shall be by written parental or medical direction.
- D. Menus shall be planned at least a week in advance and shall be dated as to the week in use. The current week's menu shall be posted in the food preparation area. Food substitutions shall be noted on the menus in writing. After use, the menus shall be kept on file for the period of the camping season.
- E. In travel-trip camps, all menus shall be planned prior to leaving and changes noted in writing. Menus shall be maintained in file of camp.
- F. Drinking water shall be readily accessible to campers at all times.

#### **7.711.55 Transportation**

- A. If the camp transports children from their home to camp, the camp shall assume responsibility for the child between the place where he/she is called for and the camp, and from the time he/she leaves the camp until delivered to his/her parents or to a responsible person designated by the parents or guardians.
- B. Any transportation of the camper during the camp session is the responsibility of the camp.
- C. There shall be at least one adult supervisor in addition to the driver when nine or more children are being transported at any one time. No child shall be permitted to remain unattended in any vehicle.
- D. Only that number of children and adults for whom there is comfortable seating space shall be transported. Standing in the vehicle while it is moving shall be prohibited. No person shall sit on the floor or in aisles, or project head or limbs out of the vehicle.
- E. No more than three persons, including the driver, shall be permitted to occupy the front seat of the vehicle. Each camper permitted to ride in the front seat of the vehicle shall be secured by a seat belt.
- F. If trucks are used by the camp as a means of transportation, the use shall be limited to short periods of

time such as no more than thirty minutes. Safe seating arrangements shall be provided. Only trucks with sides may be used. When such trucks are in use, the tailgate shall be closed at all times when the vehicle is in motion. There shall be an adult riding with the campers in the back of the truck. Campers shall be seated whenever the vehicle is in motion.

- G. The camp which provides any transportation shall have a written policy including, but not limited to, the following topics: safety education while riding in the vehicles, seating, highway stops, relief drivers, when necessary, supervision, and emergency procedures on the road.
- H. All vehicles transporting children shall comply with the applicable regulations of the Colorado State Department of Revenue, Motor Vehicle Division, and the ordinances of the municipality in which the vehicle is operated.
- I. All persons who transport campers shall be properly licensed to operate the vehicle being driven.
- J. At least one adult in each vehicle shall hold a current Red Cross Community First Aid and safety certificate or equivalent. The vehicle shall be equipped with a first aid kit.
- K. Any vehicle which transports nine or more passengers shall carry a fire extinguisher, reflective equipment, and road side markers.

#### **7.711.6 RECORDS FOR CHILDREN AND PERSONNEL**

##### **7.711.61 Children's Records**

- A. At the time the child is admitted to the camp, the following information shall be obtained and maintained at the campsite for each camper:
  - 1. Child's name, birth date, and address.
  - 2. Parents or guardian's names, addresses and telephone numbers.
  - 3. Parents or guardian's place of employment, telephone numbers and addresses.
  - 4. Name, address and telephone number of an adult designated to contact in case of emergency if the camp is unable to contact the parent or guardian.
  - 5. Name, address and telephone number of individuals authorized to take the child from camp if different from the parent or guardian.
  - 6. Names of individuals that are not authorized to take the child from camp.
  - 7. Dates of the camp session which the child will attend.
  - 8. Name, address and telephone number of the child's doctor. This information need not be obtained in a non-medical religious camp or if the child is exempt for the need for a statement confirming a physical examination pursuant to Section 7.711.51, D.
  - 9. Authorization signed by the person or agency having custody, giving authority for the camp to obtain emergency medical care. A non-medical religious camp is exempt from this regulation.
  - 10. Authorization signed by the parent, person or agency having custody of the child to participate in all special trips or excursions in which the child may be walking or riding away from the campsite.

11. Indication of any camp activity in which the parent, person or agency having custody of the child does not wish the child to participate (see Section 7.711.31, B).

B. The child's records shall also include:

1. A statement confirming a physical examination signed by the physician or nurse practitioner or a written statement signed by camper's parent or guardian pursuant to Section 7.711.51, D, and a current health history from the parent regarding the child's current physical condition (see Section 7.711.51, B).
2. Copies of reports submitted to the department regarding injury or illnesses suffered by the camper, the fatality of a camper, or a report of a camper being lost (see Section 7.711.15).

#### **7.711.62 Staff Records**

There shall be maintained at the campsite a record for each staff member, paid or volunteer, which shall include the following:

- A. Name, address, and birth date of the individual.
- B. Training, education, experience of the staff member.
- C. Copies of any first aid certification or other certification confirming qualifications for the responsibilities assumed at the camp.
- D. Copy of a statement signed by the physician or the nurse practitioner regarding the physical examination of the staff member or a statement from the staff member pursuant to Section 7.711.21, G.
- E. Name, address, and telephone number of any person(s) to be notified in the event of an emergency.
- F. Copy of the written references or note of phone references pursuant to Section 7.711.21, D.
- G. Copy of the signed letter of agreement pursuant to Section 7.711.21, C.
- H. The dates that the staff member was on the staff of the camp.

#### **7.711.63 General Information**

- A. The camper's file shall be retained by the camp for at least three years after the child leaves the camp, and shall be available without restriction to the licensing agency, but otherwise shall be treated as confidential. Retention of records for a longer period may be desirable where they reflect an accident, injury, or other unusual circumstances.
- B. Personnel records shall be maintained by the camp for at least three years. If the record reflects an accident, injury, or other unusual circumstance, it is suggested that the record be maintained for a longer period of time.
- C. Children's records shall be confidential, and facts learned about children and their families shall be kept confidential. The license may be denied, revoked, or made probationary if confidentiality of records or information is not maintained.

#### **7.711.7 CAMPSITE, PHYSICAL FACILITY, FIRE SAFETY AND SANITATION**

## **7.711.71 Campsites**

- A. All new and remodeled camp buildings, facilities, and equipment must meet the requirements of applicable codes and regulations, such as those governing health, safety, sanitation, building and fire; specifically, the codes of the local fire departments and the Colorado Department of Public Health and Environment.
- B. Prior to issuance of an original or renewal license, the camp shall be inspected and approved by the state health department or its local unit as conforming to sanitary standards. In the case of a travel-trip camp, the plans that the camp has made to meet the requirements shall be inspected and approved prior to the date the trip camp begins.
- C. The camp must conform to fire prevention and protection requirements of local fire departments in the locality of the camp. An inspection and approval of the local fire department must be obtained prior to original or renewal licensing. If the camp is not located within the jurisdiction of a local fire department, such fire department approval is not required. In the case of a travel-trip camp, the fire department approval is not required since the camp has no permanent campsite.
- D. Existing facilities can be required to correct deficiencies, caused by non-compliance with regulations of the health or fire departments, which may be hazardous in nature.
- E. The camp shall identify hazardous, high-risk areas such as cliffs, cellars, mineshafts, etc. These areas shall be guarded or posted to reduce the possibility of accidents.
- F. Each residential camp shall have a telephone or comparable means of communication. If either of these is impossible, individual arrangements shall be made by the camp and approved by the state department.
- G. Emergency telephone numbers shall be posted for at least, but no limited to, the camp doctor, nearest clinic or hospital, ambulance service, local sheriffs office and rescue unit, national or state forest service office (as appropriate), fire department or lookout station, and poison control center (if available).
- H. In the case of a primitive camp or travel-trip camp, sources of emergency care and methods of communication with such facilities as hospitals, police, forest service shall be identified for each campsite on the itinerary.
- I. When playground equipment is provided at a residential camp, the equipment and playground area shall be free of obstruction and man-made or natural hazards and shall be away from natural pathways of traffic. Playground equipment such as, but not limited to, climbing apparatus, slides, swings, and swing sets shall:
  - 1. Be in good repair, of solid and safe construction, free of rough edges, protruding bolts and the possibility of entrapment of extremities.
  - 2. Be securely anchored to concrete or other suitable footing.
- J. If the residential camp is located on or uses national or state lands, the director shall familiarize the staff and campers with rules and ethics governing the use of such property and shall be responsible for compliance.
- K. An itinerary shall be filed or an arrangement shall be made with national or state forest service office if such land is to be used by the travel-trip camp. The director shall familiarize the staff and campers with rules governing the use of such property. Should the travel-trip camp pass onto private land, an agreement shall be made with the individual responsible for that land prior to

access.

#### **7.711.72 Permanent and Semi-Permanent Shelters and Sleeping Facilities**

- A. All structures used by children shall be kept in good repair at all times.
- B. At least one-half of the floor area in each living unit, excluding tents, shall have a minimum ceiling height of seven feet. No portion of a room having a ceiling height of less than five feet shall be considered as usable floor space.
- C. If fabric structures are used, no plastic material will be permitted. Fabric structures shall be of a fire- and flame-retardant material. Existing fabric structures may be required to be removed on the basis of hazard potential.
- D. Campfires and open flames of any type shall be prohibited within ten feet of any tent.
- E. Each camp building used for living or sleeping quarters shall have windows or openings constructed so as to admit adequate light and air.
- F. Each camper shall be provided with his/her own mat, pad bad or cot.
- G. The aisles between rows of cots, beds, or bunks shall be kept clear for exiting purposes. There shall be at least two feet of clear space separating sides of beds.
- H. If bunk beds are in use, no bunks shall contain more than two tiers of beds. There shall be at least twenty-seven inches of clear space separating the tiers of beds and thirty-six inches of clear space between the top tier and the ceiling. Electric lights which are within reach of the top bunk shall be protected.
- I. Each permanent sleeping unit, building, or tent shall have not less than 30 square feet of floor space per person, camper, or counselor for single-tier beds and twenty square feet per person, camper or counselor for two-tier bunks.
- J. In tent structures which have a platform floor, beds or bunks shall be arranged in such a fashion that no camper who might fall from a bed or bunk could fall through the sides of the tent to the ground below.
- K. There shall be provision in each sleeping unit for storage of the camper's clothing and personal belongings.
- L. No camper shall sleep in the same room or tent with any person of the opposite sex excepting members of his/her immediate family.
- M. In a primitive camp or travel-trip camp, adequate shelters such as a tent shall be available for each child. There shall be fifteen square feet per occupant in each tent or shelter.
- N. Reasonable insulation shall be provided from cold/dampness by means of such things as a ground cloth beneath the tent.

#### **7.711.73 Toilet and Bathing Facilities**

- A. In a resident camp there shall be one toilet for every twenty campers or fraction thereof for which the camp is licensed. Urinals may be substituted for no more than one-third of the required toilets.
- B. Separate designated toilet facilities shall be provided for each sex in coed camps.

- C. Installation, operation, and maintenance requirements for toilet facilities and urinals:
  - 1. Water-flush toilets and urinals, chemical toilets, pit privies or latrines shall be provided and maintained in a clean and sanitary condition.
  - 2. Toilets, privies, and latrines shall have tight seat covers free of splinters.
- D. Hand washing facilities shall be provided throughout the camp. There shall be one basin or lavatory for each twenty campers.
- E. Showers or bathtubs shall be located within buildings used for sleeping, such as cabins or dormitories, or in a centrally located shower or bathing structure.
  - 1. There shall be one shower head or bathtub for each twenty campers or fraction thereof for which the camp is licensed.
  - 2. Hand washing facilities shall be available in the shower or bathing area.
  - 3. Shower or bathhouses shall be provided with vapor-proof lights enclosed in a shatterproof container.
- F. All sewage disposable systems shall meet the state and local health department requirements.
- G. In a primitive or travel-trip camp, the following shall be provided:
  - 1. If the camp is not provided with privies or other acceptable- type toilets, there shall be separate designated areas; for each gender for toilet use that meets the Health Department's requirements.

#### **7.711.74 Food Preparation Area**

- A. The kitchen, the food preparation process, dish and utensil washing, food storage, and all other food service areas shall be operated in compliance with the rules and regulations governing food services establishments within the State of Colorado.
- B. Garbage and trash removal shall meet the requirements of the state, federal, and local ordinances.

#### **7.711.75 General Building Safety**

- A. Every building, structure, tent, cabin and camp premises shall be kept in good repair, and shall be maintained in a safe condition.
- B. All new electrical installations shall meet standards of the National Electrical Code. All electrical work must be installed by a licensed electrical contractor with proper permits and inspections. Each electric outlet on the outside of a building shall be mounted in approved, protective weatherproof housing.
- D. In buildings accommodating more than 12 persons, exit signs shall be posted at every required exit doorway and wherever otherwise required to clearly indicate the directions of egress. Exit signs shall have letters of at least five inches in height.
- E. A building with an occupancy of more than twelve persons shall be provided with at least two separate and independent means of egress located as far apart as practical and in no case less than fifty percent of the largest dimension of the building.

1. In an existing building such as a cabin occupied by more than twelve but less than twenty persons, a window may be utilized as an acceptable second exit. The window must be openable and the distance from the window to the ground must not be more than four feet.
  2. Each exit door shall be hung to swing in the direction of exit travel. Exiting through a food preparation area is not permitted.
- F. If buildings with second stories are used by campers, there must be two widely separated exits from each floor.
- G. Each fire escape from any upper level of a building must be installed in accordance with requirements of the National Fire Protection Association codes.
- H. The door hardware on a door, forming part of a means of egress, shall be of a type that is non-locking against egress and operated with a single motion. The use of hooks and eyes, bolts, bars, and similar devices is prohibited on any door provided for exiting purposes or designated as an exit when camp is in use.
- I. When occupancy of a building exceeds 100 persons, exit doors shall be equipped only with panic hardware.
- J. The means of egress or the entire passage to free and safe ground remote from a building shall be unobstructed for easy travel conditions at all times.
- K. There shall be fifteen square feet per occupant in any room having an occupant load of more than 50 persons where fixed seats are not installed and which is used for classroom, assembly, or similar purposes. The maximum occupancy shall be posted in a conspicuous place near the main exit from the room.
- L. In an assembly area or classroom such as a recreation room, dining hall, chapel or gymnasium, each door from that room occupied by campers shall enter a one-hour fire-rated corridor between exits or there shall be a direct egress to the outside from each such room.
- M. Where a sleeping occupancy is maintained on the floor over a basement area or on a second floor, the ceiling of the basement or first floor shall be protected with five-eighths inch United Underwriters Laboratory-listed gypsum wallboard or any other proven assembly of materials that will provide a minimum one-hour resistance to fire, unless such construction is of solid or laminated wood timbers not less than three inches in thickness and installed so as to be smoke tight.
- N. Furnaces, fireplaces, heaters, or wood-burning stoves shall meet the following regulations:
1. Furnaces such as forced-air furnaces or hot water boilers must be separated from the rest of the building by one-hour fire-resistive material (see Section 7.711.75, M) provided with adequate outside combustion air, installed and maintained with safety devices to prevent fire, explosions, and other hazards.
  2. Only heaters installed with permanent connections and protectors shall be used.
  3. All heaters installed shall be U.L. approved and installed according to manufacturers' specifications.
  4. Boilers used for hot water supply rated at over 200,000 BTU or any boiler used for building heating shall be inspected and a certificate provided as required by the Division of Labor.



5. A heater or wood-burning stove shall be located and/or protected in such a manner as to prevent injuries to occupants of the building.
  6. Wood-burning stoves shall be regularly cleaned of ashes, which are immediately removed from the building and properly stored.
  7. Fireplaces shall be protected by a screen or glass device.
  8. Space around furnaces, heaters, and wood-burning stoves shall not be used for storage.
- O. Fire hazards and combustible materials such as paper and rags shall not be permitted to accumulate upon the premises and shall not be stored near water heater, furnaces, heaters, stoves.
- P. Ammunition, firearms, explosives, power tools, and special equipment involving unusual risk shall be stored in a locked place not occupied by children and shall always be under the custody and direct supervision of authorized personnel when in use.
- Q. All flammables shall be stored in approved containers or storage cabinet or in a building other than buildings which children occupy.
- R. Substances which may be toxic to a child if ingested, inhaled or handled, including, but not limited to, poisons, drugs, medicines, insecticides, herbicides, rodenticides, bleaches, chemicals, plastic bags and corrosive agents shall be stored in a cabinet or enclosure located in an area not used by children, stored in the original container, and properly labeled.
- S. Glass doors, walls, or panels shall be clearly marked. Safety glass shall be installed when required.
- T. Stairways of more than three risers shall be equipped with handrails on each side of the stairways. A stairway which is larger than 88 inches wide shall have an intermediate handrail equidistant between the two handrails.
- U. All window wells and outside stairwells that are hazardous to children shall be equipped with screens or guards, which shall be attached in such a manner that they may either be removed from the inside or broken in from the outside in case of fire.
- V. Premises shall be free of all hazards, including, but not limited to, old refrigerators, freestanding walls, open cisterns, grease traps, unsafe fences, worn or hazardous play equipment.
- W. If smoking is permitted on the camp premises, areas for smoking shall be designated.

#### **7.711.76 Fire Safety Provisions**

- A. Any fire extinguisher used at the camp shall be of a dry chemical type, hung at a level readily available to staff members, and annually inspected by an approved inspector. Indian pump backpack fire extinguishers and fire extinguishers approved for use by the U.S. Forest Services are also acceptable.
1. There shall be a fire extinguisher located in the camp kitchen.
  2. In each building and/or structure, there shall be a fire extinguisher on each floor.
  3. In tent areas, there shall be a fire extinguisher located within seventy-five (75) feet of each tent or a plan approved by the department.
- B. In each camp there shall be a fire alarm(s) which sounds a separate and distinctly recognizable tone

from all other signaling devices used by the camp. The alarm(s) shall be audible throughout the occupied camp premises. The alarm device, once activated, shall continue to sound automatically.

- C. Each camp shall have a written plan of evacuation from camp buildings to a common area and subsequently away from the campsite itself. The plan shall include the means of transportation necessary to evacuate all persons from the campsite. The plan shall be posted in several locations throughout the camp.
- D. The residential camp shall institute fire training programs for all employees, which include the use of all fire extinguishing equipment, methods of evacuation and necessary procedures to be followed in the event of fire or other emergency.
- E. Within twenty-four hours after arrival at the campsite, all individuals attending the camp shall be made familiar with the methods by which the fire alarm may be activated and with procedures to be followed upon notification of fire.
- F. At least one fire drill shall be held within twenty-four hours of the commencement of each camp session. The dates of the fire drills shall be recorded in the camp office.
- G. Each separate building used for sleeping campers and each multistory building shall be protected by a smoke detector on each floor of the building.
- H. Areas used for campfires shall be cleared and shall be away from overhanging branches.
- I. Campfires shall never be left unattended and shall be thoroughly extinguished. Extinguishing equipment shall be close at hand.

## **7.712 RULES REGULATING SCHOOL-AGE CHILD CARE CENTERS**

*All school-age child care centers must comply with the "General Rules for Child Care Facilities" as well as the "Rules Regulating School-Age Child Care Centers" and the "Rules and Regulations Governing the Sanitation of Child Care Centers in the State of Colorado."*

### **7.712.1 POLICY OF THE COLORADO DEPARTMENT OF HUMAN SERVICES**

It is the policy of the Colorado Department of Human Services ("the Department" ) to promote and encourage child care in environments that contribute to the safety, health, protection, and well-being of children. To verify compliance with standards intended to ensure such an environment, the department requires thorough and ongoing appraisals of child care facilities, persons working in the child care profession, and the nature of care provided.

### **7.712.2 DEFINITIONS**

A **school-age child care center** (hereafter referred to as the "center" ) is a child care center that provides care for 5 or more children who are between 5 and 16 years of age. The center's purpose is to provide child care and/or an outdoor recreational experience using a natural environment. The center operates for more than one week during the year. The term includes facilities commonly known as "day camps," "summer camps," "summer playground programs," "before and after school programs," and "extended day programs." This includes centers operated with or without compensation for such care, and with or without stated educational purposes.

- A. A **building-based school-age child care program** is a child care program that provides care for 5 or more children who are between 5 and 16 years of age. The center is located in a building that is regularly used for the care of children.

- B. **A mobile school-age child care program** provides care for 5 or more children who are at least 7 years of age or have completed the first grade. Children move from one site to another by means of transportation provided by the governing body of the program. The program uses no permanent building on a regular basis for the care of children.
- C. **An outdoor-based school-age child care program** provides care for 5 or more children who are at least 7 years of age or have completed the first grade. This program uses no permanent building on a regular basis for the care of children. Children are cared for in a permanent outdoor or park setting.

### **7.712.3 POLICIES AND PROCEDURES**

#### **7.712.31 Statement of Policies and Procedures**

- A. A written statement of the center's policies and procedures must be available to parents and guardians and must include the following:
  - 1. The center's purpose and its philosophy on child care.
  - 2. The ages of children accepted.
  - 3. Services offered for special needs children in compliance with the Americans with Disabilities Act (see Section 7.701.14, General Rules for Child Care Facilities).
  - 4. The hours the center is in operation, specific hours during which special activities are offered, holidays when the center is closed.
  - 5. The policy regarding inclement and excessively hot weather.
  - 6. The procedure concerning admission and registration of children.
  - 7. An itemized fee schedule.
  - 8. The procedure for identifying where children are at all times.
  - 9. The policy on discipline.
  - 10. The procedure, including notification of parents and guardians, for handling children's illnesses, accidents, and injuries.
  - 11. The procedures for handling lost children and other emergencies at all times, including during field trips. An outline of a plan of action in case of natural disaster is found at Section 7.712.83, G.
  - 12. The procedure for transporting children, if applicable, including transportation arrangements and parental permission for excursions and related activities.
  - 13. The written policy and procedure governing field trips, television and video viewing, and special activities, including the staff's responsibility for the supervision of children.
  - 14. The policy on children's safety related to riding in a vehicle, seating, supervision, and emergency procedures on the road.
  - 15. The procedure for releasing children from the center only to persons for whom the center has written authorization.

16. The procedures followed when a child is picked up from the center after the closing hours of the center or not picked up at all, and the procedure to ensure that all children are picked up before the staff leave for the day.
17. The procedure for caring for children who arrive late to the center and their class/group is away from the center on a field trip or excursion
18. The procedure for storing and administering children's medicines and delegation of medication administration in compliance with Section 12-38-132, C.R.S., of the "Nurse Practice Act."
19. The procedure concerning children's personal belongings and money
20. The policy concerning meals and snacks
21. The policy regarding visitors.
22. The procedure for filing a complaint about child care (see Section 7.701.5. General Rules for Child Care Facilities).
23. The policy regarding the reporting of child abuse (see Section 7.701.5 General Rules for Child Care Facilities).
24. The policy regarding notification when child care service is withdrawn and when parents or guardians withdraw their children from the center

#### **7.712.32 Communication, Emergency, and Security Procedures**

(See also Section 7.712.52. B)

- A. The center must notify the parents or guardians in writing of significant changes in its services, policies, or procedures so that they can decide whether the center continues to meet the needs of the child.
- B. For security purposes, a sign-in/sign-out sheet or other mechanism for parents and guardians must be maintained daily by the center. It must include, for each child in care, the date, the child's name, the time when the child arrived at and left the center, and the parent or guardian's signature or other identifier. With parent or guardian's approval, a child may sign in and out instead of the parent or guardian. Staff must verify attendance periodically throughout the day.
- C. Each center is required to have a written statement of goals and objectives. This statement must be kept on file, updated periodically, and made known to staff and to parents and guardians, and must be available during the licensing inspection.
- D. During the hours the center is in operation, the center must provide an office and/or monitored telephone number known to the public and available to parents in order to provide immediate access to the center.
- E. If the center has a permanent site, there must be a telephone at the site.
- F. Centers must have an established means of communication between staff and the program office when children are being transported or are away from the permanent site on a field trip.
- G. Emergency telephone numbers must be posted at each permanent site and taken on all field trips and during mobile school-age child care programs. The emergency numbers must include, at a

minimum. 911. if available, or rescue unit if 911 isn't available, the clinic or hospital nearest to the activity location; ambulance service; fire, police, and health departments; and Rocky Mountain Poison Control.

- H. Mobile school-age child care programs must have a way to be contacted while in transit.
- I. The center must be able to provide emergency transportation to a health care facility at all times.
- J. The director of the center or the director's delegated substitute must have a means for determining at all times who is present at the center
- K. A written policy regarding visitors to the center must be posted and a record maintained daily by the center that includes at a minimum the visitor's name and address and the purpose of the visit. At least one piece of identification must be inspected for individuals who are strangers to personnel at the center.
- L. With the exception of children who are allowed to sign themselves in and out, the center must release the child only to the adult(s) for whom written authorization has been given and is maintained in the child's record (see Section 7.712.81). In an emergency, the child may also be released to an adult for whom the child's parent or guardian has given verbal authorization if the staff member who releases the child does not know the adult, identification must be required to assure that the adult is authorized to pick up the child
- M. The center must have a procedure for dealing with individuals not authorized by the parent or guardian of a child who attempts to have the child released to them.
- N. The center must have a written emergency procedure that explains at a minimum, how children will be evacuated to a safe area in case of fire or other disaster and the reporting of reportable communicable illnesses to the local health department pursuant to regulations of the State Department of Public Health and Environment.
- O. The center must have a written procedure for closing the center at the end of the day to ensure that all children are picked up.

#### **7.712.33 Personnel Policies, Orientation, and Staff Development**

- A. The duties and responsibilities of each staff position and the lines of authority and responsibility within the center must be in writing.
- B. At the time of employment, staff members must be informed of their duties and assigned a supervisor.
- C. Prior to working with children, the staff member must read and be instructed about the policies and procedures of the center, including those relating to hygiene, sanitation, food preparation practices, proper supervision of children, and reporting of child abuse. Staff members must sign a statement indicating that they have read and understand the center's policies and procedures.
- D. The center must have a staff development plan that includes a minimum of 9 clock hours of training each year for all staff. This training must relate to one or more of the following general areas: child growth and development, healthy and safe environment, developmentally appropriate practices, guidance, family relationships, cultural and individual diversity, and professionalism. The 9 clock hours of training do not include recertification in first aid and CPR.
- E. All staff must complete training in universal precautions within the first 3 months of employment.

#### **7.712.4 PERSONNEL**

#### **7.712.41 General Requirements for All Personnel**

- A. All personnel of the center must demonstrate an interest in and a knowledge of children and concern for their proper care and well-being.
- B. All personnel must be free from illness and conduct that would endanger the health, safety, or well-being of children.
- C. The center must determine if any staff person who works at the center has ever been convicted of a crime as listed at Section 7.701.33, D, 5 or 6, of the General Rules for Child Care Facilities.
- D. A criminal record check request must be submitted to the Colorado Bureau of Investigation within 5 days that an individual is employed by the center. The personnel file of each caregiver of the center must contain clearance or arrest report from the Colorado Bureau of Investigation resulting from the caregiver's criminal record check. The requirement for a criminal record check is found in Section 7.701.33 of the General Rules for Child Care Facilities.
- E. A request for a review of the State Department's automated system must be made within 10 working days of each staff member's first day of employment. The method for making the request is found in 7.701.32 (General Rules for Child Care Facilities).
- F. Each staff member and volunteer must furnish the center with information concerning chronic health problems, any known drug reactions, allergies, medications being taken, and/or other health problems that could affect the staff member's ability to perform the duties of the job assigned.

#### **7.712.42 Required Personnel and Qualifications**

##### **A. Program Director**

Each center must have an on-site program director. The program director must have demonstrated to the hiring authority maturity of judgment, administrative ability, and the skill to appropriately supervise and direct school-age children in an unstructured setting.

- 1. The program director must have verifiable education or training in work with school-age children in such areas as recreation, education, scouting, or 4-H; and the program director must have completed at least one of the following qualifications:
  - a. A 4-year college degree with a major such as recreation, education with a specialty in art, elementary or early childhood education, or a subject in the human service field.
  - b. Two years of college training and 6 months of satisfactory and verifiable full-time or equivalent part-time, paid or volunteer, experience, since attaining the age of 18, in the care and supervision of 4 or more children.
  - c. Three years of satisfactory and verifiable full-time or equivalent part-time, paid or volunteer, experience, since attaining the age of 18, in the care and supervision of 4 or more children. The program director must complete 6 semester hours, 9 quarter hours, or 40 clock hours of training in course work applicable to school-age children within the first 9 months of employment.
- 2. The program director is responsible for planning and implementing the program and supervising the staff.

##### **B. Program Leaders**

Program leaders must be at least 18 years of age and demonstrate an ability to work with children. Program leaders must have 3 months of full-time or equivalent part-time satisfactory and verifiable experience with school-age children in such areas as Sunday school, scouts, sports, or baby-sitting.

#### C. Program Aides

Program aides must be at least 16 years of age. Program aides who are 16 or 17 years of age must work directly under the supervision of the program director or program leaders.

Program aides can be counted as staff in determining child care staff ratios.

#### D. First Aid and CPR Certified Staff

For every 30 or fewer children in attendance, there must be at least 1 staff member who holds a current department-approved first aid and safety certificate that includes CPR for all ages of children. Such individuals must be with the children at all times when the center is in operation. If children are at different locations, there must be a first-aid and CPR qualified staff member at each location.

### **7.712.43 Required Staff Supervision**

- A. A program director must be present at the center at least 60% of any day the center is in operation. An individual who meets one of the following requirements must be present for the remaining 40% of the day:
  - 1. A program leader who is at least 21 years of age and has at least 3 months of full-time or equivalent part time verifiable experience working with children.
  - 2. A program leader who is at least 18 years of age and has at least 1 year full-time or equivalent part-time verifiable experience working with children.
  - 3. Two program leaders who are at least 19 years of age and have at least 3 months of full-time or equivalent part-time verifiable experience working with children.
- B. If the program director cannot be present 60% of any day the center is in operation, an individual who meets program director qualifications must substitute for the director.
- C. There must be at least 1 program leader providing supervision with each group of 30 or fewer children cared for by the center.
- D. There must be 1 staff member for each 15 children in attendance.
- E. At any time when 9 or more children are present at the center, there must be at least 1 program leader and another responsible person at least 16 years of age on the premises. When 8 or fewer children are present, there must be at least 1 program leader on duty and a second staff member on call and immediately available in an emergency.
- F. At all times, school-age child care personnel must be actively supervising the children.
- G. In a mobile school-age child care program or an outdoor-based school-age child care program, the staff ratio given at Section 7.712.43, C and D, must be maintained, but there must be at least 2 staff members at all times with the children. One of those staff members must be a program director.

#### **7.712.44 Volunteers**

- A. If volunteers are used by the center, there must be a clearly established policy in regard to their function, orientation, and supervision.
- B. If volunteers are counted in the staff to child ratio, references must be obtained for them consistent with Section 7.712.41, D.
- C. Volunteers must have qualifications suitable to the tasks assigned.
- D. Volunteers must be:
  - 1. Directly supervised by a program director or program leader.
  - 2. Given instruction as to the center's policies and procedures.

#### **7.712.5 CHILD CARE SERVICES**

##### **7.712.51 Admission Procedure**

- A. The center can accept children only of the ages for which it has been licensed. At no time can the number of children in attendance exceed the number for which the center has been licensed.
- B. Admission procedures must be completed prior to the child's attendance at the center and must include:
  - 1. A pre admission interview (either by telephone or in person) with the child's parent(s) or guardian(s) to determine whether the services offered by the center will meet the needs of the child and the parent(s) or guardian(s).
  - 2. Explanation of the center's policies and procedures.
  - 3. Completion of the registration information for inclusion in the child's record, as required in Section 7.712.81.

##### **7.712.52 Health Care**

###### **A. Statements of Health Status**

- 1. At the time of admission, health information must be provided for every child entering the center, including any known drug reactions and allergies, medications being taken, and any special diets required. The name, address, and phone number of the child's physician and dentist must be provided.
- 2. At the time of admission, information regarding all immunizations a child has had, including month and year each immunization was administered, must be provided to the center. Immunizations must be recorded on the Certificate of Immunization supplied by the Colorado Department of Public Health and Environment (CDPHE) or an approved alternate certificate approved by CDPHE and kept on file at the center.

If the center is located at an elementary school and all the children attend that school, the immunization records may be maintained at the school office but must be accessible to licensing specialists.

###### **B. Emergency Procedures**



1. Written authorization for emergency medical care must be in the child's file as required in Section 7.712.81.
2. If a child requires medical attention away from the program site, the child's parent(s) or guardian(s) must be notified, and necessary medical care sought from a licensed physician or medical facility.
3. Children too ill to remain in the group must be comfortably cared for and supervised until they can be taken home or suitably cared for elsewhere. At a minimum, a cot or mat and a sheet and blanket must be provided.
4. A responsible staff member must be present or within hearing distance of any ill child.
5. First aid supplies must be available at the program site and in all vehicles operated by the center.

#### C. Medication

1. Prescription and non-prescription (over-the-counter) medications for eyes or ears, all oral medications, topical medications, inhaled medications, and certain emergency injections can be administered only with the written order of a person with prescriptive authority and with written parental consent. Centers may administer medications for chronic health conditions or emergency situations.
2. The written order by the prescribing practitioner must include:
  - Child's name
  - Licensed prescribing practitioner name, telephone number, and signature
  - Date authorized
  - Name of medication and dosage
  - Time of day medication is to be given
  - Route of medication
  - Length of time the medication is to be given
  - Reason for medication (unless this information needs to remain confidential)
  - Side effects or reactions to watch for
  - Special instructions
3. Medications must be kept in the original labeled bottle or container. Prescription medications must contain the original pharmacy label that lists:
  - Child's name
  - Prescribing practitioner's name
  - Pharmacy name and telephone number

- Date prescription was filled
- Expiration date of the medication
- Name of the medication
- Dosage
- How often to give the medication
- Length of time the medication is to be given

Over-the-counter medication must be kept in the originally labeled container and be labeled with the child's first and last name.

4. In the case medication needs to be given on an ongoing, long-term basis, the authorization and consent forms must be reauthorized on an annual basis. Any changes in the original medication authorization require a new written order by the prescribing practitioner and a change in the prescription label. Verbal orders taken from the licensed prescriber may be accepted only by a licensed registered nurse.
5. By January 1, 2003, all child care staff designated by the center director to give medications must complete the 4-hour Department-approved medication administration training and have current first aid and universal precautions training.
6. Medications must be kept in an area locked and inaccessible to children. Controlled medications must be counted and safely secured, and specific policies regarding their handling require special attention in the center's policies. Access to these medications must be limited.
7. Children are not allowed to bring medications to child care unless accompanied by a responsible adult. If a medication is out of date or left over, parents are responsible for picking up the medication. If parents do not respond, the center is responsible for the disposal of medications according to center policy and procedures. Disposal of medications must be documented.
8. A written medication log must be kept for each child. This log is part of the child's records. The log must contain the following:
  - Child's name
  - Name of the medication, dosage, and route
  - Time medication is to be given
  - Special instructions
  - Name and initials of the individuals giving the medication
  - Notation if the medication was not given and the reason
9. Topical preparations such as petroleum jelly, diaper rash ointments, sunscreen, bug sprays, and other ointments may be administered to children with written parental authorization. These preparations may not be applied to open wounds, or broken skin unless there is a written order by the prescribing practitioner.

10. The center may, with written parental consent and authorization of the prescribing practitioner, permit children who have asthma to carry their own inhalers and use them as directed. All staff must be aware of which children have asthma and which ones may use their own inhalers as needed.

#### D. Sun Protection

1. The center must obtain the parent or guardian's written authorization and instructions for applying sunscreen to their children's exposed skin prior to outside play. A doctor's permission is not needed to use sunscreen at the center.
2. When supplied for an individual child, the sunscreen must be labeled with the child's first and last name.
3. If sunscreen is provided by the center, parents must be notified in advance, in writing, of the type of sunscreen the center will use.
4. Children may apply sunscreen to themselves under the direct supervision of a staff member.

#### E. Control of Communicable Illness

1. When children show signs of severe or communicable illness, they must be separated from other children, the parent(s) or guardian(s) notified, and a doctor or medical facility consulted as needed regarding treatment.
2. Staff members with a communicable illness must not be permitted to work or have contact with children or other staff members if the illness could be readily transmitted during normal working activities.
3. When children have been diagnosed with a communicable illness such as hepatitis, measles, mumps, meningitis, diphtheria, rubella, salmonella, tuberculosis, giardia or shigella, the center must immediately notify the local or state department of health, all staff members, and all parents and guardians of children in care. Children's confidentiality must be maintained.

### **7.712.53 Personal Hygiene**

#### A. Hand Washing/Clothing

Children's hand washing must be supervised and must be taught when necessary.

#### B. Diapering

The center must have one or more designated diaper change areas for all children in need of diaper changing. The diaper change area must:

1. Be a minimum of 36 by 18 inches in size and large enough to accommodate the size of the child.
2. Have a place inaccessible to children for storing all diaper change supplies and disinfecting solutions and products.
3. Have a sufficient supply of diapers at all times.

### **7.712.54 Food and Nutrition**

- A. Drinking water must be freely available to children at all times.
- B. Nutritious snacks must be served at suitable intervals.
- C. Children who are at the center for more than 4 hours, day or evening, or come directly to the center from a morning kindergarten class must receive a meal.
  - 1. If the center provides a meal, it must meet one third of the child's daily nutritional needs.
  - 2. The center staff must check lunches brought from children's homes to determine if they meet one third of the child's daily nutritional needs.
  - 3. If the child fails to bring a meal, or if the meal meets less than one-third of the child's daily nutritional needs, the center must supply an adequate meal.
- D. All food prepared by the center must be from sources approved by the health authority. All food must be stored, prepared, and served in such a manner as to be clean, wholesome, free from spoilage, and safe for human consumption. Home canned foods cannot be served.

#### **7.712.55 Discipline**

- A. Discipline must be appropriate and constructive or educational in nature and may include such measures as diversion, separation of the child from problem situations talking with the child about the situation, or praise for appropriate behavior
- B. Children must not be subjected to physical or emotional harm or humiliation
- C. The director must not use, or permit a staff person or child to use, corporal or other harsh punishment, including but not limited to pinching, shaking, spanking punching, biting, kicking, rough handling, hair pulling, or any humiliating or frightening method of discipline.
- D. Discipline must not be associated with food, rest, or toileting No child should be punished for toileting accidents. Food must not be denied to or forced upon a child as a disciplinary measure.
- E. Separation, when used as discipline, must be brief and appropriate for the child's age and circumstances. The child must be in a safe, lighted, well-ventilated area and be within hearing and vision of a staff member. The child must not be isolated in a locked room, bathroom, closet, or pantry.
- F. Verbal abuse and derogatory remarks about the child are not permitted.
- G. Authority to discipline must not be delegated to other children, and the center must not sanction one child punishing another child.

#### **7.712.56 Transportation**

- A. Transportation Provided by the Center
  - 1. The center is responsible for any children it transports.
  - 2. The center must obtain written permission from parents or guardians for any transportation of their child during child care hours
  - 3. The number of staff members who accompany children when being transported in the vehicle must meet the child care staff ratio found at Section 7.712.43. The driver of the center

vehicle is considered a staff member.

4. Children must not be permitted to ride in the front seat of a vehicle unless they are secured in a seat belt that conforms to all applicable Federal Motor Vehicle Safety Standards. Children must remain seated while the vehicle is in motion.
5. Children must be loaded and unloaded out of the path of moving vehicles.
6. Children must not be permitted to stand or sit on the floor of a moving vehicle, and their arms, legs, and heads must remain inside the vehicle at all times.
7. Transportation arrangements for school-age children must be by agreement between the center and the children's parents, i.e., whether the children can walk, ride a bicycle or travel in a car. The center must monitor the children to be sure they arrive at the center when expected and follow up on their whereabouts if they are late. Written permission from parents or guardians for their children to attend community functions after school hours must include agreements regarding transportation.
8. Prior to a field trip or other excursion, the center must obtain information on liability insurance from parents and staff who transport children in their own cars and verify that all drivers have valid driver's licenses.

#### B. Requirements for Vehicles

1. Any vehicle used for transporting children to and from the center or during program activities must meet the following requirements:
  - a. The vehicle must be enclosed and have door locks.
  - b. The seats of the vehicle must be constructed and installed according to the vehicle manufacturer's specifications.
  - c. The vehicle must be kept in satisfactory condition to assure the safety of occupants. Vehicle tires, brakes, and lights must meet safety standards set by the Colorado Department of Revenue Motor Vehicle Division.
  - d. Seating must be comfortable, with a seat of at least 10 inches wide for each child.
2. In passenger vehicles, which include automobiles, station wagons and vans with a manufacturer's established capacity of 16 or fewer passengers and less than 10,000 pounds, the following is required:
  - a. Each child must be restrained in an individual seat belt.
  - b. Two or more children must never be restrained in one seat belt.
  - c. Lap belts must be secured low and tight across the upper thighs and under the belly.
  - d. Children must be instructed and encouraged to keep the seat belt properly fastened and adjusted.
3. In vehicles with a manufacturer's established capacity of 16 or more passengers, seat belts for passengers are not required.

#### C. Requirements for Drivers of Vehicles

1. All drivers of vehicles transporting children must comply with applicable laws of the Colorado Department of Revenue, Motor Vehicle Division, and ordinances of the municipality in which the child care program is operated.
2. All drivers of vehicles owned or leased by the center in which children are transported must have a current Department-approved first aid and safety certificate that includes CPR for all ages of children
3. In each vehicle used to transport children, drivers must have access to a first aid kit
4. The driver must ensure that all doors are secured at all times when the vehicle is moving.
5. The driver must make a good faith effort to ensure that each child is properly belted throughout the trip.

#### **7.712.6 PROGRAM ACTIVITIES**

##### **7.712.61 Activity Schedules**

- A. The center must provide parents or guardians with a list of activities it offers
- B. Parents or guardians must be given the opportunity to indicate to the staff of the center if they do not want their child to participate in an activity.
- C. Parents or guardians must be notified in advance of all activities that will occur away from the center.
- D. Television viewing, including videos, should not be permitted without the approval of a child's parents, who must be advised of the center's policy regarding television and video viewing
- E. A mobile school-age child care program must establish a daily itinerary and provide a copy to each child's parent or guardian. A copy must also be on file at the program's headquarters. The itinerary should be followed as closely as possible. In case of an emergency or change in the itinerary, the headquarters of the mobile school-age child care center must be notified immediately. Parents must be instructed to contact the main headquarters to determine the exact location of their child.

##### **7.712.62 Equipment and Materials**

- A. A rest time and rest equipment must be provided for school-age children who require a rest time.
- B. Children at the center must have access to age-appropriate materials and equipment from at least the following categories:
  1. Activity supplies
  2. Manipulatives and games
  3. Recreation equipment
  4. Library items
  5. Science equipment and materials
- C. Children must wear helmets when riding scooters, bicycling, skateboarding, or rollerblading

##### **7.712.63 Field Trips**

- A. The program may include field trips, where children and staff leave the center to visit some site in the community. On a field trip or during a mobile school-age child care program:
  - 1. Staff-child ratios must be maintained at all times.
  - 2. Children must be actively supervised at all times.
  - 3. An accurate itinerary must remain at the headquarters/office of the center.
  - 4. The staff must have with them on a field trip the following information about each child: name, address, and phone number of the child's physician or other appropriate health care professional and the written authorization from parent(s) or guardian(s) for emergency medical care.
- B. A list of all children and staff on a field trip must be kept at the headquarters of the center

#### **7.712.64 Special Activities Staff**

- A. If the center engages in special activities away from the child care facility, the staff member responsible for the activity must possess evidence of appropriate experience, training, and/or certification in the program specialty. Verification of experience and/or certification must be in the staff member's personnel file at the headquarters of the center. This staff member must be present whenever the activity is being carried out unless otherwise indicated in these regulations
- B. The qualified supervising staff member of special activities has the following duties:
  - 1. Direct training of other staff members working in the activity.
  - 2. Assign duties to staff members.
  - 3. Assure that all staff members supervising the activity are actively participating in the supervision of children.
  - 4. Assure that all necessary equipment is complete, in good repair, and safe to use.
  - 5. Assure that environmental hazards are not severe enough to cause danger to participating children.

#### **7.712.65 Special Activities**

- A. Swimming
  - 1. If the center uses a public or private pool for which the center is not responsible, the center need not provide a lifeguard if a qualified lifeguard is provided by the pool. Necessary staff supervision as listed at Section 7.712.43 must be maintained, and the lifeguard must not be counted in the staff to child ratio.
  - 2. If the public or private pool does not provide a qualified lifeguard, staff members meeting qualifications as stated at Section 7.712.65 A 3a must be provided by the center.
    - a. There must be at least 1 school-age child care staff member at the pool for each 10 or fewer school-age children.
    - b. Swimming area rules and emergency procedures must be posted at the swimming area and explained to the children

- c. Swimming is prohibited when fewer than the required qualified staff members are present
- 3. If the center uses a swimming area at a lake or pond, swimming area rules and emergency procedures must be posted at the swimming area and explained to the children.
  - a. A swimming supervisor must be present who, as a minimum, holds a current American Red Cross lifeguard training certificate or equivalent certification from a group such as the YMCA or Boy Scouts
  - b. One additional staff member who holds at least an American Red Cross lifeguard training certificate or equivalent must be present at the swimming area for each 30 additional school-age children in the water
  - c. At least 1 school-age child care staff member must be at the swimming area for each 10 or fewer school-age children present.
  - d. Swimming is prohibited when fewer than the required qualified staff members are present.
  - e. Swimming areas must be clearly designated.
- 4. The swimming pool or swimming area must meet the standards of the Colorado Department of Public Health and Environment or its local unit
- 5. Before children are permitted to swim in water deeper than shoulder height, their swimming skills must be tested by staff members who hold an American Red Cross lifeguard training certificate or equivalent
- 6. Child care staff must directly supervise and monitor all children while at the swimming area. Supervision must include monitoring children for exhaustion, distress, sunburn, heatstroke and threat of drowning.
- 7. The following equipment must be available for use at the pool side or the lake shore where swimming is permitted:
  - a. A buoy or a lemon line; and
  - b. Reach pole; and
  - c. Backboard
- 8. If swimming is permitted in a lake or a pond, a rescue boat equipped with a reach pole and a lemon line or a buoy must be available at all times.
- 9. If a center has shoreline activities such as wading fishing, ecology, or nature studies, the center must have a written policy that defines qualifications of persons accompanying the group and safety guidelines to be followed. Staff members must be acquainted with the policy

#### B. Boating/Canoeing/Sailing

- 1. The boating supervisor must hold, as a minimum, an American Red Cross basic lifeguarding certificate or equivalent and a basic small craft certificate for the type of craft to be supervised, or the boating supervisor must have at least 6 hours of experience in the



craft to be supervised

2. Other staff members involved in these activities must have at least 6 hours of experience in the type of craft to be used.
3. Whenever children are on the water they must wear a personal flotation vest approved by the United States Coast Guard that is appropriate to the weight of the child
4. A minimum of 2 staff members must be at the shoreline and/or in the water at any time when school-age children are on the water participating in boating, canoeing, or sailing activities. When determining the number and location of staff required, the activity supervisor must evaluate the lake size, conditions and water temperature. The conditions must be safe for the age and skill level of the children participating in the lake or pond activities. The required staff ratios must be maintained at all times.
5. Staff members present at the shoreline and/or on the water at any time when school-age children are engaged in boating, canoeing, or sailing activities must know the swimming ability of each school-age child participating in the boating program.
6. There must be a staff member in any boat that holds one or more school-age children under 10 years of age.
7. At no time can the occupancy of the craft exceed the capacity established for the craft by the United States Coast Guard Standards
8. There must be a warning device that can be readily heard or seen by persons in the crafts to indicate the need for the crafts to return to the shore/dock.
9. At the river or lake, a rescue boat must be in close proximity to the activity location. This rescue boat must be in good repair and contain a lemon line or buoy and reach pole, extra oar, or paddle.
10. Water craft must not enter a swimming area when swimmers are in the water.
11. Tubing is permissible only in calm waters

#### C. White Water Rafting

1. Rafting is permitted on Class III and IV rivers and rivers of less difficulty
2. If the center offers white water rafting, it must be licensed by the Division of Parks and Outdoor Recreation as a river outfitter as required by state law.
3. If the center offers white water rafting through a river outfitter the outfitter must have a valid river outfitter license.
4. The center must provide sufficient food storage to keep food- dry and must store an adequate amount of food for the size of the raft and the length of the trip.
5. Waterproof dunnage bags must be provided for all passengers and must be secured to the raft.
6. Children must wear a life vest any time they are near the water or in the raft.
7. Children must be at least 12 years old to ride a paddle raft in a Class III river. Children must be

at least 14 years old to ride a paddle raft in a Class IV river.

8. Children must be at least 12 years old to ride an oar raft in a class III river or a river of less difficulty. Children must be at least 14 years old to ride an oar raft in a Class IV river.

#### D. Archery

1. The archery supervisor must be an experienced archer
2. Archery rules and procedures must be posted and explained to all archers.
3. Instruction on the use of the bows and arrows must be presented to the school-age children prior to the use of the archery range
4. The archery range must be free from hazards and well marked. There should be a clear path to the target unobstructed by such things as rocks, trees, and branches and away from traffic, trails, and other activities.
5. Equipment must be maintained in safe condition Bows and arrows should be inspected for fractures, splinters, and cracks. Damaged bows and arrows should not be used.
6. Equipment must be stored under lock and key when not in use, with bows and arrows stored separately Bows and arrows should be used only in the specified archery area
7. All archers must use the same firing line Arrows should be issued only at the firing line.
8. Arrows must be nocked to bow string after shooters are on the firing line and after the signal to snoot has been given.
9. Before arrows are released, shooters must have a definite target
10. All persons must stay behind the firing line until the signal to retrieve arrows is given. All arrows must be retrieved at the same time
11. If the center has field archery, a procedure must be established and posted to provide for the safety of the archers, including issuance of arrows at check-in point of the archery trail, check-in of archers at the beginning of the archery trail, and check-out when archers have completed the trail.

#### E. Riflery

1. The riflery supervisor must hold a Department-approved firearm certificate or have equivalent verified experience approved by the Department.
2. The rifle range must be free from all hazards, away from other activities and traffic of all types, and well marked with danger signs or flags. All blind approaches must be fenced or blocked off.
3. The range must be constructed with an appropriately designed bullet-stop so that all bullets will be stopped behind the targets. The bullet-stop must be free of trees, rocks, boulders, and other objects that could cause a bullet to ricochet away from the bullet-stop.
4. There must be a well-defined firing line that is level with the target; and elevated off the ground. A minimum space of 5 feet between firing points must be established or firing points separated by a permanent divider.

5. Only the following types of guns are permitted:

a. .22 caliber rimfire, single-shot, bolt-action rifles having not less than a 3-pound trigger pull.

b. Pneumatic spring-type and CO2 air guns, either .22 caliber or .177 (BB size).

6. Firearms must be maintained in proper condition by inspection before and after usage, cleaning as necessary. Firearms that do not function properly must be repaired and tested before use. Firearms with fouled or pitted barrels must be repaired before use.

7. Instruction on the use of firearms must be presented to the children prior to the use of the rifle range.

8. No more than 5 cartridges at a time can be issued to a child by the responsible staff member and only at the firing line.

9. Firing is permitted only at the firing line. Observers must remain behind the firing line.

10. Actions of uncased firearms must be kept open except when on the firing line ready to fire.

11. All firearms must be unloaded immediately upon the command "cease firing." Actions must remain open until further commands are given.

12. On ranges where shooters must go down range to change targets and score, movement must be controlled by a responsible staff member.

13. All shooters must police their brass when they have completed their firing.

#### F. Trampolines

1. The trampoline supervisor must have formal training and experience in use of the trampoline and knowledge of safety and spotting techniques.

2. Trampolines must be equipped with pads along the sides and kept in good repair.

3. Use of the trampoline is prohibited when there is no trampoline supervisor present.

4. Trampolines must be secured from unauthorized use.

5. Only one child is allowed on a trampoline at any one time, regardless of the size of the trampoline.

6. Spotters must be posted on all four sides of each trampoline at all times. Spotters must not stand, sit, or lie on the trampoline, but must stand in a position of readiness, watching the jumper at all times.

7. Children must dismount the trampoline by sitting on the edge and sliding off. They must not be allowed to jump off the trampoline.

#### G. Hiking & Camping

1. The hiking or camping supervisor must be at least 21 years of age and hold a current Department-approved first aid and safety certificate that includes CPR for all ages of children.

2. At least 2 staff members must accompany a group on hikes and camping trips. At least 1 staff member who accompanies the group must hold a current Department-approved first aid and safety certificate that includes CPR for all ages of children.
3. In selecting the area for hiking or camping, the hiking or camping supervisor must consider the hiker's age, physical condition and experience, as well as the season, weather trends, methods of evacuation and communication, and water quality and quantity.
4. Before participation, children must be instructed on fundamental safety procedures to follow on the trail, procedures to follow if lost, proper health and sanitation procedures on the trail, rules governing land to be hiked, potential high-risk areas, and fire precautions.
5. Each hiker/camper must be equipped with clothing that protects against natural elements such as rain, snow, wind, cold, heat, sun, and insects.
6. A first aid kit must be taken on all trips. The contents of each Kit must be adequate for the number of school-age children, the terrain and the length of the hike.

#### H. Bicycling

1. The bicycling supervisor must be at least 21 years of age: be familiar with state laws about bicycling on public roads: be knowledgeable about bicycling in the mountains, if applicable: and must hold a current Department-approved first aid and safety certificate that includes CPR for all ages of children.
2. A bicycling supervisor and staff adequate to meet the staff-child ratio must accompany children on each bicycle trip. There must be at least 1 staff or supervisor for each 10 school-age children in the bicycling group
3. The bicycle supervisor must evaluate each child as to physical capability to participate in planned bicycling trips based on the trip length and difficulty of terrain.
4. Each child's bicycle must be adjusted to the size of the child and must be equipped with brakes in good condition.
5. Children must be instructed as to emergency procedures on the road and safe riding practices. The practices must include riding on the right side of the road, riding in single file, and maintaining four bike lengths between bicycles.
6. Staff members and children must wear head protection when riding bicycles
7. A bicycle repair kit and first aid equipment must be taken on each trip

#### **7.712.66 Additional Activities**

If the center engages in special activities other than those for which regulations are found in Section 7.712.65 the center must develop and follow a written plan approved by the department that includes at least the following:

- A. The qualifications of the supervisor of the activity.
- B. The qualifications of any other staff members necessary for proper supervision of the activity
- C. The number of staff members needed to supervise the activity.

D. Conditions under which a child may participate in the activity such as a minimum age or skill level.

E. Any special equipment necessary

## **7.712.7 BUILDING AND FACILITIES**

### **7.712.71 Facility Requirements**

- A. The mobile school-age child care program and the outdoor-based school-age child care program may use as a gathering place a public park or playground if the program primarily includes field trips away from the gathering place. Such programs must have a contingency plan for facilities to use during inclement weather. The plan must be available to parents on a daily basis.
- B. If a room or rooms inside a building are used for indoor care, the following ratio must be maintained: open indoor play space of at least 30 square feet of floor space per child, including space for readily movable furniture and equipment. Indoor space is exclusive of kitchen, toilet rooms, office, staff rooms, hallways and stairways, closets, laundry rooms, furnace rooms, and space occupied by permanent built-in cabinets and permanent storage shelves.
- C. When a building is being used during the summer months by a center specifically as a gathering place at the beginning and end of the day the 30 square feet requirement need not apply. The total amount of time during which the number of children present may exceed the 30 square feet requirement must not exceed 3 hours. This time must be divided evenly between the morning and the evening.
- D. The center must provide access to an outdoor play area. The outdoor play area may be a city park or public school ground. The play area must meet the following requirements:
  - 1. The center must provide a total outside play area of at least 75 square feet per child for a minimum of one-third of the licensed capacity of the center or a minimum of 1500 square feet, whichever is greater.
  - 2. Access to a shaded area, sheltered area, or inside building area must be provided at all times to guard children against the hazards of excessive sun and heat.
  - 3. The outdoor play area must be maintained in a safe condition by removing debris, dilapidated structures, and worn and broken play equipment. The center must identify hazardous, high-risk areas. These areas must be monitored to reduce the possibility of injury and accidents.
- E. A safe, comfortable place for relaxing and for sick children must be available at all times for children in care.

### **7.712.72 Toilet Facilities**

- A. Boys and girls must have separate, clearly identified toilet facilities, with toilets separated by partitions to provide privacy.
- B. There must be a minimum of 1 toilet per 30 or fewer children for which the center is licensed. Hand-washing facilities must be available at the ratio of 1 sink per 30 or fewer children.

### **7.712.73 Food Preparation Area**

Areas used for food preparation, dish and utensil washing, and storage must be in compliance with the

requirements of the Colorado Department of Public Health and Environment or its local unit.

#### **7.712.74 Fire and Other Safety Requirements**

##### **A. General Requirements**

1. Buildings must be kept in good repair and maintained in a safe condition.
2. Major cleaning is prohibited in rooms occupied by children.
3. Volatile substances such as gasoline, kerosene, fuel oil, and oil-based paints, firearms, explosives, and other hazardous items must be stored away from the area used for child care and be inaccessible to children.
4. Combustibles such as cleaning rags, mops, and cleaning compounds, must be stored in well-ventilated areas separated from flammable materials and stored in areas inaccessible to children.
5. Closets, attic, basement, cellar, furnace room, and exit routes must be kept free from accumulation of extraneous materials.
6. Smoking is prohibited during business hours in all areas where child care is provided and when transporting children.
7. All heating units, gas or electric, must be installed and maintained with safety devices to prevent fire, explosions, and other hazards. No open-flame gas or oil stoves, unscreened fireplaces, hot plates, or unvented heaters can be used for heating purposes. All heating elements, including hot water pipes, must be insulated or installed in such a way that children cannot come in contact with them. Nothing flammable or combustible can be stored within 3 feet of a hot water heater or furnace.
8. Indoor and outdoor equipment, materials, and furnishings must be sturdy, safe and free of hazards.
9. Equipment, materials, and furnishings, including durable furniture such as tables and chairs, must be stored in a manner that is safe for children.
10. Extension cords cannot be used in place of permanent wiring.
11. Corridors, halls, stairs, and porches must be adequately lighted. Operable battery-powered lights must be provided in locations readily accessible to staff in the event of electric power failure.

##### **B. Fire Safety**

1. Every building and structure must be constructed, arranged, equipped, maintained, and operated so as to avoid undue danger to the lives and safety of its occupants from fire, smoke, fumes, or resulting panic during the period of time reasonably necessary for escape from the building or structure in case of fire or other emergency.
2. Every building and structure must have at least 2 exits that permit the prompt escape of occupants in case of fire; or other emergency.
3. Every exit must be clearly visible, or the route to reach it must be conspicuously indicated. Each path of escape must be clearly marked.

4. In every building or structure, exits must be arranged and maintained so as to provide free and unobstructed egress from all parts of the building or structure at all times when it is occupied. No lock or fastening to prevent free escape from the inside of any building can be installed. Only panic hardware or single-action hardware is permitted on a door or on a pair of doors. All door hardware must be within the reach of children.
5. If the building in which the center operates has a security lock on outside exit doors, the center must obtain written permission from the local fire department; and there must be a written sign attached to the door instructing staff that the security lock is not to be utilized when children are present and the center is in operation.
6. Every building and structure must have an automatic or Department-approved manually operated fire alarm system to warn occupants of the existence of fire or to facilitate the orderly conduct of fire exit drills.

#### C. Emergency Drills

1. Each staff member of the center must be trained in fire safety.
2. Fire exit drills must be held often enough that all occupants are familiar with the drill procedure and their conduct during a drill is a matter of established routine. Fire drills must be consistent with local fire department procedures. A record of fire drills held over the past 12 months, including date and time of drill, number of adults and children participating, and the amount of time taken to evacuate, must be maintained by the center.
3. Drills must be held at unexpected times and under varying conditions to simulate the unusual conditions of an actual fire.
4. Drills must emphasize orderly evacuation under proper discipline rather than speed. No running or horseplay should be permitted.
5. Drills must include suitable procedures for ensuring that all persons in the building, or all persons subject to the drill, actually participate.
6. Fire alarm equipment must be used regularly in the conduct of fire exit drills.
7. If appropriate to the location of the center, tornado drills must be held often enough that all occupants are familiar with the drill procedure and their conduct during a drill is a matter of established routine. A record of tornado drills held over the past 12 months must be maintained by the center.

### **7.712.8 RECORDS AND REPORTS**

#### **7.712.81 Children's Records**

A. The center must maintain and update annually a record on each child that includes:

1. The child's full name, age, current address, and date of enrollment.
2. Names and home and employment addresses and telephone numbers of parents or guardians.
3. Any special instructions as to how the parents or guardians can be reached during the hours the child is at the center.

4. Names and telephone numbers of persons other than parents or guardians who are authorized to take the child from the center.
5. Names, addresses, and telephone numbers of persons who can assume responsibility for the child in the event of an emergency if parents or guardians cannot be reached immediately.
6. Name, address, and telephone number of the child's physician, dentist, and hospital of choice.
7. Health information including medical history, chronic medical problems, and immunization history.
8. A dated written authorization for emergency medical care signed and submitted annually by the parent or guardian. The authorization must be notarized if required by the local health care facility.
9. Written authorization from a parent or guardian for the child to participate in field trips and to participate in program activities, listing any possible exclusions.
10. Written authorization from a parent or guardian for the center to transport the child to and from school, whether by walking or driving.
11. Reports of serious injuries and accidents occurring during care that result in medical attention, admission to the hospital, or death of a child.

#### **7.712.82 Staff Records**

- A. The center office must maintain a record for each staff member, paid or volunteer, that includes the following:
  1. Name, address, and birth date of the individual.
  2. The date that the staff member was employed by the center.
  3. Name, address, and daytime telephone number of the person(s) to be notified in the event of an emergency.
  4. Verification of the staff member's training, education, and experience.
  5. Copies of any first aid and CPR certification or other certification confirming the qualifications for the responsibilities assumed at the center, which may include copies of driver's licenses, college transcripts, and diplomas.
  6. Copies of written references or notes of phone references, as required by Section 7.712.41, D.
  7. Verification that a criminal record check with the Colorado Bureau of Investigation is in process, or a copy of the results of the staff member's criminal record check.
  8. Verification that a review of the Central Registry of Child Protection has occurred or is in process.
- B. Each staff member's personnel file must contain all required information within 30 working days of the first day of employment.

#### **7.712.83 Administrative Records and Reports**



- A. The following records must be on file at the center:
1. Records of enrollment, daily attendance for each child, and daily record of time child arrives at and departs from the center.
  2. Current health department inspection report issued within the past 24 months.
  3. Current fire department inspection report issued within the past 24 months.
  4. A list of current staff members, substitutes, and staffing patterns.
- B. Each center must immediately report in writing to the Department any accident or illness occurring at the center that resulted in medical treatment by a physician or other health care professional, hospitalization, or death. This report must be made within 48 hours after the accident or illness occurred.
- C. A report about a fatality must include:
1. The child's name, birth date, address, and telephone number.
  2. The names of the child's parents or guardians and their address and telephone number if different from those of the child.
  3. Date of the fatality.
  4. Brief description of the incident or illness leading to the fatality.
  5. Names and addresses of witnesses or persons who were with the child at the time of death.
  6. Name and address of police department or authority to whom the report was made.
- D. The center must report to the Colorado Department of Public Health and Environment or its local unit any communicable illness, including but not limited to measles, mumps, diphtheria, rubella, tuberculosis, shigella, hepatitis, meningitis, salmonella, and giardia, contracted by a staff member or a child in care at the center.
- E. A medical log must be maintained at the center in which is recorded the name of the child and date of instances of at least the following:
1. Administration of first aid.
  2. Illness of the child while attending the center.
  3. Accident requiring the child to receive medical attention.
  4. The administration of any medication to a child.
- F. The center must submit to the department within 48 hours a written report about any child who has been lost from the center and for whom the local authorities have been contacted. Such report must indicate:
1. The name, birth date, address, and telephone number of the child.
  2. The names of the parents or guardians and their address and telephone number if different from those of the child.

3. The date when the child was lost.
  4. The location, time, and circumstances when the child was last seen.
  5. Actions taken to locate the child.
  6. The name of the staff person supervising the child.
- G. Each center must have a written plan for action in case of natural disaster, including, but not limited to, floods, tornadoes, aid severe weather; a lost or missing child; and injuries and illnesses. This plan must be on file at the center. The staff must have received training regarding the implementation of the plan prior to assuming supervisory responsibility for children. Written verification of the training must be in the staff member's personnel file.
1. The plan of action must include at least:
    - a. Prompt notification of parents or guardians.
    - b. Notification of the headquarters of the center
    - c. When local authorities are notified.
    - d. Emergency transportation.
    - e. Specific procedures for responding to the crisis.
  2. In the case of a mobile school-age child care program or a field trip, the plan must accompany staff members.

#### **7.712.84 Confidentiality and Retention**

- A. The center must maintain complete records of children and personnel as required at Sections 7.712.81, 7.712.82, and 7.712.83.
- B. The confidentiality of all personnel and children's records must be maintained (see Section 7.701.7, General Rules for Child Care Facilities).
- C. Personnel and children's records must be available, upon request, to authorized personnel of the department.
- D. If records for organizations having more than one center are kept in a central file, duplicate identifying and emergency information for children must also be kept on file at the center attended by the child.
- E. The records of children and personnel must be maintained by the school-age child care center for at least 3 years.

### **7.713 MINIMUM RULES AND REGULATIONS FOR SECURE RESIDENTIAL TREATMENT CENTERS**

#### **7.713.1 DEFINITIONS**

- A. The definition of a **secure residential treatment facility** is found at Section 26-6-102(9) of the Colorado Revised Statutes.

B. Other definitions:

1. **Dangerous behavior** means behavior that poses a clear and present hazard to a youth or to other individuals.
2. **De-escalation** means the use of therapeutic interventions with a youth during the escalation phase of a crisis. The interventions are designed to allow youth to contain their own behavior so that acute physical behavior does not develop that would lead to the need to use a physical restraint.
3. An **emergency** means a serious, probable, imminent threat of bodily harm to self or others where there is the present ability to effect such bodily harm, as defined at Section 26-20-120, C.R.S.
4. **Escalation** means an increase in intensity of a youth's out of control behavior.
5. **Mechanical restraint** means the use of devices intended to involuntarily restrict the movement or normal functioning of a portion of an individual's body. Mechanical restraint does not include the use of protective devices used for the purpose of providing physical support or prevention of accidental injury, as defined at Section 26-20-120., C.R.S.;
6. **Physical restraint** means the physical intervention by a staff member of the facility in an emergency situation to limit, restrict, or control the dangerous behavior of a youth by means of physical holding of the youth, as defined at Section 26-20-102, C.R.S.
7. **Seclusion** means the placement of a person alone in a room from which egress is involuntarily prevented, as defined at Section 26-20-102, C.R.S.

**7.713.11 Governing Body**

- A. The governing body is the individual(s), partnership, corporation, or association which holds the ultimate authority and legal responsibility for the conduct of the secure residential treatment center. The governing body shall be legally organized and authorized to do business in Colorado.
- B. The governing body shall be identified by its legal name. The names and addresses of individuals who hold primary financial control, members of the board of directors, and officers of the governing body shall be disclosed fully to the Colorado Department of Human Services. The department shall be informed immediately of the names and addresses of the new individuals.
- C. The Governing Body shall have by-laws which include but are not limited to the following:
  1. Qualifications, rights, and duties of membership
  2. Size of the governing body
  3. Method of selection
  4. Term of office of members and officers
  5. Duties and responsibilities of officers
  6. Quorum
  7. Parliamentary procedures

8. Recording of minutes
  9. Method of amending the by-laws
  10. Conflict of interest provisions
  11. Specification of the relationship of the chief executive to the governing body.
- D. When the governing body does not include a board of directors, there shall be an advisory committee of at least two individuals who act in an advisory capacity to the governing body. The names of the advisory committee members shall be disclosed to the department. The advisory committee shall meet at regularly-stated intervals.
- E. The minutes of the Advisory Committee or the Board of Directors shall be maintained. The minutes shall be available to the Department upon request, except that the minutes containing confidential personnel information need not be shared with the department.
- F. The functions of the governing body shall include but not be limited to:
1. The appointment of an administrator who shall be responsible, according to established performance criteria, to the governing body, which shall delegate to him/her the executive authority and responsibility for the administration of the secure residential treatment center according to its defined purpose.
  2. The formulation and regularly-planned review of policies and procedures to be followed by the center.
  3. The provision of necessary facilities, adequate financing, qualified personnel, services, and program functions for the welfare and safety of children in accordance with these standards.
  4. The adoption of a written description and organizational chart which reflects the current structure of authority, responsibility, and accountability within the center.

#### **7.713.12 Purpose**

A secure residential treatment center shall have a written statement specifying its philosophy, purposes, and program orientation. The statement shall identify the types of services provided, the characteristics of the youth to be served by the program and the geographic area from which youth are accepted. The statement of purpose shall be available to the public on request.

#### **7.713.13 Fiscal Management**

- A. A secure Residential Treatment Center shall demonstrate that it is financially sound and manages its financial affairs prudently. All funds disbursed by the center shall be expended in accordance with the program objectives as specified by the governing body.
- B. There shall be a written policy of fiscal management which includes an annual budget, collection, safeguarding and disbursement of monies, internal controls, petty cash, check signatures, and fiscal system accounts for all income and expenditures on an ongoing basis.
- C. There shall be an annual financial audit conducted independent of the center.
- D. If a center has a juvenile benefit fund, there shall be written policy and procedure which govern its operation.

- E. There shall be a written policy and procedure for the management of personal funds of the resident which include accounting procedures to assure that the youth's funds are secured and the resident will have access to his/her funds at the time of discharge.
- F. There shall be a written policy and procedure to regulate the operation of a youth's commissary, which includes but is not limited to inventory and accounting procedures for the commissary.

#### **7.713.14 Insurance**

- A. Every center shall carry public liability insurance. The applicant or licensee shall submit to the Department of Human Services the amount of the insurance and the name and the address of the insurance company providing the insurance for the facility. Information about the insurance should be maintained at the facility.
- B. If a center operates its own transportation vehicles, it shall carry insurance in compliance with the minimum limits required by the Colorado Revised Statutes, Title 10, Article 4.
- C. The center shall carry workman's compensation and unemployment insurance as required by law.

#### **7.713.2 CHILD CARE SERVICES**

##### **7.713.21 Admission Policy and Procedures**

- A. Admissions shall be in keeping with the stated purpose of the Secure Residential Treatment Center and shall be limited to youth who are adjudicated delinquent and who are guilty of an offense which would be a crime if committed by an adult.
- B. The secure residential treatment center shall have a written admission policy which shall include but not be limited to the following:
  - 1. Policies and procedures related to intake.
  - 2. The age range and sex of the youth.
  - 3. The youth's needs, problems, circumstances, or patterns of behavior best addressed by the center's program.
- C. The written description of admission policies and criteria shall be provided to referring agencies upon request and shall be available to the parent(s) or guardian of any youth referred for placement.
- D. A Secure Residential Treatment Center shall accept a youth into care only after an evaluation of presenting problems in areas such as social, physical health, mental health, education, and psychological concerns.
- E. A secure residential treatment center shall obtain an account of the legal aspects of the youth's case, summary of the offense history, social, health and family history, psychological evaluation, developmental assessment, mental health evaluation. Educational records shall be obtained. As much of this information as possible shall be obtained prior to admission, but the total evaluation shall be completed within one month after admission.
- F. There shall be a placement agreement with the placement agency. The placement agreement shall include but not be limited to the following:
  - 1. A delineation of the respective roles and responsibilities of all agencies and persons involved with the youth and his/her family.

2. Commitment order of the court.
  3. Written authorization from the parent or custodian to obtain medical care for the youth.
  4. Description of mutual expectations regarding program, records, financial agreements, general contractual agreements and reporting requirements.
- G. Prior to placement, approval shall be obtained from the Colorado Department of Human Services, the Colorado Deputy Compact Administrator of the Interstate Compact on the Placement of Children (ICPC) for any youth, whose legal jurisdiction rests in a state other than Colorado.
- H. There shall be a written procedure for classifying youth which includes the level of risk presented, the type of housing required, participation in facility and community programs, and the youth's special needs. The procedure shall be reviewed annually.
- I. When a new resident arrives at the facility, the following shall occur
1. A search shall be completed of the youth and his/her possessions. There shall be a disposition of the youth's personal property. Any items held by the center's administration shall be recorded, with a copy of the record maintained in the youth's file and a copy given to the youth.
  2. Each youth shall shower; each youth shall receive clothing, personal hygiene articles, and hair care services as necessary. The youth's personal clothing shall be washed or cleaned as appropriate and returned to the youth as soon as possible.
  3. Each youth shall be assigned an identification number and personal data shall be recorded.
  4. A medical screening shall be performed by a health trainee or qualified health care personnel on each youth upon arrival pursuant to Section 7.713.31, C.
  5. The youth shall be classified according to the written procedure and placed in an appropriate situation within two weeks of admission. Information gathered during classification shall be shared with staff members who must make determinations for the child.
  6. There shall be a program, which is carried out with the youth, during the days while classification is occurring.
  7. The youth shall be given an orientation. If the youth does not understand English, the orientation is to be in the youth's own language. Completion of orientation is documented by a statement signed and dated by the youth. Orientation shall include but is not limited to the following:
    - a. A tour of the facility including fire escape routes and exits.
    - b. A copy of written rules and regulations of the facility which include but are not limited to daily schedule, medical services, discipline, mail, visitation, grievance, and communication procedures.
    - c. A discussion about the procedures to assure the youth's understanding.
    - d. Assistance in notifying family members as to his/her arrival at the center and procedure for mail and visiting.
- J. The total number of residents admitted to the Secure Residential Treatment Center shall not exceed

the licensed capacity.

#### **7.713.22 Youth Rights and Grievance Procedures**

- A. Each licensed center shall have written policy and procedure which addresses and insures the availability of each of the following rights for residents:
1. No youth shall be subject to discrimination based on race, religion, national origin, sex, or physical handicap.
  2. There is equal access to programs and services for male and female youth in co-correctional centers.
  3. Each youth has the right to reasonable enjoyment of privacy.
  4. Each youth has the right to receive appropriate and reasonable adult guidance, support, and supervision.
  5. No youth shall be subjected to corporal or unusual punishment, humiliation, mental abuse, or punitive interference with the daily functions of living, such as eating or sleeping.
  6. Each youth has the right to be protected from all forms of sexual exploitation.
  7. Each youth has the right to receive adequate and appropriate medical care.
  8. Each youth has the right to receive adequate and appropriate food, clothing and housing.
  9. Each youth has the right to live in clean, safe surroundings.
  10. Each youth has the right to participate in an educational program which will maximize his/her potential.
  11. Each youth shall have the right to communicate or correspond with persons or organizations subject only to the limitations necessary to maintain facility order and security.
  12. Each youth shall have the right to participate in religious services and religious counseling on a voluntary basis, subject only to the limitations necessary to maintain order and security.
  13. Each youth shall have reasonable access to the general public through the communications media, subject only to the limitations necessary to maintain order and security and protect the juvenile's rights. Media requests for interviews and juvenile consents shall be in writing.
  14. No youth shall be required to participate in uncompensated work assignments unless the work is related to housekeeping, maintenance of the facility or grounds, personal, hygienic needs, or the work is part of an approved vocational or training program.
  15. Each youth shall have access to recreational opportunities and equipment, including, when the climate permits, outdoor exercise.
  16. Each youth has the right of access to the courts.
  17. Each youth has the right to assistance in making confidential contact with attorneys and the attorneys' authorized representatives; such contact includes, but is not limited to, telephone communications, uncensored correspondence, and visits.

18. Each youth has the right to determine the length and style of hair, except in individual cases where such restrictions are necessary for reasons of health and safety.
  19. Each youth has the right to keep facial hair, if desired, except in individual cases where such restrictions are necessary for reasons of health and safety.
- B. If the secure residential treatment center enforces any restrictions upon the youth's rights, the center shall:
1. Inform the youth of the conditions of and reasons for restriction or termination of his/her rights.
  2. Place a written report summarizing the conditions of and reasons for restriction or termination of the youth's rights in that youth's case record.
- C. A center shall not bar a youth's attorney, clergyman, or an authorized representative of the responsible placing agency from visiting, corresponding with, or telephoning the child.
- D. Written policies and procedures pertaining to visiting, mail and other forms of communication shall be established and implemented to encourage and maintain family and other relationships while ensuring the protection of the youth, staff and program from unreasonable and unnecessary intrusions and disruptions. Policies and procedures shall address, but not be limited to, the following:
1. Visits of the youth with relatives, friends, or others interested in his/her welfare, unless in the judgment of treatment staff and placement agency it would be detrimental to the youth and/or his family.
  2. Reasonable access to the telephone to make and receive personal calls by youth.
  3. The forwarding of first class letters and packages after transfer or release.
  4. Reasonable access to publications by youth.
  5. No limit on the volume of mail a youth may send or receive, except when the center provides postage or when there is clear and convincing evidence to justify such limitations.
  6. Youth's letters, both incoming and outgoing, are not read, except where there is clear and convincing evidence to justify such actions; if correspondence is read, the youth is informed in advance and is present when the letter is opened; and the action is documented.
  7. Inspection of youth's letters or packages for money or contraband.
  8. All cash received through the mail is held for the youth in accordance with the procedures of the center.
  9. Incoming and outgoing mail is forwarded within 24-hours and packages are forwarded within 48-hours, excluding weekends and holidays
  10. Youth are permitted to send sealed letters to a specified class of persons and organizations, including but not limited to courts, counsel, officials of the confining authority, administrators of grievance systems, and officials of the placing agency.
  11. The center shall provide postage for the mailing of a minimum of two letters per week for each youth, if requested, excluding legal correspondence.



- E. The secure residential treatment center shall establish a written grievance procedure which provides adequate due process safeguards, spells out an appeal process of at least one level of appeal, and assures that youth are entitled to report any grievance and shall not be subject to any adverse actions as a result of filing the grievance.
1. Grievance procedures shall be processed without alteration, interference, or unreasonable delay.
  2. This grievance procedure shall be made available and explained to each resident as provided for in the admission procedures.
  3. If a youth files a grievance, it shall be recorded in the youth's record along with the investigation findings and resulting action taken by the center.

#### **7.713.23 Program Description and Individual Treatment Plan**

- A. A secure residential treatment center shall have a written overall program description which is submitted to the Colorado Department of Human Services for review prior to original licensing. Any significant change in this description shall be submitted to the licensing authority for review prior to implementation. The written description shall include the following:
1. The position title and qualifications of the person who has overall responsibility for the treatment program.
  2. Staff responsibility for planning and implementation of the treatment procedures and techniques.
  3. Staff competencies and qualifications.
  4. The range of services and techniques which shall include at least modes of therapy, problem management, education, medical and recreation.
- B. Within 30 days of admitting a youth into care, a secure residential treatment center shall conduct a comprehensive assessment of the youth.
1. The assessment shall be conducted by a planning team. This team shall include persons responsible for implementing the treatment plan on a daily basis. At least one member of the team shall have a graduate degree in psychology, psychiatry, social work, or counseling plus two years of treatment-oriented experience.
  2. The planning team shall complete an assessment in at least the following areas:
    - a. Social History
    - b. Medical and Dental status
    - c. Education
    - d. Personal/Social development
    - e. Family relationships
    - f. Vocational training
    - g. Recreation

- h. Life skills development
- i. Religious interests
- j. Mental health
- k. Delinquency history

3. All methods and procedures used in this assessment shall be appropriate to the age, cultural background, and dominant language or mode of communication of the youth.

C. On the basis of this assessment, a secure residential treatment center shall develop a written, time-limited, goal-oriented individual treatment plan.

1. A secure residential treatment center shall provide an opportunity for the following persons, in addition to staff members, to participate in the planning process:

- a. The youth;
- b. His/her parent(s) or guardian, if available and unless contraindicated;
- c. Representative(s) of the placing agency;
- d. Other persons significant in the youth's life.

2. Based on the assessment, the individual treatment plan shall include the following components:

- a. A statement of long-term and short-term goals to be achieved by the youth and the method to be used for evaluating the youth's progress.
- b. Strategies for strengthening positive family relationships.
- c. Specification of the daily activities, including education and recreation, to be pursued by the program staff and the child in order to attempt to achieve the stated goals.
- d. Specification of therapeutic and/or any specialized services that will be provided directly or arranged for, frequency of services, and measures for ensuring their proper integration with the child's ongoing program activities.
- e. Goals and preliminary plans for discharge and aftercare.
- f. Identification of all persons responsible for implementing or coordinating implementation of the plan.

3. The completed treatment plan shall be signed by the youth and the chief administrator of the center or his/her designee.

4. The treatment plan and any subsequent revisions shall be explained to the youth and documented by signature of youth and staff.

5. Each treatment plan shall be reviewed at least monthly to evaluate the degree to which the goals have been achieved. The treatment plan shall be revised as appropriate to the needs of the youth.

- D. If the assessment process or the treatment plan requires the services of a specialist, such as a psychiatrist, psychologist, speech therapist or physical therapist, the specialist shall be currently certified or licensed according to state law.

#### **7.713.24 Discipline**

- A. Discipline shall be constructive or educational in nature and may include diversion, withholding of privileges, separation from problem situation, talk with the youth about the situation, praise for appropriate behavior, physical restraint, and disciplinary room restriction. Youth shall not be subjected to physical harm or humiliation.
- B. A secure residential treatment center shall have written policies and procedures regarding discipline and control, which shall be explained to all youth, families, staff, and placing agencies. These policies shall include measures for positive responses to appropriate behavior.
- C. A secure treatment center shall prohibit all cruel and unusual punishments including, but not limited to, the following:
1. Punishments including any type of physical hitting or any type of physical punishment inflicted in any manner upon the body such as punching, shaking, biting, or roughly handling a child.
  2. Physical exercises such as running laps or push-ups, when used solely as a means of punishment, and when such activities are not approved in the treatment plan.
  3. Requiring or forcing the youth to take an uncomfortable position, such as squatting or bending, or requiring or forcing the youth to repeat physical movements when used solely as a means of punishment.
  4. Group punishments for misbehaviors of individuals except in accordance with the center's written policy.
  5. Verbal abuse or derogatory remarks about the youth, his family, his race, religion or cultural background.
  6. Excessive denial of on-grounds program services or denial of any essential program service solely for disciplinary purposes.
  7. Deprivation of meals, although scheduled meals may be provided individually.
  8. Denial of visiting or communication privileges with family solely as a means of punishment.
  9. Denial of sufficient sleep.
  10. Requiring the youth to remain silent for long periods of time.
  11. Denial of shelter, clothing or bedding.
  12. Extensive withholding of emotional response or stimulation.
  13. Mechanical or physical restraint used as sanctions.
  14. Assignment of physically strenuous or harsh work which could result in harm to the youth.
- D. The secure residential treatment center shall have written rules for resident conduct which specify

prohibited acts and the sanctions which may be imposed. The written rules are given to each resident and are to be fully understood by all staff.

- E. The secure residential treatment center shall have written guidelines for the informal resolution of minor behavior infractions. These guidelines shall include the opportunity for youths to have input into the problem solving and decision making that relate to their participation in the program and to the consequences for their minor behavior infractions.

#### F. Minor Rule Violations

1. Prior to privilege suspension or a room restriction sanction, the reasons for the sanction shall be explained and the youth shall have the opportunity to explain the behavior leading to the sanction.
  - a. Whenever possible, the discussion should take place in a private setting. When a private setting is not available, the youth shall be afforded as much privacy as is possible.
  - b. Staff shall advise the youth of the expectations of the program and of the youth's responsibilities in the situation.
  - c. Staff shall assist the youth in developing solutions and/or strategies for correcting the problematic behavior.
2. Room restriction or time-out in an unlocked room or area away from the group for minor misbehaviors shall not exceed 60 minutes, to be continuously reviewed in 15 minute intervals. At the time that the restriction is imposed, the youth shall be informed that the restriction period will last between 15 and 60 minutes, depending on his/her interaction with staff and participation in the counseling process during the restriction period.
3. Reports are prepared on each incident of a youth's behavior infractions resulting in room restriction or loss of privileges.
4. During room restriction or time-out in or out of an unlocked room, direct staff communication shall occur at least every 15 minutes or more frequently, depending on the youth's emotional state. During this interaction with the staff, the youth should participate with staff in determining the end of the restriction or time-out period.

#### G. Major Rule Violations

1. When a youth is charged with violating a major rule of the facility which could result in a disciplinary action, the youth shall be insured the right to due process prior to any disciplinary sanction being imposed.
2. In an emergency, a youth posing a serious, probable, or imminent threat of bodily harm to self or others may be placed in administrative seclusion if less restrictive alternatives have failed. Administrative seclusion is the placement of a youth in a locked room. The reasons for such administrative seclusion shall be fully documented in the youth's file. (See Section 7.713.25, H, for use of physical restraint.)
  - a. When administrative seclusion is necessary it may continue for the period of time necessary to accomplish its purpose.
  - b. When a facility director or designee determines that the youth no longer poses a serious, probable, or imminent threat of bodily harm to themselves or others,

he/she shall be released from administrative seclusion.

- c. Administrative seclusion of more than 24 hours requires an administrative review every 24 hours by the facility director or designee who was not involved in the incident.
  - d. Upon each administrative review, the facility director or designee shall determine whether or not the youth still poses a serious, probable, or imminent threat of bodily harm to self to others and if the administrative seclusion should continue. The stated reasons and authorization to continue the administrative seclusion shall be documented in the youth's file.
3. A youth charged with a major rule violation shall be given a written notice of charge(s) of the alleged violation as soon as possible, but at least within 24 hours of the time that the infraction is discovered.
  - a. A written notice of the scheduled disciplinary hearing shall be provided to the youth at least 24 hours in advance of the hearing.
  - b. Although notice of the time and place of the hearing must be provided to the youth at least 24 hours in advance, the youth may consent in writing to waive the 24 hour notice and to proceed with an earlier hearing time.
4. A disciplinary hearing shall be conducted within 72 hours of the discovery of an alleged violation.
5. The youth shall be present at the disciplinary hearing except when his/her behavior prior to or during the hearing justifies exclusion or he/she has waived the right to be present.
  - a. The youth may be temporarily excluded during the testimony of youths who wish their testimony to be given in confidence.
  - b. Reasons for the youth's absence or exclusion shall be documented in the youth's file.
6. The disciplinary hearing shall be conducted by an impartial person or committee.
7. A youth may request the assistance of a staff member to represent him/her at a disciplinary hearing. A staff member or another resident shall be appointed when it is apparent that a youth is not capable of presenting evidence on his/her own behalf.
8. The youth shall have the opportunity to make a statement, present evidence, and call witnesses. Any exceptions shall be clearly documented in the youth's file.
9. The disciplinary officer's/committee's decision shall be based solely on the information obtained in the hearing process, including staff reports, statements of witnesses, and evidence. Once it has been determined that a youth has violated a rule and prior to any disciplinary action being taken, the reasons for the disciplinary action shall be explained to the youth. The youth shall have an opportunity to explain the behavior leading to the violation.
10. If the youth is found not guilty of the alleged violation, the disciplinary report shall be removed from all files, except the director may retain his/her copy for administrative review purposes.
11. There shall be a written record of the findings of the hearing. A copy of the record shall be

given to the youth, one placed in his/her file, and one provided to the facility director or designee. The facility director or designee shall retain copies of all proceedings findings for a minimum of six months.

12. The facility director or designee shall review all disciplinary hearings and dispositions to ensure conformity with policy and procedures.
  13. The youth shall be informed of his/her right to appeal the decision of the disciplinary hearing officer/committee to the facility director or his/her designee at the time he/she is provided with the decision. The appeal shall be made in writing stating the basis of the appeal and shall be made within five calendar days of the receipt of the decision. The appeal shall be decided within 10 calendar days and the youth promptly notified in writing of the results of the appeal.
  14. If a youth has allegedly violated multiple major rules at the same time, one disciplinary hearing shall be scheduled to hear all the charges. If the youth is found guilty of one or more of those violations, a disciplinary sanction shall be determined according to the facility/program's behavior management program. The hearing officer/committee cannot issue more than one disciplinary sanction for each hearing. Completion of program assignments can reduce the time of a disciplinary sanction. If the youth fails to complete a program assignment within 14 calendar days, an administrative staffing may be held to review the disciplinary sanction
  15. Any youth placed in an administrative seclusion shall be afforded living conditions and rights approximating those available to the general population, such as one hour of large muscle activity every 24 hours, the; use of toilet and shower, the receipt and sending of mail, and the same meals as the general population.
  16. Youth placed in administrative seclusion shall be visually checked by staff at least every 15 minutes or more frequently as determined by medical and/or mental health staff, including normal sleeping hours. The exact time of each check shall be recorded.
  17. When a youth is placed in administrative seclusion there shall be a counseling visit as soon as possible and a visit at least once every 24 hours. A log shall be kept which includes at least: the date and time of placement into administrative seclusion, the name of the person who authorized the administrative seclusion, the name(s) of the person(s) visiting the youth, the time and date of each counseling visit, a record of the observable behavior of the youth during the visit, the name of the person authorizing the release from administrative seclusion, and the time and date of the release from administrative seclusion.
- H. When a youth is alleged to have committed a criminal act covered by criminal law, the center should refer the matter to an appropriate law enforcement agency or court-officials.
- I. Youth placed in a secure residential center shall not punish other youth except as part of an organized therapeutic self-government program that is conducted in accordance with written policy and is supervised directly by staff. All restrictions of cruel and unusual punishment as found at Section 7.713.24, O, shall apply.
- J. Disregard of any of the foregoing disciplinary rules or any disciplinary measure resulting in physical injury or abuse of any child may be grounds for the denial, revocation or making probationary of the license.

#### **7.713.25 Security, Control, and Supervision**

- A. Youth shall be under the supervision of qualified and trained staff members or volunteers at all times.
- B. The door of the bedroom may be locked during sleeping hours for the safety of youth and/or staff and the security of the center.
- C. Staff shall conduct visual checks of youth at least every five minutes when youth are in their bedrooms and the door is locked.
- D. The center's perimeter shall be controlled by an appropriate means to ensure that youth remain within the facility and to prevent access by the general public without authorization.
- E. Residents of the secure residential treatment center shall be physically counted according to a system established by the facility. Any changes in the number of residents shall be reported to the appropriate staff member on a shift by shift basis.
- F. Staff shall inspect the center's security system and devices on a weekly basis and shall take appropriate corrective actions.
- G. Except in emergency situations, firearms are not permitted in the secure residential treatment center.
- H. The use of physical restraint and/or mechanical restraints shall be limited to an emergency when a youth is posing a serious, probable, or imminent threat of bodily harm to self or others and after all verbal de-escalation skills have failed, or for the prevention of escape. Under no circumstances is physical restraint, seclusion, or use of mechanical restraints justifiable as a punitive form of discipline, as a form of treatment or therapy, or as a threat to control or gain compliance of a youth's behavior.
  - 1. A written report shall be prepared by each staff member who employed force following each use of physical force or restraint and submitted to the center director.
  - 2. Prior to the use of physical or mechanical restraint, the facility staff must have tried all positive and constructive methods of dealing with a youth, including, but not limited to, physical structuring of the environment, talking with the youth, praise for appropriate behavior, assisting a youth with the expression of feelings, and de-escalation of the situation.

### 3. Written Restraint Policy

Each facility choosing to use physical or mechanical restraint to control a youth posing a serious, probable, or imminent threat of bodily harm to self or others must have a written restraint policy. The written policy must include at a minimum the following information:

- a. The type/philosophy/model of the de-escalation and physical or mechanical restraint to be used.
- b. Which staff members will be approved by the facility to use physical and/or mechanical restraint with the youth.
- c. The type of training/certification staff members approved to use restraint will be required to have prior to restraining a youth.
- d. The type and number of hours of ongoing training each staff member will be required to take.
- e. What preventive/de-escalation techniques and positive behavioral intervention must be used by staff prior to any physical or mechanical restraint.

- f. How the facility observes and evaluates the use of physical or mechanical restraint on a youth at the facility.
- g. The type of written documentation the facility maintains on each physical or mechanical restraint that describes the details of the incident and the staff involvement.
- h. The type of written documentation the facility maintains that describes the debriefing with the youth and staff following the restraint.
- i. Evaluation of each restraint to determine appropriateness and effectiveness of preventive/de-escalation techniques used and effectiveness and appropriateness of the restraint itself.
- j. The requirement that staff not restrain youth in areas of the facility that may pose a threat to the health or safety of the youth including, but not limited to, soft, pliable surfaces, concrete, asphalt, or areas including broken glass.
- k. Notification of the parent/legal guardian and youth in advance of the facility's restraint policy and methodology.
- l. How the facility monitors the physical well-being of the youth during and after the restraint, including, but not limited to, breathing, pulse, color, and signs of choking or respiratory distress.
- m. Emergency procedures, including first aid, that will be used if a youth or staff member is seriously injured during restraint.
- n. The requirement of staff to report to the county department of social services or local law enforcement any injury, bruising, or death that occurs as a result of the restraint pursuant to Colorado state law.
- o. The internal review process of the facility to assess carefully any injuries, bruising, or death.

#### 4. Restraint Training

All staff in the facility that will be involved in restraint must complete the following:

- a. A 16-hour original de-escalation/restraint training program that includes a competency test as a part of the training program. Successful completion of the competency test is mandatory prior to any staff member being involved in a physical restraint.
- b. Periodic observation of each staff member performing a restraint by a supervisor of the facility who has been trained in restraint.
- c. If a supervisor of the facility determines a staff member did not correctly perform a physical restraint, the staff member must be immediately retrained or be restricted from performing further restraints until retraining can occur.
- d. Regular training shall be required at least annually for each staff member involved in restraint to review and refresh skills involved in positive



behavior intervention, de-escalation, and physical restraint.

5. Authorization for Physical Restraint

- a. At the time of admission, the person or agency holding legal custody of the youth shall be notified and must give written consent for the youth to be restrained in accordance with facility policy. No youth shall be restrained without the specific written permission of the person or agency holding legal custody of the youth.
- b. At the time of admission to the facility, each youth shall be told, in a language or manner of communication understandable to him/her, of the purpose of the restraint model/method used and the type of behavior which might result in the youth being restrained.

6. Charting Restraint Incidents

Each restraint incident shall be recorded. The following information must be included:

- a. The name of the youth, date and time of day, staff members involved, their position at the facility, and their involvement in the physical or mechanical restraint.
- b. The precipitating incident(s) and the youth's behavior before the restraint occurred.
- c. What specific actions were taken to de-escalate the situation and control, calm, or contain the youth and the effect of these de-escalating actions upon the youth.
- d. Description of the restraint, including the youth's physical, emotional, and behavioral condition during the restraint.
- e. A description of the restraining devices, if any, the manner in which they were used, and how long the youth was restrained with a device.
- f. A description of the debriefing and evaluation with the youth and with the staff.
- g. The youth's physical condition prior to and following the restraint.
- h. The youth's emotional/behavioral condition prior to and following the restraint.
- i. A list of all participants and witnesses to the incident.

7. Review of Use of Restraint

- a. Records of each physical or mechanical restraint shall be reviewed by a supervisor of the facility or certifying authority within 48 hours of each restraint.
- b. According to the policies and procedures of the facility, the entire youth's plan must be reviewed if it appears that the youth is being restrained an excessive number of times, frequently in a short period of time, or frequently by the same staff member.
- c. If any particular de-escalation technique appears to be causing an escalation in the behavior of a youth or a group of youth, the use of the technique shall be evaluated for its effectiveness.

- d. De-escalation techniques that are not effective or are counter-productive must be terminated at the earliest opportunity.
  - e. If either the youth or a staff member was seriously injured or died during a restraint, a thorough review of the restraint and injuries must be instituted immediately. Based on the findings of the review, the staff members involved in the restraint must be retrained or corrective personnel action must be taken.
  - f. If a staff member appears to be involved in a larger number of restraints than other staff members and is not a part of a specially trained team or is unsuccessful at using de-escalation effectively, the facility must conduct a thorough review of the staff member's interactions with youth, prior restraint training, and need for further training as required by facility policies.
8. The use of mechanical restraints made of metal, soft leather, rubber, plastic or cloth is limited to cases of emergency and prevention of escape and after the failure of less restrictive alternatives. Only the facility director or designee may authorize the use of mechanical restraints. The facility shall establish written guidelines and shall train all staff in the established guidelines. The guidelines shall include the following elements, at the minimum:
- a. Handcuffs shall be applied wrist to wrist in the front or back, or may be attached to a waist belt in the front only. Soft elbow restraints may also be utilized when necessary and shall be applied in the rear only.
  - b. Shackles shall be applied on one person's ankles only and shall not be used to connect two persons' ankles together.
  - c. Handcuffs and shackles shall never be intertwined directly together in such a manner as to interfere with a person's ability to maintain his or her spinal column in an erect or straight position.
  - d. Youth shall never be handcuffed or otherwise attached to a vehicle.
  - e. Youth placed in restraints shall not be undressed or intentionally made uncomfortable.
  - f. Youth shall be immediately removed from restraints and evacuated into a safer area or separate smoke compartment whenever a fire alarm, set off because of concern of a fire, results in the evacuation of other youth from the building or smoke compartment where the restrained youth is located. In the event that a fire alarm sounds which does not result in evacuation, the restrained youth shall not be left unattended during the alarm/emergency/drill.
  - g. Appropriate allowances shall be made to assure the safety, comfort, and dignity of the youth. Normal bodily functions shall be attended to, including elimination and respiration. The room shall be maintained at a normal room temperature and shall meet all state and local safety, sanitation, and health standards.
  - h. Because of the vulnerability of the youth during a restraint episode, precautions shall be taken to assure that the restrained youth is protected from mistreatment, antagonism, and harm from another person.
  - i. Hard metal restraint may be used for transporting youth from one location to another.
  - j. When the only equipment immediately available to a staff member is hard restraint

equipment and the equipment must be used to restrain a youth who poses a serious, probable, imminent threat of bodily harm to self or others, the equipment shall be exchanged for soft restraint equipment as soon as it is safely possible.

- k. The youth shall be directly supervised at all times while in mechanical restraints. Staff shall constantly monitor the youth to assure that the youth is properly positioned, the youth's blood circulation is not restricted, the youth's airway is not obstructed, and that the youth's other physical needs are being met.
- l. A youth shall not be kept in mechanical restraints for more than 30 minutes without a supervisory review and subsequent authorization to continue the use of restraints. A record shall be kept which documents the supervisory review and the authorization. The record shall include: the staff member's signature, the exact time of the review, and the finding and authorization.
- m. As prescribed in statute, there shall be an administrative review by the director or the director's designee for mechanical restraints that last for two hours or more. Staff shall provide relief periods, except when the juvenile is sleeping, of at least 10 minutes every two hours.
- n. Thin, hard, portable plastic wrist restraints shall not be used on youth, except under emergency conditions and with the prior approval of the facility director or an official of an established command post.
- o. Following application, all restraint equipment shall be checked by the supervisor on duty to assure that the equipment has been properly applied, is of the proper type to assure the youth's safety, and is not likely to cause injury or undue discomfort.

9. The use of chemical agents is prohibited.

- I. All special incidents such as emergency situations and injuries shall be reported to the director of the center.
- J. The secure residential treatment center shall maintain a control center to provide order and security. A manual of all the written procedures for the center's security and control with detailed instructions for the implementation of the procedures shall be maintained at the control center. At least the following procedures shall be written and maintained:
  - 1. A procedure for dealing with escapes.
  - 2. A procedure to govern the supervision of all youth outside the facility and movement of youth within the facility.
  - 3. A procedure regarding searches for control of contraband. The procedure shall be explained to both youth and staff.
  - 4. A procedure to govern the control and use of keys, tools, culinary, and medical equipment.
  - 5. A procedure for the use of physical force, restraints, and necessary reporting of their use.

#### **7.713.26 Educational Programming**

- A. A comprehensive educational program shall be developed and provided for all youth who are residents of the secure residential treatment center.

1. Such programs shall be developed cooperatively by the facility and Local Education Agency (LEA) or State Education Agency based on applicable auricular requirements.
  2. The center shall develop assurances that the educational program is an integral part of the total treatment plan. Such assurances shall include procedures for information sharing, joint planning and follow through.
  3. The educational program allows for flexible scheduling that permits the youth to enter at any time and to proceed at his/her own learning pace. The youth shall attend classes appropriate to his/her educational level.
  4. There shall be a written policy and procedure which provides that each youth is assessed in terms of academic, vocational, and personal needs.
  5. Educational and vocational supervisors and instructors shall be licensed or certified by the state or as required by law.
  6. Formal educational and vocational programs have a minimum of one teacher for every 15 students.
  7. Educational and vocational training opportunities are available to each youth except when there is substantial evidence to justify otherwise.
  8. Provision is made to meet the educational and vocational needs of youth who require special placement because of physical, mental, or emotional handicaps or learning disabilities.
  9. Educational and vocational counseling are provided so that youth are placed in that phase of an educational or vocational program most suited to his/her needs and abilities.
  10. Pre-vocational training programs are integrated with academic programs and are relevant to the vocational needs of the youth and to employment opportunities in the community.
  11. There is an annual evaluation to measure the effectiveness 3f the educational and vocational training programs against stated performance objectives.
  12. There is a system whereby the educational and vocational training programs are assessed against stated objectives by qualified individuals, professional groups and trade associations; this assessment is done at least every three years.
- B. The center shall provide space, staff, equipment, and educational materials for the educational program, which is approved by the Colorado Department of Education.

#### **7.713.27 Library Services**

- A. Library services shall be provided and shall be available to all youth.
- B. There shall be a qualified person who coordinates and supervises library services.
- C. Library services which are provided shall include but not be limited to the following:
1. Planned and continuous acquisition of materials to meet the needs of users.
  2. Logical organization of materials for convenient use.
  3. Circulation of materials to satisfy the needs of users.

4. Information services to locate facts as needed.
5. A reader's advisory service that helps provide users suitable materials.
6. Promotion of the uses of library materials.
7. A congenial library atmosphere.

#### **7.713.28 Religious Services**

- A. There shall be a written policy and procedure which provides for youth to participate in religious services and counseling on a voluntary basis.
- B. A staff member shall coordinate the center's religious programs.
- C. The facility shall provide space and equipment for the conduct of religious programs for residents.

#### **7.713.29 Recreation Program**

- A. There shall be a written policy and procedure which assures the provision of a recreation program with schedules and a plan for constructive leisure time activities, which includes both indoor and outdoor activities.
- B. A variety of fixed and movable equipment shall be provided for each outdoor play area.
- C. A center licensed for 50 or more youth shall have a full-time, qualified recreation director who plans and supervises all recreation programs. Facilities licensed for less than 50 youth shall have a staff member, who is trained in recreation or a related field and assigned to the responsibilities of the recreation director.

### **7.713.3 PERSONAL CARE OF THE CHILD**

#### **7.713.31 Medical and Health Services**

- A. A secure residential treatment center shall ensure the availability of a comprehensive policy and procedures for the provision of preventive, routine, and emergency medical, mental health, and dental care for each youth in care. A primary physician, licensed to practice medicine in Colorado, shall advise the facility about establishment and implementation of the medical policy and procedures which shall include, but not be limited to:
  1. Ongoing appraisal of the general health of each youth, including immunizations in accordance with state law and regulations.
  2. Diagnostic services, emergency care, corrective care, recuperative care, and immunization updates.
  3. Provision of medical examination of any youth suspected of having a communicable disease.
  4. Provision of health education and sex education as appropriate including information about Acquired Immune Deficiency (AIDS).
  5. Provision that any medical treatment administered will be explained to the youth in a language understandable to him/her.
  6. Provision of dental care by a dentist, licensed in Colorado, who is available to the center.

7. Provision of mental health treatment by a mental health practitioner who is licensed or certified according to state law.
  8. Availability of a physician and an emergency medical facility on a 24-hour, seven-day-a-week basis for treatment of the youth.
  9. Procedures for dispensing medication, storage of medication, documentation of administration of all medication, disposition of medications, and notification of primary physician in cases of medication errors and/or drug reactions.
  10. Provision of medical and dental prosthesis when the health of the youth would otherwise be adversely affected, as determined by the responsible physician.
  11. Assurance that youth are informed both orally and in writing of procedures required for gaining access to medical services.
  12. Assurance that program staff are informed appropriately of a youth's special medical problems. At the time of admission, staff are informed of any physical problems which might require medical attention.
  13. Provision for the management of serious and infectious diseases which are updated as new information becomes available.
- B. The center shall prepare and maintain a quarterly report on the health delivery system and health environment. An annual statistical summary of health care provided to residents shall be maintained.
- C. A medical screening shall be performed by health-trained or qualified health care personnel on each youth upon arrival at the facility; all findings shall be recorded on a printed screening form approved by the primary physician.
- D. A general medical examination for each child shall be completed by a physician or a qualified nurse practitioner within thirty days after admission unless one was completed within sixty (60) calendar days before admission. A statement form signed by the examiner shall be retained in the child's file. This exam shall include the following:
1. An examination for physical injury and disease.
  2. Vision and hearing screening.
  3. A current assessment of the child's health, including immunizations.
- E. Sick call for non-emergency medical service, conducted by a physician and/or other qualified medical personnel, shall be available to each youth weekly.
- F. Whenever indicated, a youth shall be referred to an appropriate specialist for either future assessment or treatment.
- G. Subsequent physical and other examinations shall be done annually or as directed by the physician.
- H. The facility shall ensure that the youth receive annual dental examinations.
- I. There shall be first aid supplies readily available.
- J. Youth care staff and other personnel shall be trained to respond to emergency health-related situations

within a four minute response time. A training program shall be established which includes the following:

1. Recognition of signs and symptoms, and knowledge of action required in potential emergency situations.
  2. Administration of first aid and cardiopulmonary resuscitation (DPR).
  3. Methods of obtaining assistance.
  4. Signs and symptoms of mental illness, retardation, and chemical dependency.
  5. Procedures for patient transfers to appropriate medical facilities or health care providers.
- K. The facility shall make every effort to ensure that a child needing corrective devices such as glasses, hearing aids, etc., is provided with the necessary equipment.
- L. If a youth wishes an exemption from a medical examination or medical treatment due to religious beliefs, the youth shall submit a written statement signed by his/her parents or guardian which states the reasons for such an exemption. A secure residential treatment center has the right to request a statement regarding general health from a medical examiner. In a potential life-threatening situation, the center shall refer the youth's care to the appropriate medical and legal authority. A center does have the right to refuse admission to a youth whose parent or guardian refuses medical treatment or examination.
- M. Medications shall be administered and stored in the following manner:
1. Any prescriptive or non-prescriptive medication shall be administered by staff members of the Secure Residential Treatment Center only on the written prescription of a physician for each youth.
  2. Medication shall be administered only by a staff member of the secure residential treatment center who is a licensed physician, licensed registered nurse, or a staff member who has passed a competency evaluation, which is authorized by the Colorado Department of Public Health and Environment.
  3. The secure residential treatment center shall obtain written authorization from the prescribing physician to administer any prescriptive or non-prescriptive medication.
  4. Medication shall be stored in a safe, locked, clean container or cabinet.
  5. The center shall have a written medication schedule for each youth for whom medication is prescribed, a copy of which shall be available to appropriate staff.
  6. The center shall maintain for each youth a cumulative record of all medication, both prescriptive and non-prescriptive, dispensed to that youth including:
    - a. The name of the youth,
    - b. The name and dosage of medication,
    - c. The reason for prescribing the medication,
    - d. The time and date the medication is dispensed,

- e. The name and position of the dispensing person,
  - f. The name of the prescribing physician.
- N. Under no circumstances is a stimulant, tranquilizer or psychotropic drug administered for purposes of program management and control, or for purposes of experimentation and research.
- O. When a youth first comes into care, the center shall ascertain all medication the youth is currently taking. At this time the center's physician shall carefully review all medication the youth is using and make plans to either continue the medication or to reconsider the medication needs of the youth.
- P. All informed consent standards in the Colorado shall be observed and documented for medical care. The informed consent of parent, guardian, or legal custodian applies when required by law. When health care is rendered against the patient's will, it shall be in accord with State and Federal laws and regulations.

### **7.713.32 Food and Nutrition**

- A. Meals shall be served under conditions that minimize regimentation. The dining area shall provide normal group eating facilities and conversation shall be permitted during dining room hours.
- B. The center shall provide nutritious foods in the variety and amounts to meet the recommended "National Research Council's Recommended Daily Dietary Allowances" as adjusted for age, sex and activity of each youth in care.
- C. At least three meals, of which two are hot meals, shall be provided at regular meal times during each 24-hour period, with no more than 14 hours between the evening meal and breakfast. If basic nutritional goals are met, variations may be allowed during weekend and holidays.
- D. Menus shall be planned at least one week at a time, shall be dated, posted and filed for at least 12 months.
- E. If menus are not prepared by a qualified nutritionist or dietitian, there shall be review and approval by a qualified nutritionist or dietitian at least quarterly.
- F. Youth shall be encouraged to eat a variety of food served but shall not be subjected to undue coercion, including forced feeding or other punishment for refusal to eat.
- G. All food shall be from sources approved or considered satisfactory by the health authority. All foods shall be stored, prepared, and served in such a manner as to be clean, wholesome, free from spoilage, and safe for human consumption. Home-canned vegetables and meats shall not be served. Only pasteurized milk shall be served.
- H. Special diets as prescribed by appropriate medical, dental or religious personnel shall be prepared for the youth. A record of the diet shall be maintained with the youth's record of medication.
- I. Water from an approved source shall be readily accessible to youth by means of an approved water fountain or single service cups.
- J. There shall be a weekly inspection of all food service areas, including but not limited to the following:
- 1. Dining and food preparation areas and equipment.
  - 2. Sanitary, temperature-controlled storage facilities for all foods



- K. There shall be daily checks of refrigerator and water temperatures by administrative, medical, or dietary personnel.

#### **7.713.33 Personal Hygiene and Daily Routine**

- A. The center shall establish procedures to ensure that youth receive training in good habits of personal care, hygiene and grooming appropriate to their age, sex, race and culture.
  - 1. There shall be personal supervision by staff to provide for proper grooming and physical cleanliness of the youth.
  - 2. Hair care services shall be available to youth.
  - 3. The center shall insure that youth are provided with all necessary toiletry items, including clean, individual towels and washcloths, toothbrush, toothpaste, comb and shampoo.
- B. A secure residential treatment center shall have a written plan of basic daily routines which shall be available to all personnel. This plan shall be revised as necessary.
  - 1. Youth shall be provided activities outside his/her bedroom at least 14 hours per day.
  - 2. Daily routines shall not be allowed to conflict with the implementation of a youth's treatment plan.
  - 3. Daily routines shall be established for mealtimes, waking, and bedtimes.
  - 4. Opportunity for physical exercise shall be planned for each youth to include at least one hour daily of large muscle activity.

#### **7.713.34 Clothing and Personal Belongings**

- A. A residential facility shall ensure that each child in care has adequate clean, well-fitting, attractive and seasonable clothing as required for health, comfort and physical well-being and as appropriate to age, sex, and individual needs.
  - 1. Each youth shall have clean socks, underwear and towels on a daily basis and other clean clothing at least twice a week.
  - 2. At time of admission the center shall provide for the thorough cleaning and, when necessary, disinfecting of the personal clothing of a new youth before storage or before allowing the youth to keep and wear personal clothing.
  - 3. Each youth's personal clothing shall be identified.
  - 4. A youth's clothing shall be kept clean and in good repair. The youth shall be involved, as appropriate, in the care and maintenance of his/her clothing. As appropriate, laundering, ironing, and sewing facilities shall be accessible the youth.
- B. A secure residential treatment center shall ensure that discharge plans make provisions for clothing needs at time of discharge. The wardrobe for each youth shall go with him/her at time of discharge.
- C. The center shall allow a youth in care to bring his/her personal belongings to the center as defined by the center's policy, and to acquire belongings of his/her own in accordance with the youth's treatment plan. However, the center shall, as necessary, limit or supervise the use of these items

while the youth is in care. Where limitations are imposed, the youth shall be informed of the reasons by staff; and the decision and reasons shall be recorded in the youth's case record. Provisions shall be made for the protection of the youth's property.

- D. Youth assigned to food service, hospital, farm, garage, institution physical plant maintenance shops, and other special work shall be issued special and, when appropriate, protective clothing and equipment.

#### **7.713.4 HUMAN RESOURCES**

##### **7.713.41 Personnel Policy, Orientation and Training**

- A. The center shall have a written statement of personnel policies which include but are not limited to:

1. Job descriptions for all positions required. The descriptions shall describe duties of the job, qualifications for performance, and supervision to be provided.
2. Salary range and provision for increments.
3. Hours of work, holidays, vacations, sick leave, and other leaves.
4. Conditions of employment, tenure, and promotion.
5. Employment benefits, including retirement plan, social security, hospitalization, and other insurances.
6. Employee evaluation procedure.
7. Termination and sanction procedures including but not limited to child abuse and the use and/or sale of an illegal substance.
8. Grievance procedures which may be used by staff.

- B. A copy of the personnel policy shall be given to each staff member at the time of his/her employment.

- C. The center shall have a comprehensive written plan for the orientation ongoing training and development of staff members.

1. All new full-time employees shall receive 40 hours of orientation/training prior to being independently assigned to a particular job. This orientation/training is to include, at a minimum, orientation to the purpose, goals, policies and procedures of the center; working conditions and regulations; responsibilities and rights of employees; and an overview of the juvenile justice and correctional field. Depending upon the employee(s) and the requirements of the particular job, the orientation/training may include some preparatory instruction related to the particular job. Provisions may be made for acknowledging and giving credit for prior training received.
2. All clerical/support employees who have minimal contact with youth shall receive an additional 16 hours of training during the first year of employment and 16 hours of training each year thereafter.
3. Professional specialists employees who have contact with youth and all support employees who have regular or daily contact with youth shall receive an additional 40 hours of training during the first year of employment and 40 hours of training each subsequent year of employment.

4. Training for clerical, support and professional specialists employees shall include such topics as security procedures, rights and responsibility of youth, fire and emergency procedures, interpersonal relations, social/cultural lifestyles of the youth population, communication skills, First Aid and CPR.
  5. All new youth care/supervisory staff shall receive an additional 120 hours of training during the first year of employment and 40 hours of training each subsequent year of employment. At a minimum this training covers the following areas:
    - a. Security Procedures,
    - b. Supervision of Youth,
    - c. Regulations for the use of Restraint or Physical Force,
    - d. Report Writing,
    - e. Youth Rules and Regulations,
    - f. Rights and Responsibilities of Youth,
    - g. Fire and Emergency Procedures,
    - h. Key Control,
    - i. Interpersonal Relations,
    - j. Social/Cultural Lifestyles of the Youth Population,
    - k. Child Growth and Development.
    - l. Communication Skills,
    - m. First Aid and CPR.
  6. All part-time staff and volunteers working less than 40 hours per week shall receive training appropriate to their assignments; volunteers working the same schedule as full-time, paid staff shall receive the same training as full-time staff.
  7. Personnel who work with youth confined separately from the total population shall receive specialized training.
  8. All administrative and managerial staff shall receive 80 hours of training during their first year of employment, and 40 hours of training each subsequent year of employment. This training shall cover the following areas, at a minimum: General Management and Related Subjects, Labor Law, Employee-Management Relations, The Interaction of Elements of the Criminal and Juvenile Justice Systems, and Relationships with Other Service Agencies.
  9. The center shall maintain written documentation of training held, the participation of individual staff members, the hours involved, and/or other in-service training activities in which each staff member was involved. Activities related to supervision of the staff members' routine tasks shall not be considered training activities for the purpose of this requirement.
- D. All training programs shall be presented by persons who are qualified in the areas in which they are

conducting training.

- E. A staff member shall be designated as Training Director and shall plan and implement staff training programs.

#### **7.713.42 General Requirements for All Personnel**

- A. The Secure Residential Treatment Center shall provide professional staff and service personnel necessary to assure the health, safety, proper care, and treatment of the youth under care.
- B. All personnel in the center shall evidence an interest in and a knowledge of youth and a concern for their proper care and well-being.
- C. The center shall have written screening and hiring procedures and make reasonable efforts to evaluate the overall emotional health and stability of each applicant. Procedures shall include exploring for history of child battering, child abuse, child molestation, child neglect, previous criminal convictions, and drug or alcohol abuse. (See Section 7.701.36).
- D. The center shall not hire or continue to employ any person whose health, educational achievement, emotional, or psychological makeup impairs his/her ability to properly protect the health and safety of the youth, or is such that it would endanger the physical or psychological well-being of the youth.
- E. Each member of the staff, including part-time and substitutes, students, and volunteers whose assignment is required to meet staff qualifications or staff ratio shall have a medical examination within six months prior to employment and thereafter as required, in writing, by a physician, nurse practitioner, or physician's assistant (see Section 7.713.48 for volunteers). The written reports of the medical examinations, which shall be on file at the facility, shall be dated and signed by the examining medical personnel. Reports shall include:
  - 1. Statement of evaluation of the person's physical condition and his/her suitability for employment in a secure facility caring for youth.
  - 2. A list of known immunizations he/she has had and the most recent dates when immunized.
  - 3. Tuberculin status. If the staff member has a certificate of previous negative tuberculin testing, the testing need not be repeated. If there is no certificate, the testing needs to be completed prior to employment.
- F. In addition to a physical examination, food handlers, or those who prepare food for youth, shall have special tests as may be required by local ordinances or by the physician's recommendation.
- G. An employee who, upon examination or as a result of tests, shows indication of a physical condition which could be hazardous to a youth, other staff, or self, or which would prevent performance of duties, shall not be assigned or returned to his/her position until the condition is corrected to the satisfaction of the examining physician.
- H. Any employee suspected of a communicable disease shall have a medical examination.

#### **7.713.43 Administrative Staff**

- A. Administrator

The administrator of a secure residential treatment center shall be qualified as follows:

1. The administrator shall have received a bachelor's degree from an accredited college or university and have five years of verified experience in the human services field with youth; three years of experience shall be in a supervisory and/or administrative position.
2. The administrator shall assume the following duties:
  - a. Overall direction and responsibility for the youth program, facility and fiscal management.
  - b. Overall direction and responsibility for supervision of adequate staff.
  - c. The selection and training of a capable staff member who can assume responsibility for management of the center in the administrator's absence.
  - d. The establishment and maintenance of relationships with allied agencies, services and resources within the community.

**B. Assistant or Acting Administrator**

1. In each Secure Residential Treatment Center, there shall be a specifically designated staff member, age 21 or over, capable of acting as a substitute for the administrator during his/her absence. The duties and responsibilities of the substitute administrator shall be clearly defined in order to avoid confusion and conflict among other staff and youth.
2. If the administrator is regularly absent from the facility more than 50 percent of his/her working hours, an assistant administrator shall be appointed who meets the same qualifications as the administrator found at Section 7.713.43, A.

**C. Administrative Coverage**

1. When there is a change in administrator, or when he/she has left the center permanently without a replacement, the State Department of Human Services shall be notified within 30 calendar days; or when a possible change in administrator is anticipated, it is preferable to notify the state department prior to the change.
2. The administrator or the staff member to whom the administrator has delegated responsibility shall be available at all times.

**7.713.44 Medical and Health Staff**

- A. A secure residential treatment center shall have a primary physician, licensed to practice medicine in Colorado, available to establish and maintain the health and medical policy and procedures of the facility as found at Section 7.713.31.
1. If the physician is not a full-time employee, the description of the physician's consultative services or other duties to be performed shall be set forth clearly in a written, signed agreement with the facility.
  2. Any medical personnel, who is an employee, a volunteer, or whose services are purchased by the center, shall hold appropriate state and federal license, certification or registration and be responsible to the primary physician for the medical aspects of his/her job. A copy of the credentials shall be maintained at the center.

**7.713.45 Youth Care Staff**

- A. Each youth care staff member shall be at least 21 years of age and have completed two years of college education. A high school diploma or equivalent and one year's experience in the human services field may be substituted for the required college.
- B. Youth care staff aides shall be at least 18 years old, shall work under the direct supervision of a youth care staff member in activities specified by the youth care staff member, or with the approval of the director.
- C. Relief staff shall have the same qualifications as the regularly assigned youth care staff.

#### **7.713.46 Youth Care Staff-to-Youth Ratios**

- A. The center shall know the intended whereabouts of each youth in care at all times. Youth shall be supervised at all times (Section 7.713.25).
- B. There shall be a minimum of one (1) adult qualified as a youth care staff member on duty and one (1) adult on call who can be summoned at all times when there is one or more youth at the center.
- C. At night there shall be at least one awake youth care staff member within each physically separate building and within hearing of youth, and a second person who can be summoned in case of emergency.
- D. The ratio of youth care staff members to youth in care shall not be less than the following schedule except when transporting youth in vehicles (see Section 7.713.57):

Youth Care Staff-to-Youth Ratios  
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#### **7.713.47 Case Management Staff and Other Professional Staff**

- A. Case management shall be provided by:
  - 1. A qualified professional having a master's degree in social work, psychology, or related fields from an accredited college or university. This professional shall have two years of treatment-oriented experience; or,
  - 2. A designated member of the staff, who shall have a bachelor's degree from an accredited college or university with a major in behavioral science, human services or related fields, and three years experience in working with youth, and for whom there is an effective arrangement for consultation from a qualified professional as described above at Section 7.713.47, A, 1.
  - 3. The ratio of case management staff to youth shall be at least one full-time case management staff member for every twenty (20) youth, or a part-time staff member assigned for a fraction thereof.
- B. The case management staff shall be responsible for implementing the individual treatment plan as stated at Section 7.713.23.
- C. Psychiatrists used by the center shall be qualified and licensed to practice, and shall provide, as needed, diagnosis, treatment and consultation services.
- D. Psychologists who perform testing and diagnostic services shall have a master's degree in psychology, or shall have a bachelor's degree in a human services field and receive supervision from a psychologist who has a master's degree or a Ph.D. in psychology.

- E. Other professionals providing specific therapy shall be licensed professionals as designated by Colorado state law.

#### **7.713.48 Volunteers and Students**

- A. If volunteers or students are used by a center, the administration shall define specifically the services to be given by that individual.
- B. A volunteer shall perform professional services only when certified or licensed to do so.
- C. Volunteers and students who are assigned to work directly with the youth shall:
  - 1. Be subject to reference and criminal record checks similar to those performed for applicants for employment.
  - 2. Be in good general health. The center has the right to contact the individual's physician.
- D. Volunteers and students shall be:
  - 1. Directly supervised by a paid staff member.
  - 2. Oriented and trained as required at Section 7.713.4, C.

#### **7.713.49 Food Services and Maintenance Staff Members**

- A. All staff members shall comply with the requirements for all personnel as specified in Sections 7.713.41 and 7.713.42.
- B. Food service staff of the center shall meet requirements of the state or local health requirements for food handlers.
- C. There shall be one food service staff member who has basic knowledge and understanding of nutrition, food purchasing, menu planning, and food preparation. If the staff member is not qualified as a dietitian or nutritionist, there shall be regular consultation from a specialist in the field.
- D. Maintenance staff shall be in sufficient numbers to maintain an adequate physical plant.

#### **7.713.5 BUILDING AND FACILITIES**

##### **7.713.51 Building Site**

- A. A secure residential treatment center shall be located in an area that is readily accessible to health resources, public and private utilities, adequate and safe water supplies, sewage disposal, fire and police protection.
- B. The site shall be approved by the local zoning department.
- C. If the secure residential treatment center is located in the same building as, or immediately adjacent to, other residential facilities, such as a residential child care facility or an adult treatment center, it shall be so arranged that the care and activities of the youth residing in the secure residential treatment center are completely separate and independent from the other residential facility. A secure residential treatment center may not be operated on the premises of a business of a nature which might be hazardous to the health, safety, morals, welfare of youth, and the operation of the secure residential treatment center. The center shall only care for youth of the age stated

on the license. The center shall not be used for the care of persons over the age of 21 years old.

#### **7.713.52 Building Approvals**

- A. Each licensed center shall meet the requirements of the State Department of Public Health and Environment or its local unit, and the local fire department, and shall be inspected at least annually for compliance with current sanitation and life safety code regulations. All health and life safety hazards shall be corrected as required by the appropriate regulatory agency.
- B. A center staff member, who is trained in and is familiar with the safety and sanitation requirements, shall conduct weekly inspections of the center and assure that any items of non-compliance with safety and sanitation regulations are corrected immediately. A record of each inspection shall be maintained for 12 months.
- C. Licensed centers shall comply with applicable state or local building code regulations.
- D. Prior to construction, architectural plans for new buildings, or for extensive remodeling of existing buildings, shall be submitted for review and approval by the State Department of Public Health and Environment or its local unit, the local fire department, and local building department. Plans shall be submitted and reviewed by the State Department of Human Services as to appropriateness, general adequacy, and suitability for youth care.

#### **7.713.53 Living Spaces and Equipment Necessary in a Residential Treatment Care Facility**

- A. There shall be separate sleeping rooms for boys and girls. In sleeping rooms that accommodate two or more youth, 60 square feet of floor space per youth shall be provided. There shall be no more than six youth in any bedroom. Each bedroom for single occupancy shall have a minimum of 70 square feet of floor space. Closet and/or drawer space for storage of personal items sufficient for the occupants in each sleeping room shall be provided.

Sleeping rooms above or below the floor of exit travel shall not be used for sleeping purposes for youth who are non-ambulatory.

- B. Each youth shall be provided suitable sleeping facilities consisting of individual beds or bunks complete with mattresses in good repair and constructed so as to facilitate cleaning while in use by residents and upon each change of occupancy. Triple-deck bunks are prohibited. Beds being used by youth shall have a mattress, clean linens, pillows, pillowcases, and blankets.
- C. Each room of occupancy shall have natural light, be well-lighted and adequately ventilated by exterior windows or by an approved air-conditioning system. If a mechanical ventilation system is provided, it shall meet requirements of local building codes and fire regulations and a backup system to assure that ventilation is available in the event of power failure.
- D. Each sleeping room has, at a minimum, the following facilities and conditions:
  - 1. Toilet facilities available for use 24 hours a day.
  - 2. A hand washing sink with hot and cold running water.
  - 3. A desk, chair or stool.
  - 4. Temperatures which are appropriate to the summer and winter comfort zones.
- E. Staff rooms shall be located on the same floor or in the general area of youth's sleeping rooms so that the youth care worker can supervise youth and be readily accessible when needed.



- F. There shall be a minimum of 35 square feet of space for each youth for informal individual or group activities. The area shall be adequately and appropriately furnished to accommodate social and recreational activities associated with such living areas.
- G. There shall be a designated space distinct from youth's living areas to serve as an administrative office for such activity as secretarial work and bookkeeping.
- H. There shall be a designated space to allow private discussions and counseling sessions.
- I. Each center shall have a telephone. Each separate living unit within a center shall have 24-hour telephone service or an intercom system connected with an outside telephone service. Emergency telephone numbers, including fire, police, physician, poison control, health agency and ambulance, shall be conspicuously posted adjacent to the telephone.

#### **7.713.54 Outdoor Space and Equipment**

- A. All structures on the grounds of the center shall be maintained in good repair and free from any danger to health or safety.
- B. The grounds of the center shall be maintained in an acceptable manner and shall be free from any hazard to health or safety.
  - 1. Garbage and rubbish which is stored outside shall be stored securely in noncombustible, covered containers and shall be removed at least once every week, or more frequently if necessary.
  - 2. Garbage and rubbish containers and incinerators shall be located separate from play areas.
  - 3. Fences shall be in good repair.
  - 4. Areas determined to be unsafe, including steep grades, cliffs, open pits, swimming pools, high-voltage boosters, or high-speed roads, shall be fenced off or have natural barriers to protect youth.
  - 5. Playground equipment shall be so located, installed and maintained as to ensure the safety of youth.
- C. A secure residential center shall have access to outdoor recreational space and suitable recreational equipment.
- D. When a swimming pool is provided, it shall meet the requirements of the Colorado Department of Public Health and Environment. Safety precautions shall include protective fencing, winter coverage, which shall exclude plastic or inflatable-type domes, and a non-skid surface area of at least four (4) feet adjoining poolsides.

#### **7.713.55 Dining, Kitchen, Laundry, Bathroom Facilities**

- A. The dining area, whether located in the living unit or in a separate, central dining facility, shall meet the following requirements:
  - 1. It shall be clean, well-lighted, properly heated, and ventilated.
  - 2. Fifteen (15) square feet per person be provided to accommodate the youth and staff.
  - 3. Floors shall be constructed and maintained with a non-skid surface.

4. Tables and chairs shall be of sturdy construction, scaled or adjusted to the proper height and size so that youth can be comfortably served.
  5. Table service and settings shall be of the type, size, and design appropriate to the security of the facility.
  6. All dishes, cups, and glasses used by youth in care shall be free from chips, cracks, or other defects.
  7. Walls and floors shall be of materials that are easy to keep clean.
  8. Dining and recreation areas may be combined if regulations for dining areas are consistently met.
- B. The kitchen shall be designed and equipped to meet the requirements of sanitation, fire safety, and comfortable working conditions for the staff. There shall be:
1. Adequate space for receiving, storage, refrigeration, and preparation of food. Storage space shall be clean and well-ventilated; and containers of food shall be covered and stored above the floor on shelves or other clean surfaces.
  2. Provision for daily disposal of garbage and other refuse. Food waste grinders shall be installed in compliance with applicable laws and regulations.
  3. Separate storage of poisonous and toxic materials from food. Such materials shall be labeled and used only in ways that will neither contaminate food nor be hazardous to employees.
  4. Mechanical dish washing equipment or other approved methods of dish washing in accordance with requirements of the State Department of Public Health and Environment.
  5. Provision for a CO<sub>2</sub> or dry powder fire extinguisher(s) in kitchen. If a commercial-type range is used, a hood with a filter must be installed.
  6. Hand washing and toilet facilities for use of kitchen staff shall be readily accessible.
- C. When a center has a central laundry facility, it shall be located in an area separate from areas occupied by youth. Laundry facilities with ample space for sorting, drying, and ironing shall be made available to youth old enough and capable of handling their personal laundry. These facilities shall be in an area supervised by a responsible adult.
- D. Laundry trays or slop sinks shall be available and located conveniently for purposes of cleanliness and sanitation.
- E. There shall be a ratio of at least one toilet, lavatory, and bathtub or shower for every six (6) youth, readily accessible and kept in sanitary condition. Separate toilet and bath facilities shall be available for boys, girls, and staff. Toilets and bath facilities shall have doors and partitions. Urinals may be substituted for up to one-third of the required number of toilets for boys in facilities which accept boys. Toilets and bath facilities shall be accessible from a common hallway and be on the same floor with sleeping rooms.
- F. Bath and toilet rooms shall be constructed of easily cleanable, nonabsorbent materials. Floors shall have an impermeable, nonskid surface. Walls shall have a finished surface extending to a height of four (4) feet in toilet rooms and six (6) feet in shower rooms. All surfaces shall be maintained in good repair.

- G. Hot and cold water under pressure shall be supplied to all required plumbing fixtures except toilets. Water temperature control valves shall be inaccessible to youth, and water temperature shall be controlled by employees. Hot water in lavatories and bathing facilities shall not be above 110 degrees Fahrenheit.
- H. If drinking fountains are provided, they shall be approved, angle-jet type with adequate water pressure at all times.

### **7.713.56 Building Safety**

#### **A. Maintenance**

1. Buildings shall be kept in good repair and maintained in a safe, clean, and sanitary condition. Good housekeeping shall be observed in all areas at all times. A housekeeping plan shall be written and implemented.
2. All areas available for youth's activities shall be maintained in safe condition, including elimination of debris and hazardous items of all kinds, and removal of broken play and recreational equipment and any other devices which are in poor repair.
3. There shall be a written procedure, which shall be implemented, to provide for the control of vermin and pests.
4. Closets, attics, basements, cellars, furnace rooms, and exit routes shall be kept free from accumulation of extraneous materials such as discarded furniture, furnishings, newspapers, or magazines. Combustibles such as cleaning rags, mops, and cleaning compounds shall be stored in well-ventilated areas. Solutions, cleaning compounds, and other hazardous substances will be properly labeled and stored in areas inaccessible to youth.
5. Storage of gasoline, kerosene, fuel oil, and other flammable material shall meet requirements of safety and fire codes.
6. There shall be a written policy to govern the control and use of all flammable, toxic, and caustic materials. The policy shall be implemented.
7. Provision shall be made for collection, storage, and disposal of refuse in an approved manner to prevent nuisance conditions.
8. Storage shall not be permitted around or near water heaters and furnaces.
9. There shall be ample closets for cleaning supplies and equipment. Closets shall have good ventilation and be located in each principal area.

#### **B. Exits**

1. Every building or structure, new or old, shall be provided with exits sufficient to permit the prompt escape of occupants in case of fire or other emergency. Additional safeguards shall be provided for life safety in case any single safeguard is ineffective due to some human or mechanical failure.
2. There shall be at least two approved, alternate, remotely-located means of egress from each floor of the building to safe and open space at ground level.
3. Egress from each dwelling unit or sleeping room shall be directly available without passage

through another dwelling or room unit to the outside or to a common hallway leading to the outside.

4. Exits from bedrooms and other interior rooms, and exits to the outside of the building shall have the capability to be locked to limit the freedom of the youth in residence. Because of this capability the local fire department has the right to require safeguards not commonly found in less restrictive settings.
5. Every exit shall be clearly visible, or the route to reach it shall be conspicuously indicated in such a manner that every occupant of every building or structure who is physically and mentally capable will readily know the direction of escape from any point. Each path of escape shall be so arranged or marked that the way to a place of safety outside is unmistakable.
6. Pathways or hallways which lead to an exit shall not be cluttered or hazardous thus resulting in the obstruction of access to the exit.
7. In every building or structure, adequate and reliable illumination shall be provided for all exit facilities. Every building or structure shall be so constructed, arranged, equipped, maintained, and operated as to avoid undue danger to the lives and safety of its occupants from fire, smoke, fumes, or resulting panic during the period of time reasonably necessary for escape from the building or structure in case of fire or other emergency.
8. Compliance with this rule shall not be construed as eliminating or reducing the necessity for other provisions for safety of persons using a structure under normal occupancy conditions, nor shall any provision of this rule be construed as requiring or permitting any condition that may be hazardous under normal occupancy conditions.
9. The local fire department shall determine the adequacy of exits and other measures for life safety in accordance with the requirements of the Uniform Building Code and the National Fire Protection Codes. In cases of practical difficulty or unnecessary hardship, the local fire department may grant exceptions from the Uniform Building Code or the National Fire Protection Codes, but only when it is clearly evident that reasonable safety is thereby secured.

#### C. Heating and Electrical Equipment

1. All heating units, gas or electric, shall be installed and maintained with safety devices to prevent fire, explosions, and other hazards. No open-flame gas or oil stoves, hot plates or unvented heaters shall be used for heating purposes.
2. Electrical wiring systems in all buildings shall conform to the requirements of the state electrical board. Electrical appliances shall be examined frequently for worn or otherwise defective wiring.
3. Heating devices such as radiators, registers, fireplaces, and steam and hot water pipes within the reach of youth shall be screened or otherwise protected as deemed necessary for the youth in residence at the center.

#### D. General Safety Practices

1. A secure residential treatment center shall immediately notify the responsible agency or department of fire or other disaster which might endanger residents or require their removal for reasons of health and safety. The Licensing Section of the Colorado

Department of Human Services shall be notified of a fire or other disaster.

2. A secure residential treatment center shall not maintain any firearm on the grounds or within the structures of the facility.
  - a. A facility shall not permit any staff member or youth to be in possession of any firearm on the grounds or within the structures of the center. If chemical weapons are carried by a staff member for personal protection, the weapons shall be locked when the staff member is in the center.
  - b. Security guards patrolling the grounds and structures of a center, whether employed by the center or by a security service under contract to the center, shall not be permitted to be in possession of any firearm or chemical weapon on the grounds or within the structures of the facility except in emergency situations which are detailed in written policy.
3. Porches, elevated walkways and elevated play areas within the center shall have barriers to prevent falls.
4. Power-driven equipment used by the center shall be kept in safe and good repair. Such equipment shall be used by youth only under the direct supervision of a staff member and according to state law.
5. When smoking within the center is permitted, smoking areas shall be designed. Youth shall not be permitted to smoke in sleeping or storage areas.
6. All stairways containing more than four steps shall be equipped with a handrail.
7. Staff and youth shall be trained to report fires and other emergencies appropriately and shall be trained in fire prevention.
8. Power generators shall be tested at least every two weeks, and other emergency equipment and systems tested at least quarterly for effectiveness and shall be repaired or replaced if necessary.
9. The center shall have access to an alternate power source to maintain essential services in an emergency.
10. There shall be a procedure which provides for a communications system in emergency situations within the center and between the center and the community.

#### E. Evacuation and Fire Drills

1. There shall be a written evacuation plan prepared in the event of fire or major emergency which is approved by the local fire protection authorities pursuant to national fire safety codes. The plan shall be reviewed annually, updated if necessary, and reissued to the local fire jurisdiction. The plan shall include but not limited to the following:
  - a. Location of building/room floor plans.
  - b. Use of exit signs and directional arrows for traffic flow.
  - c. Location of publicly posted plan.
  - d. At least quarterly drills or simulated drills on all shifts throughout the center.

- e. Simulation of drills for evacuating extremely dangerous youth.
  - f. The means for the release of youth from locked areas and provision for a back-up system of security and control of youth.
- 2. All center personnel shall be trained in the implementation of the written emergency plans including fire, riot, hostage, medical, evacuation, and natural disasters. These plans are made available to all personnel. The plan and amendments shall be reviewed by staff at least annually.
  - 3. In every building or structure, fire alarms shall be provided to warn occupants of the existence of fire so that they may escape, or to facilitate the orderly conduct of fire exit drills.
  - 4. Responsibility for the planning and conduct of fire drills shall be assigned to competent persons qualified to exercise leadership.
  - 5. Drills shall be held at unexpected times and under varying conditions to simulate the unusual conditions prevailing in case of fire or other disasters.
  - 6. In the conduct of drills, emphasis shall be placed upon orderly evacuation under proper discipline rather than upon speed. No running or horseplay shall be permitted.
  - 7. Drills shall include suitable procedures to make sure that all persons in the building, or all persons subject to the drill, actually participate.
  - 8. Fire alarms shall be regularly used in the conduct of fire exit drills.
  - 9. The center shall make special provisions for the evacuation of any physically handicapped youth.
  - 10. The center shall take special care to help emotionally disturbed or perceptually handicapped youth understand the nature of such drills.
- F. A secure residential treatment center shall maintain an active safety program, including investigation of all accidents and recommendations for prevention.

#### **7.713.57 Transportation**

- A. A secure residential treatment center shall ensure that each youth is provided with the transportation necessary for implementing the youth's treatment plan.
- B. A Secure Residential Treatment Center shall have means of transporting youth in cases of emergency.
- C. There shall be a written procedure to govern safety and security precautions pertaining to center and staff vehicles.
- D. Any vehicle used in transporting youth in care of a Secure Residential Treatment Center, whether such vehicle is operated by the center, a staff member or any other person acting on behalf of the center, shall be properly licensed, and shall be maintained in conformity with all applicable motor vehicle laws. The vehicle shall be enclosed, provided with door locks, and shall be equipped with a first aid kit and fire extinguisher.
- E. Any staff member of a secure residential treatment center or other person acting on behalf of the center operating a vehicle for the purpose of transporting youth shall be properly licensed to operate that class of vehicle in accordance with applicable laws of the Department of Revenue.

- F. A secure residential treatment center shall not allow the number of persons in any vehicle used to transport youth to exceed the capacity established by the manufacturer for the vehicle.
- G. In addition to the driver, there shall be sufficient number of supervisors traveling in any vehicle to meet the required staff-youth ratio as stated at Section 7.713.46 when transporting youth.
- H. A secure residential treatment center shall ascertain the nature of any need or problem of a youth which might cause difficulties during transportation, such as seizures, a tendency toward motion sickness or a disability. The center shall communicate such information to the operator of any vehicle transporting youth in care.

## **7.713.6 RECORDS**

### **7.713.61 Confidentiality**

- A. There shall be a written procedure to govern record management which includes but is not limited to the following: Establishment and utilization, content, privacy, security, preservation, and a schedule for retiring or destroying inactive records. These policies and procedures shall be reviewed annually.
  - 1. Records shall be the property of the secure residential treatment center; and the center, as custodian, shall secure records against loss, tampering, or unauthorized use. The center shall designate who is to supervise the maintenance of records and to whom records may be released.
  - 2. Employees of the center shall not disclose or knowingly permit the disclosure of any information concerning a youth or his/her family, directly or indirectly, to any unauthorized person except in case of medical emergency.
  - 3. Information concerning a youth in care shall not be released without the voluntary, written consent of the parent(s) or guardian except to the youth, his/her parents(s) or guardian, their respective legal counsel, the court having jurisdiction over a youth's case, or an authorized public official in the performance of his/her mandated duties.
  - 4. A secure residential treatment center may make available information in the case record to the youth, his parent(s) or guardian and their respective legal counsel if the information being released does not contain material which violates the right of privacy of another individual and/or material that must be withheld from release according to other laws or by order of the court. If, in the professional judgment of the administration of the center, it is believed that information contained in the record would be damaging to a youth, that information may be withheld except under court order. Educational records shall be governed by federal and state laws.
  - 5. It is acceptable to use material from case records for teaching or research purposes, development of the governing body's understanding and knowledge of the center's services or similar educational purposes, when names are deleted and other identifying information is disguised or deleted.
  - 6. It is necessary to obtain an employee's permission or court order for the release of information from a personnel file.
  - 7. The contents of records shall be identified and separated according to an established format.
  - 8. All entries in the master file are dated and identified.

9. Personnel and records of youth shall be available, upon request, to authorized personnel of the Colorado Department of Human Services. All records regarding youth and all facts learned about youth and their relatives shall be kept confidential by the staff of the Colorado Department of Human Services pursuant to the state law.
- B. There shall be a procedure which upholds the principle of confidentiality of the health record and includes the following requirements:
1. The active health record is maintained separately from the confinement record.
  2. Access to the health record is controlled by the center's primary physician and the medical policy and procedure.
  3. The center's primary physician or his/her designee shares with the center administrator information regarding a youth's medical management, security, and ability to participate in programs.

#### **7.713.62 Necessary Records and Their Retention**

- A. The secure residential treatment center shall maintain complete records as required for licensing the center in accordance with the Minimum Rules and Regulations for a Secure Residential Treatment Center.
- B. A permanent register shall be maintained which contains:
1. Identifying information, such as name, sex, birth date, race, on each youth who has been in care at the center including a youth admitted in an emergency.
  2. Name and address of referring agency. Name of referring personnel.
  3. Date of admission.
  4. Discharge date and name and address of person or agency to whom the youth is discharged.
- C. Records for youth shall be retained for at least seven years. Retention of records for a longer period may be desirable when they reflect an accident, injury, or other unusual circumstance.
- D. Records for personnel shall be retained for at least three years.
- E. The following records shall be on file at the center or its administrative office:
1. Documents regarding the governing body including the charter, articles of incorporation, by-laws or other legal basis for existence, and names and addresses of current board of directors and officers of primary workers of the governing body.
  2. Current health department inspection report.
  3. Current fire department inspection report.
  4. Weekly safety and sanitation inspection reports.
  5. A list of current staff members, substitutes, and staffing pattern
  6. Insurance coverage.



7. Annual audit.

#### **7.713.63 Case Record for Youth**

- A. A record for each youth in care shall be maintained in a master file at the center where the youth resides which shall contain the following:
  1. Name, age, sex, place of birth.
  2. Initial intake information form and study;
  3. Documented legal authority to accept juvenile;
  4. Information on referral source;
  5. Social history;
  6. Medical consent forms;
  7. Name, relationship, address, and phone number of parent(s) and/or guardian(s) and person(s) juvenile resides with at the time of admission;
  8. Driver's license number, social security number, and Medicaid number, when applicable;
  9. Court and disposition;
  10. Signed release of information forms, when required;
  11. Progress reports on program involvement;
  12. Program rules and disciplinary policy signed by juvenile;
  13. Grievance and disciplinary record, if applicable;
  14. Referrals to other agencies; and
  15. Written agreements signed by parents or legal guardians pertaining to permission to care for youth, financial responsibility, medical services, and other permits. This may include the placement agreement signed by the center and the placement agency or individual placing youth.
  16. The treatment plan, a summary of the periodic evaluations of the child's progress, and resultant changes in treatment plan.
  17. Educational records and reports;
  18. Incident reports;
  19. Summary recording of significant contacts with parents or guardians and other agencies involved.
20. A summary of the discharge of the youth from the center which includes, but is not limited to the following:
  - a. The date of the discharge of the youth from the center,

- b. To whom the youth was released,
  - c. The physical condition of the youth at time of discharge
  - d. A summary of services provided during residence at the center.
  - e. A summary of the youth's response to treatment, accomplishments during residence and psychosocial status at the time of discharge.
  - f. The assessed needs which remain to be met and alternate service possibilities which might meet those needs.
  - g. A statement of an aftercare plan and identification of agency responsible for follow-up services and after care.
  - h. Circumstances which led to an unplanned discharge.
- B. There shall be a health record maintained for each youth. The form and format of the health record, and the procedures for its maintenance and safekeeping shall be approved by the center's primary physician. The health record shall include but not be limited to the following:
- 1. The completed receiving screen form.
  - 2. Health appraisal data forms.
  - 3. All findings, diagnoses, treatments, dispositions.
  - 4. Prescribed medications and their administration.
  - 5. Laboratory, x-ray, and diagnostic studies.
  - 6. Signature and title of documenter.
  - 7. Consent and refusal forms.
  - 8. Release of information forms.
  - 9. Place, date, and time of health encounters.
  - 10. Health service reports, e.g., dental, mental health and consultations.
  - 11. Treatment plan, including nursing care plan.
  - 12. Progress reports.
  - 13. Discharge summary of hospitalization and other termination summaries.

#### **7.713.64 Personnel Records**

A personnel record for each employee shall include: name, address, birth date, names and telephone numbers of persons to be notified in event of an emergency; date of employment, and date and reason for separation; documents verifying education, training, and work experience pre-employment references; physical examination at the time of employment and subsequent health examinations; and the indication of awareness of agency policies

#### **7.713.65 Incident Reports and Logs**

- A. There shall be maintained a permanent log in which is reported a summary of situations involving individual or groups of youth for use by supervisory and treatment staff. Each shift of staff members shall prepare shift reports that record routine and emergency situations.
- B. All special incidents such as emergency situations, injuries, restraints or major rule violations shall be recorded and reported to the director of the facility or his/her designee. A copy of the record shall be maintained in the youth's case record.

#### **7.713.66 Reports**

- A. A residential center shall notify immediately the youth's parent(s), guardian, and/or the placing agency of any illness, injury, or severe psychiatric episode resulting in medical treatment, hospitalization, or death.
- B. Critical incidents shall be reported as outlined in Section 7.701.52.

#### **7.714 QUALITY STANDARDS FOR 24-HOUR CHILD CARE [Rev. eff. 7/2/06]**

All rules in Section 7.714 will be known and hereinafter referred to as the Quality Standards for 24-Hour Child Care and will apply to all child care applicants and licensees subject to licensing as a specialized group facility, residential child care facility, therapeutic residential child care facility, shelter residential child care facility, or psychiatric residential treatment facility.

It is the policy of the Colorado Department of Human Services ("the Department" ) to promote the provision of safe and adequate 24-hour care of children in an environment designed to meet the physical, emotional, cognitive and social needs of the children at those times in the life of such children when the child's family of origin is unable or unwilling to provide adequate care. It is also the policy of the Department to require 24- hour care providers to meet standards and conditions for the well-being and protection of the children in their care. In furtherance of the foregoing policy considerations, the proper enforcement of these rules requires thorough and ongoing appraisal of the 24- hour child care facility where care is provided, the staff members providing the care, and the nature and quality of the care provided.

##### **7.714.1 DEFINITIONS [Rev. eff. 7/2/06]**

- A. " Client Representative " means a person designated by the facility to process grievances.
- B. " Dangerous Behavior " is behavior that poses an imminent safety risk to a child or to other individuals.
- C. "De-escalation" is the use of therapeutic interventions with a child during the escalation phase of a crisis. The interventions are designed to allow children to contain their own behavior so that acute physical behavior does not develop that would lead to the need to use a physical restraint.
- D. An "emergency situation" is one in which a child is in actual danger to him/herself or others and the child presents an imminent safety risk.
- E. "Escalation" is an increase in intensity of a child's out-of-control behavior.
- F. The "Family Service Plan" is a case services plan completed by a county caseworker jointly with the child, parents, and providers within 60 calendar days of placement for each child receiving services from a county department of social/human services.

- G. The "Individual Child's Plan" ("the Plan" ) is based upon an assessment of the child immediately following placement at the facility. It is developed by the facility for each child and must be consistent with the Family Service Plan for the child.
- H. " Mechanical Restraint " means the use of devices intended to involuntarily restrict the movement or normal functioning of a portion of an individual's body. Mechanical restraint does not include the use of protective devices used for the purpose of providing physical support or prevention of accidental injury.
- I. " Personal Restraint " ("restraint" ) is the physical intervention by a staff member of the facility in an emergency situation to limit, restrict, or control the dangerous behavior of a child by means of physical holding of the child.
- J. "Reasonable" as used in these rules means appropriate and suitable, or not excessive or extreme.
- K. "Religion" where used in these regulations includes traditional religious beliefs and spiritual beliefs such as those of Native Americans.
- L. A "Residential Facility" ("the facility" ) provides 24-hour child care and includes residential child care facilities and specialized group facilities.
- M. A "staff member" of the facility as used in these rules includes a specialized group home parent or a specialized group center or residential child care facility.

#### **7.714.2 ADMISSION POLICY AND PROCEDURES [Rev. eff. 7/2/06]**

- A. Admission of a child shall be in keeping with the stated purpose of the child care facility and shall be limited to those children for whom the facility is qualified by staff, program, equipment, and needs of children already in residence to provide care deemed necessary. Care must be provided in the least restrictive, most appropriate setting in order to meet the child's needs.
- B. Each facility shall have a written admission policy which at a minimum must include:
  - 1. The policies and procedures related to intake.
  - 2. The age range and sex of children accepted for care.
  - 3. The needs, problems, situations or patterns best addressed by the facility's program.
  - 4. Any pre-placement requirements for the child, the parent(s) or guardian, and/or the placing agency.
  - 5. The anticipated criteria, problems, situations, and patterns that would result in the facility requesting removal of a child from placement prior to the planned discharge.
  - 6. The facility's policy concerning self-admission of children, if appropriate, and the application of Section 27-10-103, C.R.S. (Voluntary Application for Mental Health Services) when a child is admitted for mental health treatment.
  - 7. A statement regarding the religious orientation or affiliation of the facility, of the child care program, and of the activities at the facility, if applicable.
  - 8. Opportunities for children's participation in recreational activities religious activities, and community life.

- C. The written description of admission policies and criteria shall be provided to referring agencies and to parents or guardians of any child referred for placement.
- D. The facility shall accept a child into care only after a preliminary assessment/screening of presenting problems in areas such as social, physical health, mental health, psychological concerns, previous physical or sexual abuse, and concerns about previous delinquent, assaultive, or destructive behavior, if appropriate, has been conducted.

- E. The facility shall obtain a current comprehensive intake evaluation, including a social, health, and family history, developmental assessment or mental health evaluation, and a psychological evaluation, if determined to be necessary by the facility. Educational records shall be obtained if appropriate. As much of this information as possible shall be obtained prior to admission, but the total evaluation shall be completed within 14 calendar days after admission. If the facility is unable to obtain this information within these time periods or is totally unable to obtain the information, the facility must document its attempts to obtain the information and reasons for not obtaining the information.

If a child is placed at the facility as an emergency placement, the facility shall obtain at least the following information: name, birth date, if available, and physical description of the child; date and time of the admission; name, address, telephone number and authority of person bringing the child to the facility, and the reason for placement. Any other information that may be available should be recorded at the time of placement or as it becomes available. The date that placement terminates shall also be recorded.

- F. Preparation of the child for admission shall be in a manner consistent with the child's age and ability to participate in the plan and to understand the reason for the placement.
- G. The placement agreement shall be developed with the involvement of the child, the parent(s) or guardian(s) and the representative of the placing agency. Where the involvement of any of these is not feasible or desirable, the reasons for the exclusion shall be recorded by the facility. The placement agreement shall address by reference or attachment at a minimum the following:
  - 1. Discussion of the child's and the parent's or guardian's expectations regarding: family contact and involvement; how family contact and involvement are to occur; the nature and goals of care, including any specialized services or specialized treatment to be provided, the religious orientation and practices of the child and/or family; the anticipated length of stay, planned discharge date, criteria for discharge, and plan for the child following discharge.
  - 2. The policy and procedure to be followed regarding the use of restraint in an emergency situation pursuant to 7.714.53.
  - 3. A delineation of the respective roles and responsibilities of all agencies and persons involved with the child and his/her family.
  - 4. Written authorization for care and treatment of the child.
  - 5. Written authorization to obtain routine medical and dental care for the child and to obtain emergency medical and dental care.
  - 6. The legal status or custody of the child.
  - 7. If a child is placed by a Colorado county department of social/human services, the appropriate State form or contract shall be completed. This form or contract may provide some of the required authorizations.

- H. Within 24 hours of arrival at the facility, a child shall be given an orientation to the facility, consistent with the child's age and ability to participate, which includes at least the following:
1. Tour of the facility and instruction on fire alarm and fire evacuation procedures, escape routes and exits.
  2. The rules/regulations of the facility.
  3. Procedures that will affect the child's behavior, including limiting or restricting a child's rights where allowed, the type of discipline used in the facility, and consequences for certain behaviors.
  4. The complete children's rights and children's grievance procedures as developed by the facility and the name of the client representative.
  5. A form signed by the staff member and the child, if applicable, verifying that the orientation occurred.

### **7.714.3 RELIGION, RIGHTS, AND GRIEVANCE PROCEDURES**

#### **7.714.31 Children's Rights [Rev. eff. 7/2/06]**

- A. The facility shall have written policies and procedures that address and ensure the availability of each of the following core rights for children in residence. These rights may not be restricted or denied by the facility.
1. Every child has the right to enjoy freedom of thought, conscience, cultural and ethnic practice, and religion.
  2. Every child has the right to a reasonable degree of privacy.
  3. Every child has the right to have his or her opinions heard and considered, to the greatest extent possible, when any decisions are being made affecting his/her life.
  4. Every child has the right to receive appropriate and reasonable adult guidance, support and supervision.
  5. Every child has the right to be free from physical abuse or neglect and inhumane treatment. Every child has the right to be protected from all forms of sexual exploitation.
  6. Every child has the right to receive adequate and appropriate medical and mental health and psychiatric care in the least restrictive setting possible, suited to meet individual needs.
  7. Every child has the right to receive adequate and appropriate food, clothing, and housing.
  8. Every child has the right to live in clean, safe surroundings.
  9. Every child has the right to participate in an educational program that will maximize his/her potential in accordance with existing law.
  10. Every child has the right to communicate with "significant others" outside the facility, such as a parent or guardian, caseworker, attorney or guardian ad litem, current therapist, physician, religious advisor, and, if appropriate, probation officer.
  11. No foster child shall be fingerprinted for the purpose of a criminal background check unless

required by law enforcement.

12. A child may be photographed upon admission for identification and administrative purposes of the facility pursuant to Section 19-3-306, C.R.S. Such photographs shall be confidential and shall not be released by the facility except pursuant to court order. No other non-medical photographs or videotaping shall be taken or used without the written consent of the child's parent or legal guardian except in the case of a child abuse or police investigation.
  13. Every child has the right to the same consideration for care and treatment as anyone else regardless of race, color, national origin, religion, age, sex, political affiliation, sexual orientation, financial status or disability.
  14. Every child has the right to be given the names and professional status of the staff members responsible for his/her care.
  15. Every child has the right to receive assistance from the resident representative in filing a grievance and to receive copies of the grievance procedure.
  16. Every child fifteen (15) years of age and older has the right to request his or her own medical records, to see the records at reasonable times, and to be given written reasons if the request is denied.
  17. Every child fifteen (15) years of age and older, who is not in the custody of human services, has the right to accept treatment of his/her own free will and may sign in as a voluntary resident. The child has the right to refuse to sign the consent for voluntary treatment at the time of admission or may take back the consent at a later date pursuant to Section 27-10-103, C.R.S.
- B. The following children's rights may be limited to reasonable periods during the day or restricted according to written policies of the facility to ensure the protection of the children, staff, and program from unreasonable and unnecessary intrusions and disruptions and from health and safety hazards.
1. Every child has the right to have access to letter-writing materials, including postage, and to have staff members of the facility assist him/her if unable to write, prepare, and mail correspondence.
  2. Every child has the right to have access to telephones to both make and receive calls in privacy.
  3. Every child has the right to have convenient opportunities to meet with visitors.
  4. Every child has the right to wear his/her own clothes, keep and use his/her own personal possessions, and keep and be allowed to spend a reasonable sum of his/her own money.
  5. Every child has the right to receive and send sealed correspondence. No incoming or outgoing correspondence shall be opened, delayed, held, or censored by the personnel of the child care facility.
- C. Written policies that restrict or limit a child's rights as listed at 7.714.31, B, must include at a minimum:
1. Plans for how and when telephone and written communications will take place.
  2. Plans for regular visits of the child with relatives, friends, or others interested in his/her

welfare, both within and outside of the facility, unless in the judgment of treatment staff and the placement agency visits would be detrimental to the child and/or his/her family.

3. Plans for extenuating circumstances and emergency situations affecting the child and his/her family.
  4. The requirement that the facility notify the child, if appropriate to the age of the child, and his/her parent(s) or guardian(s) at the time of admission of any policy that would limit or restrict a child's rights. The notification must be communicated in a language or mode of communication the child can understand and, if possible, be signed by the child and his/her parent(s) or guardian(s).
- D. If the facility enforces any restrictions upon the child's rights as listed at 7.714.31, B, the facility must, in compliance with the written policy and procedure of the facility:
1. Inform the child and the child's family and custodian or legal guardian, in a language or mode of communication the child can understand, of the conditions of and reasons for restriction or termination, of his/her rights.
  2. Place a written report summarizing the conditions of and reasons for restriction, denial, or termination of the child's rights in that child's case record or treatment record. Information pertaining to a restriction, denial, or termination of a child's rights contained in the child's treatment or case record must be made available, upon request, to the child or the child's guardian ad litem (GAL).
  3. When a restriction of a child's rights affects another individual, the individual shall be informed, in a language or mode of communication the individual can understand, of the conditions of and reasons for the action.

#### **7.714.32 Children's Grievance Procedure [Rev. eff. 7/2/06]**

- A. The facility must designate a client representative and establish a written grievance procedure that provides adequate due process safeguards, spells out the appeal process and assures that children and parent(s) or guardian(s) are entitled to report any grievance and shall not be subject to any adverse action as a result of filing the grievance.
1. The facility must follow grievance procedures without alteration or interference and must respond to any grievance filed within 72 hours.
  2. This grievance procedure shall be made available to all children as provided for in the resident rights.
  3. If a grievance is filed with the facility, the grievance shall be recorded in the child's record along with the investigation findings and resulting action taken by the facility. Information regarding the grievance must be sent to the individual or agency holding legal custody of the child. A copy of the child's grievance may be sent to the parent with the child's permission.
  4. A list of the resident rights shall be prominently posted in all facilities in areas frequented by children and legal guardians. These rights shall include the grievance procedure, the name, address, and telephone number of their resident representative, as well as a list of agencies where complaints may be filed.
- B. A list of the children's rights and the grievance procedures must be provided and explained to the child and the parent or guardian in a language or manner of communication that they can understand.



#### **7.714.33 Religion [Rev. eff. 7/2/06]**

The facility shall demonstrate consideration for, and sensitivity to, the religious backgrounds of children in care. The facility shall assist a child's involvement in religious activities appropriate to the child's religious background, based upon the needs and interests of the child.

- A. A child in care at the facility shall be allowed and encouraged to celebrate his/her religious holidays.
- B. Opportunity and assistance shall be provided for each child to practice the chosen/preferred religious beliefs and faith of his/her family. If the family has no preference, the individual preference of the child shall be respected. This includes, but is not limited to, making necessary arrangements for attendance of children at the appropriate religious institution or at a study group for religious instruction.
- C. A child may be invited to participate in the religious activities of the facility.
- D. A child shall not be coerced or forced to participate in the religious activities of the facility or to attend religious services.
- E. Prior to placement of the child at the facility, the parent(s), guardian(s), and/or placing agencies must be notified of the practices, philosophy, and religious affiliation of the facility.
- F. Any form of religious intervention used by the facility to control or change a child's behavior, or treat or heal a medical condition, must be approved, in writing, by the legal guardian(s) of the child prior to the use of the intervention.
- G. A facility cannot deny medical care to a child because of the religious beliefs of the facility.
- H. The child's family and/or guardian must be consulted prior to any planned change in religious affiliation made by the child while he/she is in care at the facility.

#### **7.714.4 PROGRAM DESCRIPTION AND INDIVIDUAL CHILD'S PLAN [Rev. eff. 7/2/06]**

- A. The facility shall have a written overall program description for the facility. The written description shall include the following:
  - 1. The title of the person who has overall responsibility for the development, implementation, and coordination of the treatment program.
  - 2. Staff responsibility for planning and implementation of the treatment procedures and techniques.
  - 3. The range of procedures and techniques to be used and the anticipated range or types of behavior or conditions for which such procedures and techniques are to be used, including philosophy of treatment, modes of therapy, treatment modalities, positive behavior intervention, problem management, discipline: restraint, and short term locked confinement where allowed and approved by the department.
  - 4. The facility's responsibility for monitoring the safety of children during treatment.
  - 5. Review procedures for ensuring the appropriateness of the ongoing treatment and placement for each child.
  - 6. Policies and procedures encouraging termination of the treatment procedures at the earliest opportunity in the event of achievement of goals, or when the procedures are proving to

be ineffective or detrimental for a particular child.

7. Policies and procedures on how the facility involves the child and the parent(s) or guardian(s) in the plan for care and treatment of the child and obtains their consent of the plan and any subsequent revisions to the plan.
  8. Policies and procedures on how the facility monitors the ongoing physical safety of a child during treatment or therapy which involves physical contact with the child.
  9. Requirements, where appropriate, for medical examination of a child prior to implementation of a treatment strategy on a regular basis
  10. Provisions for regular and thorough review and analysis of the individualized treatment strategies and the overall treatment orientation of the facility, including provisions for making appropriate adjustments in the treatment strategies and orientation, the recording practices and procedures, and the program activities in accordance with the results of the reviews.
  11. Each facility shall adopt and implement a written policy for continuity of resident care which shall include, at a minimum, the following:
    - a. Ease of resident movement from one element of service to another within the facility.
    - b. Aftercare planning, to be completed 90 calendar days prior to a scheduled discharge, and included with the resident's discharge summary which describes any recommendations for the resident to follow after discharge from the facility.
    - c. Referrals to other agencies.
  12. The placement alternative selected shall be conducive to the optimum restoration of the resident's mental and physical functioning, with due regard for the safety of the resident and those around him/her and the availability of placement alternatives.
- B. A facility shall prohibit all cruel and aversive treatment or therapy including, but not limited to, the following:
1. Any intervention designed to or likely to cause a child physical pain.
  2. Releasing noxious, toxic or unpleasant sprays, mists, or substances in proximity to the child's face.
  3. Any intervention that denies a child sleep, food, water, shelter, access to bathroom facilities, adequate bedding, or appropriate physical comfort
  4. Any intervention or type of treatment that subjects a child to verbal abuse, ridicule, humiliation, or that can be expected to cause excessive emotional trauma.
  5. Interventions that use a device, material, or object that is designed to simultaneously immobilize all four of the child's extremities.
  6. Any treatment intervention that deprives a child of the use of his/her senses, including sight, hearing, touch, taste, or smell.
  7. The use of mechanical restraints, including but not limited to the use of handcuffs, shackles, straight jackets, posey vests, ankle and wrist restraints, craig beds, vail beds, and chest

restraints.

8. Physical restraint, except as described at 7.714.53, and locked seclusion
  9. Use of rebirthing therapy or any therapy technique that may be considered similar to rebirthing therapy as a therapeutic treatment, as defined by Section 12-43-222(1)(t)(IV), C.R.S.
- C. Within seven (7) calendar days of admitting a child in care, a facility shall begin a comprehensive assessment/evaluation of the child.
1. The assessment/evaluation shall be conducted by a planning team. This team shall include persons responsible for implementing the plan on a daily basis and persons who have had direct interaction with and observation of the child.
  2. The planning team shall assess and evaluate the needs and strengths of the child in at least the following areas where information is available:
    - a. Medical, health and dental care, including a health history of the child and family, and if appropriate health information regarding speech therapy, occupational therapy, and physical therapy needs of the child;
    - b. Mental and psychological health, including treatment history;
    - c. Education/vocation;
    - d. Personal/social development;
    - e. Family and community relationships;
    - f. Vocational training, if appropriate;
    - g. Recreation;
    - h. Life skills development;
    - i. Emancipation skills, if appropriate;
    - j. Legal status and history;
    - k. Treatment/placement history;
    - l. Alcohol/substance abuse history.
  3. All direct assessments/evaluations of the child shall be conducted in the child's dominant language or mode of communication, including augmented or facilitated communication, if necessary, and shall take into consideration the child's age, disability, and cultural and religious background.
- D. On the basis of this assessment/evaluation, and within 14 calendar days of admission, a facility shall develop an individual child's plan that is written, time-limited, strength-focused, outcome based, and goal-oriented. The plan must support the Family Services Plan.
1. A facility must provide an opportunity for the following persons to participate in the planning/evaluation process:

- a. The primary caregiver for the child;
- b. The child, unless contraindicated;
- c. His/her parent(s) or guardian(s), unless contraindicated;
- d. Representatives of the placing agency;
- e. School personnel;
- f. Other persons significant in the child's life, such as a GAL, attorney, religious advisor, and therapist.
- g. When any of the above persons do not participate, the facility shall have documentation of its efforts to involve the persons(s). When the involvement of parents(s) or guardian(s) of the child is deemed contraindicated by the agency or individual holding legal custody of the child, the reasons for contraindication shall be documented.

2. The individual plan shall include the following components:

- a. The findings of the assessment/evaluation.
- b. A statement of specific, measurable goals to be achieved or worked toward for the child and his/her family.
- c. Strategy for fostering, maintaining, and enhancing positive family relationships with the child and his/her family, including siblings, or other individuals considered like family, or guardian(s), and including the development of a permanent home for the child.
- d. Strategy for fostering, maintaining and enhancing active community involvement for the child.
- e. Specification of the daily activities intended to achieve the stated goals including, but not limited to, educational, vocational, and recreational activities.
- f. Specification of therapeutic services, specialized services, and strategies for positive behavior intervention that will be provided directly or arranged for, frequency of services, and method for ensuring their proper integration with the child's ongoing program activities.
- g. Long-term and short-term goals and the method to be used for evaluating the child's progress toward meeting the goals.
- h. Goals and preliminary plans for discharge, aftercare, and moving to a less restrictive setting.
- i. Identification of all persons responsible for implementing or coordinating implementation of the plan.
- j. Signature by a representative of the facility, a representative of the placing agency, the child, if indicated, and the child's parent(s) or guardian(s).
- k. Assurance by the facility that the plan and any subsequent revisions are explained to

the child in care and his/her parent(s) or guardian(s) in a language or manner of communication the child and parent(s) or guardian(s) can understand.

- I. Quarterly review of each plan to evaluate the progress which the short-term and long-term goals have been achieved and not achieved. The parties listed in Section 7.714.4, D, 1, shall have an opportunity to participate in the reviews. The plan shall support the Family Service Plan.

- E. If the assessment/evaluation process or the plan requires the services of a specialist, such as a psychiatrist, psychologist, speech therapist, occupational therapist, or physical therapist, the specialist shall be currently certified or licensed according to State law.

#### **7.714.5 SAFETY, DISCIPLINE, AND RESTRAINT**

##### **7.714.51 Building Safety**

###### **7.714.511 Building Site [Rev. eff. 7/2/06]**

- A. The facility must be located in an area that is readily accessible to health resources, public and private utilities, adequate and safe water supplies, sewage disposal, and fire and police protection.
- B. The facility site shall be located in accordance with local zoning department requirements.
- C. The entire premises of the facility are subject to inspection for licensing purposes, including but not limited to the residence where care is to be provided, the grounds surrounding the facility, the basement, the attic (if accessible), any storage buildings, and a garage or carport, if applicable.
- D. If the facility is located in the same building as, or immediately adjacent to, other facilities, or an adult treatment center, or a nursing home, it shall be so arranged that the care and activities of the children residing in the facility are completely separate and independent from the other facility. The facility may not be operated on the premises of a business that might be hazardous to the health, safety, morals, or welfare of children and the operation of the facility.
- E. The facility, including indoor and outdoor space, shall be maintained in a safe condition free from hazards to health and safety.
- F. There shall be outdoor space available to provide some recreation area for children. This area shall be fenced if children younger than five years old are in care, or older children with disabilities require either containment or protection from outside elements such as animals.

###### **7.714.512 Building Maintenance [Rev. eff. 7/2/06]**

- A. Buildings shall be kept in good repair and maintained in a safe, clean, and sanitary condition. Good housekeeping must be observed in all areas at all times. Needed repairs must be identified regularly and corrected immediately.
- B. All areas of the facility available to children's activities including equipment, materials and furnishings shall be of sturdy, safe construction, and free of hazards, such as sharp points or corners, splinters, protruding nails, broken play and recreational equipment.
- C. Closets, attics, basements, cellars, and furnace rooms shall be kept free from accumulation of significant amounts of extraneous materials such as furnishings, newspapers, or magazines that could pose a fire or health hazard.

###### **7.714.513 Fire Safety [Rev. eff. 7/2/06]**

- A. Fire hazards, such as defective electrical appliances and electric cords, dangerous or defective heating equipment or flammable material stored in such a manner as to create a risk of fire shall be corrected or eliminated.
- B. The facility shall contain at least one U.L.-approved fire extinguisher on each floor of the facility that is highly visible, easily accessible, and in working condition, weighing not less than five pounds, that has a rating of 2A, 10BC. This requirement may be waived where more extensive fire-control measures are required by a local fire department.
- C. A smoke detector, in working condition, must be installed on each level of the facility where child care occurs and near sleeping areas.
- D. All heating units, gas or electric, shall be installed and maintained with safety devices to prevent fire, explosions, and other hazards. No gas or electric space heaters, open-flame gas or oil stoves, hot plates, or unvented heaters shall be used in the facility for heating purposes.
- E. Flammables, aerosol paints, insecticides, chemicals, and other dangerous materials shall be locked or stored so they are inaccessible to children and must be stored in areas separate from sleeping or living areas. Flammables shall be stored in an OSHA approved container.
- F. Heating devices such as radiators, registers, fireplaces, and steam and hot water pipes that pose a fire or burn hazard to children shall be screened or otherwise protected.
- G. Flammable material must not be stored near a furnace, hot water heater, or other heating device.
- H. There shall be no candles or other burnable objects permitted in sleeping areas.
- I. Exit doors shall be obvious, clearly identified as an exit, and marked by an approved sign that is clearly visible from any direction of exit access. No lock or fastening to prevent free escape from the inside of any room used by the children shall be permitted except for a Department-approved locked quiet room.
- J. Exit routes shall be kept free of any barriers to free escape including, but not limited to, discarded furniture, furnishings, laundry, and stacks of newspapers or magazines that could interfere with the prompt evacuation of the facility.

**7.714.514 Disaster Drills [Rev. eff. 7/2/06]**

- A. There shall be written procedures for staff and children to follow in case of emergency or disaster. These procedures shall be developed by the facility with the assistance of qualified fire and safety personnel and shall include provisions for staff roles and responsibilities during an emergency, evaluation of the facility, and the assignment of a central meeting place where each individual may be accounted for.
- B. Fire exit drills must be held on each shift on a rotating basis with no less than one (1) shift per quarter so that all occupants are familiar with the drill procedure and their conduct during a drill is a matter of established routine.
- C. Drills must be held at unexpected times and under varying conditions to simulate the conditions of an actual fire.
- D. Drills must emphasize orderly evacuation under proper discipline rather than speed. Running or horseplay shall not be permitted.
- E. Drills must include suitable procedures for ensuring that all persons in the facility actually participate.

- F. A record of fire drills held over the past twelve (12) months must be maintained by the facility on a drill log, including the number of children and staff participating in the drill.
- G. Fire alarm facilities shall be regularly used in the conduct of drills.
- H. The facility shall make special provisions for the evacuation of any physically handicapped children in the facility.
- I. The facility shall take special care to help emotionally disturbed or perceptually handicapped children understand the nature of such drills.
- J. If appropriate to the location of the facility, tornado drills must be held often enough so that all occupants are familiar with the drill procedure and conduct during a drill is a matter of established routine. A record of tornado drills held over the past 12 months must be maintained by the facility.

**7.714.515 General Comfort and Safety [Rev. eff. 7/2/06]**

- A. All hazardous chemicals, tools, and other equipment, including matches, plastic bags, paints, gasoline, medicines, insecticides, and cleaning and laundry materials, shall be inventoried and stored in a secured locked area.
- B. A facility shall not maintain any weapons such as firearms, air rifles, hunting bows, hunting knives, or hunting sting shots on the grounds or within the structure of the facility. A facility shall not permit any staff member or child to be in possession of any firearm on the grounds or within the structures of the facility. Chemical weapons, even when carried by staff members to and from work for protection, shall be locked when present at the facility. Weapons must not be transported in any vehicle in which children are riding. Law enforcement professionals are exempt from the requirements of this section if conditions of their employment require them to carry weapons.
- C. The facility shall be equipped with adequate light, heat, ventilation, and plumbing for safe and comfortable occupancy.
- D. All stairways containing more than four steps shall be equipped with a handrail.
- E. The facility shall have an unblocked, non-mobile landline telephone, and emergency numbers shall be posted near the telephone, including those related to medical care, fire, law enforcement, and poison control where available. Numbers for the agency or person having legal custody of each child shall also be readily available.

**7.714.516 Transportation [Rev. eff. 7/2/06]**

- A. A facility shall ensure that each child is provided with the transportation necessary for implementing the child's individual plan.
- B. A facility shall have means of transporting children in cases of emergency.
- C. Any vehicle used by the facility in transporting children in care, whether such vehicle is operated by a staff member or any other person acting on behalf of the facility, shall be properly licensed, and the vehicle shall be maintained in accordance with Colorado law.
- D. Any staff member or other person acting on behalf of the facility operating a vehicle for purpose of transporting children shall be properly licensed to operate the class of vehicle in accordance with Colorado law.
- E. Children under 21 years of age must be properly fastened into a child restraint system that conforms

to all applicable Federal Motor Vehicle Safety Standards and pursuant to Colorado law.

- F. A facility shall not allow the number of persons in any vehicle used to transport children to exceed the number of available seats in the vehicle.
- G. The vehicle shall be enclosed and provided with door locks, and contain a First Aid kit and fire extinguisher.
- H. A facility shall ascertain the nature of any need or problem of a child which might cause difficulty during transportation, such as seizures or a tendency toward motion sickness. The facility shall communicate this information to the driver of any vehicle transporting children in care.
- I. The facility shall have a written policy concerning under what circumstances a vehicle may be driven by a licensed resident alone or with one resident passenger. Such driving privileges, if granted, shall be a part of the child's individual plan.

**7.714.52 Discipline [Rev. eff. 7/2/06]**

- A. The facility shall have written policies and procedures regarding discipline that must be explained to all children, parent(s), guardian(s), staff, and placing agencies. These policies must include positive responses to a child's appropriate behavior.
- B. Discipline shall be constructive or educational in nature and may include talking with the child about the situation, praise for appropriate behavior, diversion, separation from the problem situation, and withholding privileges.
- C. Basic rights shall not be denied as a disciplinary measure.
- D. Separation when used as discipline must be brief and appropriate to the child's age and circumstances. The child shall always be within hearing of an adult in a safe, clean, well-lighted, well-ventilated room in the facility that contains at least 50 square feet of floor space. No child shall be isolated in a bathroom, closet, attic, pantry, or garage.
- E. Children in care at the facility shall not discipline other residents. This does not prohibit a facility from operating an organized therapeutic self-government program or positive peer culture that is conducted in accordance with the written policies of the facility and these rules, and is directly supervised by a staff member.
- F. A facility shall prohibit all cruel and unusual discipline including, but not limited to, the following:
  - 1. Any type of physical hitting or any type of physical punishment inflicted in any manner upon the body of the child such as spanking, striking, swatting, punching, shaking, biting, hair pulling, roughly handling a child, striking with an inanimate object, or any humiliating or frightening method of discipline to control the actions of any child or group of children.
  - 2. Discipline that is designed to, or likely to, cause physical pain.
  - 3. Physical exercises such as running or walking laps, push-ups, or carrying or stacking heavy rocks, bricks, or lumber when used solely as a means of punishment.
  - 4. Assignment of physically strenuous or harsh work that could result in harm to the child.
  - 5. Requiring or forcing a child to take an uncomfortable position such as squatting or bending, or requiring a child to stay in a position for an extended length of time such as standing with nose to the wall, holding hands over head, or sitting in a cross-legged position on the



floor, or requiring or forcing a child to repeat physical movements when used solely as a means of punishment.

6. Group discipline except in accordance with the facility's written policy and these rules.
7. Verbal abuse or derogatory remarks about the child, his/her family, his/her race; religion, or cultural background.
8. Denial of any essential/basic program service solely for disciplinary purposes.
9. Deprivation of meals or snacks, although scheduled meals or snacks may be provided individually.
10. Denial of visiting or communication privileges with family, clergy, attorney, Guardian Ad Litem (GAL) or caseworker solely as a means of punishment.
11. Releasing noxious, toxic, or otherwise unpleasant sprays, mists, or aerosol substances in proximity to the child's face.
12. Denial of sleep.
13. Requiring the child to remain silent for a period of time inconsistent with the child's age, developmental level, or medical condition.
14. Denial of shelter, clothing or bedding.
15. Withholding of emotional response or stimulation.
16. Discipline associated with toileting, toileting accidents or lapses in toilet training.
17. Sending a child to bed as punishment. This does not prohibit a facility from setting individual bed times for children.
18. Force feeding a child.
19. Isolating a child in a locked room for discipline.
20. Use of physical or mechanical restraint as discipline for a child, including, but not limited to, the use of handcuffs, shackles, straight jackets, posey vests, ankle and wrist restraints, craig beds, vail beds, hospital cribs, and chest restraints.

#### **7.714.53 Personal Restraint [Rev. eff. 7/2/06]**

- A. Personal restraint is an age appropriate physical intervention by a staff member of a facility in an emergency situation to limit, restrict, or control the dangerous behavior of a child by means of physical holding the child. Physical holding of a child is the only method of personal restraint allowed. The use of a mechanical restraint, including, but not limited to, the use of handcuffs, shackles, straight jackets, posey vests, ankle and wrist restraints, craig beds, vail beds, hospital cribs, and chest restraints is prohibited, except as otherwise allowed under Article 27-10, C.R.S. A personal restraint is to be used only during periods of crisis or emergency for the child, when the child is a danger to him/herself and/or others, the child is beyond control, and when all other means to control and de-escalate the crisis or emergency have failed. The restraint shall not impede or inhibit the child's ability to breathe in any manner, including placing excess pressure on the chest or back area. The restraint shall last only as long as is necessary to calm the child, and for the child to be able to follow adult direction, and to not be a threat to self, or others.

- B. If a facility chooses to use personal restraint with the children placed at the facility, the facility shall restrain children only in accordance with the following rules. If a facility does not use personal restraint, the following sections do not apply to the facility.

**7.714.531 Use of Personal Restraint [Rev. eff. 7/2/06]**

- A. Prior to the use of restraint, the facility must have tried all positive and constructive methods of dealing with a child, including but not limited to, physical structuring of the environment, talking with the child, praise for appropriate behavior, assisting a child with the expression of feelings, and de-escalation of the situation.
- B. Restraint may be used in an emergency situation only when positive, constructive, non-physical de-escalation and structuring of the environment have not been effective in controlling or calming the child's behavior.
- C. Personal restraint must never be used as a punitive form of discipline, as a form of treatment or therapy, or as a threat to control or gain compliance of a child's behavior.
- D. A child must be released from a personal restraint within fifteen minutes after the initiation of the restraint, except when precluded for safety reasons.

**7.714.532 Written Personal Restraint Policy [Rev. eff. 7/2/06]**

Each facility choosing to use personal restraint to control a child whose behavior is out of control and a danger to him/herself or others must have a written personal restraint policy that is adopted and implemented by the facility. The written policy must include at a minimum the following information:

- A. The nationally recognized, research-based type of de-escalation and personal restraint to be used.
- B. Which staff members will be approved by the facility to use personal restraint with children in care.
- C. The type of training/certification staff members approved to use restraint will be required to have prior to restraining a child.
- D. The type and number of hours of ongoing training each staff member will be required to take.
- E. What preventive/de-escalation techniques and positive behavioral intervention must be used by staff prior to any personal restraint.
- F. How the facility observes and evaluates the use of personal restraint on a child at the facility.
- G. The type of written documentation the facility maintains of each personal restraint that describes the details of the incident and the staff involvement.
- H. The type of written documentation the facility maintains that describes the debriefing with the child and staff following the restraint.
- I. Evaluation of each personal restraint to determine appropriateness and effectiveness of preventive/de-escalation techniques used and effectiveness and appropriateness of the restraint itself.
- J. The requirement that staff not restrain children in areas of the child care facility that may pose a threat to the health and safety of the child including, but not limited to, soft, pliable surfaces, concrete, asphalt or areas including broken glass.
- K. Notification of the parent/legal guardian and child in advance of the facility's restraint policy and

methodology.

- L. How the facility monitors the physical well-being of the child during and after the restraint, including but not limited to breathing, pulse, color, and signs of choking or respiratory distress.
- M. Emergency procedures, including first aid, that will be used if a child or staff member is seriously injured during a restraint.
- N. The requirement of staff to report to the county department of social services or local law enforcement any injury, bruising, or death that occurs as a result of the restraint pursuant to Colorado state law.
- O. The internal review process of the facility to assess carefully any injuries, bruising, or death.

#### **7.714.533 Personal Restraint Training [Rev. eff. 7/2/06]**

All staff in the facility that will be involved in personal restraint must complete the following:

- A. An original de-escalation/restraint training program that includes a competency test as a part of the training program in compliance with the nationally recognized, research-based type of restraint being used. Successful completion of the competency test is mandatory prior to any staff member being involved in a personal restraint.
- B. Periodic observation of each staff member performing a restraint by a supervisor of the facility who has been trained in restraint.
- C. If a supervisor of the facility determines a staff member did not correctly perform a personal restraint, the staff member must be immediately retrained or be restricted from performing further restraints until retraining can occur.
- D. Regular training at least every six months for each staff member involved in restraint to review and refresh skills involved in positive behavior intervention, de-escalation, and personal restraint.

#### **7.714.534 Authorization for Personal Restraint [Rev. eff. 7/2/06]**

- A. At the time of admission, the person or agency holding legal custody of the child shall be notified and must give written consent for the child to be restrained in conjunction with facility policy. No child shall be restrained without the specific written permission of the person or agency holding legal custody of the child.
- B. At the time of admission to the facility, each child shall be told, in a language or manner of communication understandable to him/her, of the purpose of restraint, the restraint model/method, used and the type of behavior which might result in the child being restrained.

#### **7.714.535 Charting Restraint Incidents [Rev. eff. 7/2/06]**

Each personal restraint incident shall be recorded. The following information must be included:

- A. The name of the child, date and time of day, staff members involved, their position at the facility and their involvement in the personal restraint, and how long the restraint lasted.
- B. The precipitating incidents) and the child's behavior before the restraint occurred.
- C. What specific actions were taken to de-escalate the situation and control, calm, or contain the child and the effect of these de-escalating actions upon the child.

- D. A description of the restraint including the child's physical, emotional and behavioral condition during the restraint.
- E. A description of the debriefing and evaluation with the child and with the staff.
- F. The child's physical condition prior to and following the restraint.
- G. The child's emotional/behavioral condition prior to and following the restraint.

**7.714.536 Review of Use of Restraint [Rev. eff. 7/2/06]**

- A. Records of each personal restraint shall be reviewed by a supervisor of the facility within 24 hours of each restraint.
- B. According to the policies and procedures of the facility, the entire child's individual plan must be reviewed if it appears that the child is being physically restrained an excessive number of times, frequently in a short period of time, or frequently by the same staff member.
- C. If any particular de-escalation technique appears to be causing an escalation in the behavior of a child or a group of children, the use of the technique shall be evaluated for its effectiveness. De-escalation techniques that are not effective or are counter-productive must be terminated at the earliest opportunity.
- D. If either the child or a staff member was seriously injured or died during a restraint, a thorough review of the restraint and injuries must be instituted immediately. Based on the findings of the review, the staff members involved in the restraint must be retrained or corrective personnel action must be taken.
- E. If a staff member appears to be involved in a larger number of physical restraints than other staff members and is not a part of a specially trained team, or is unsuccessful at using de-escalation effectively, the facility must conduct a thorough review of the staff member's interactions with children, prior restraint training, and need for further training as required by facility policies.

**7.714.6 EDUCATIONAL/VOCATIONAL PROGRAMS [Rev. eff. 7/2/06]**

- A. Educational/vocational programs shall be developed and provided for all school-age children who are residents of the facility in accordance with the individual child's plan, the Public School Finance Act and as required by the Exceptional Children's Educational Act and Rules and Regulations.
  - 1. Children shall attend educational/vocational programs in the most appropriate and least restrictive educational setting for the child, including, but not limited to, attending regular classes conducted in accredited elementary, middle, and secondary schools within the community.
  - 2. Children attending school shall be permitted to participate in school extracurricular activities to the extent of their interests and abilities and in accordance with each individual child's plan.
  - 3. The facility shall develop assurances that the educational/vocational program is an integral part of the total plan. Such assurances shall include procedures for information sharing, joint planning, and follow-through.
- B. In order to ensure that all students who may have disabilities are provided an appropriate education, the facility shall ensure that adequate "child find" procedures are utilized. Such procedures shall be developed cooperatively with local education agencies (LEA) in accordance with

Exceptional Children's Educational Act rules and regulations and LEA procedures. Child find includes a process for screening, referring, assessing and staffing students suspected of having a disabling condition.

- C. The facility that operates its own educational program shall provide adequate space, staff, equipment and educational materials as required in Exceptional Children's Educational Act Rules and Regulations.
- D. School records shall be transmitted according to State law, pursuant to Section 24-72-204, C.R.S., and the Individuals with Disabilities Education Act (IDEA).

#### **7.714.7 COMMUNITY PARTICIPATION [Rev. eff. 7/2/06]**

Participation in community activities shall be encouraged, supported, and a vital part of each child's life and choice, and shall be in accordance with each individual child's plan.

- A. The facility shall reflect consideration for, and sensitivity to, the racial, cultural, ethnic and/or religious backgrounds of children in care. The facility shall involve a child in cultural and/or ethnic activities appropriate to his/her cultural and/or ethnic background.
- B. The facility shall utilize available services, facilities, and activity programs of the community, and children shall be given opportunities to participate as individuals or as a group in agency-sponsored recreational and cultural programs such as provided by YMCA, YWCA, Scouting organizations, schools, and churches or other religious institutions.
- C. Children shall be provided work opportunities according to the established policy of the facility and the age of the child, and shall have opportunities to experience the use and value of money by making purchases for items according to their own choice.
  - 1. Money earned, received as a gift, or received as allowance by a child in care shall be deemed to be that child's personal property. The facility shall maintain a written record of all monies earned or given to a child.
  - 2. Limitations may be placed on the amount of money a child may possess or have access to when such limitations are considered to be in the child's best interests.
  - 3. The facility may deduct reasonable sums from a child's allowance as restitution for damages done by the child. Restitution must be negotiated with the child and based on the child's ability to pay. The facility may deduct no more than half of what a child earns or was given during a week. A written record of damages and any restitution paid by a child must be maintained by the facility.
- D. Chores at the facility are considered part of the participatory responsibility of living together. They shall provide constructive experiences in accordance with the age and ability of the child and shall not substitute for the work of staff.
- E. All chores shall be scheduled so as not to conflict with other essential scheduled activities.
- F. The facility shall comply with all child labor laws and regulations in making work assignments.
- G. Paid or voluntary work assignments outside of the facility shall be approved by the administrator of the facility, a staff member, or the parent(s) or guardian(s) of the child, who shall know the employer, the specific type of work, and the conditions of employment.
- H. A child shall not be exploited in any manner. A child may not participate in solicitation on behalf of the

facility for a fund- raising activity without the written permission of the parent(s) or guardian(s) for each specific activity, and the child must be willing to participate in the activity.

#### **7.714.8 PERSONAL CARE OF THE CHILD**

##### **7.714.81 Medical and Health Services [Rev. eff. 7/2/06]**

- A. The facility shall ensure the availability of a comprehensive program of preventive, routine, and emergency medical and dental care for each child in care. Every reasonable effort shall be made to obtain routine and corrective dental care. The facility shall have a written plan for providing such care. This plan shall include at a minimum:
1. Assignment of one person to be responsible for the coordination of medical care for the children residing in the facility.
  2. Ongoing appraisal of the general health of each child, including immunizations, in accordance with state law and regulations.
  3. Procedures for obtaining diagnostic services, emergency care, including the availability of a physician or emergency medical facility on a 24-hour, seven-day-a-week basis, corrective care, recuperative care, and immunization updates.
  4. Provision of health education, which includes sex education, and birth control information and education, age appropriate to the child.
  5. Provision that any medical treatment administered will be explained to the child in a language or manner of communication understandable to him/her.
  6. The provision of dental care by a Colorado-licensed dentist, who is available to the facility.
  7. Procedure for obtaining the written authorization from the child's legal guardian or custodian prior to any new psychotropic medication being dispensed.
  8. Procedures for dispensing medication, storage of medication, documentation of administration of all medication, disposing of medications when not needed or no longer in use, and notification to a primary physician in cases of medication errors and/or drug reactions.
- B. A general medical examination for each child must be completed or scheduled with a physician, physician's assistant or a nurse practitioner prior to or within fourteen (14) calendar days following admission. A statement from the examiner shall be retained in the child's file. This exam shall include the following:
1. An examination for physical injury and disease.
  2. Vision and hearing screening.
  3. A current assessment of the child's health, including immunizations.
- C. Whenever indicated, a child shall be referred to an appropriate specialist for either further assessment or treatment.
- D. Subsequent physical and other examinations shall be done annually or as directed, in writing, by the physician or other qualified health professional.
- E. Dental examinations for all children three years of age or older, or at a younger age if recommended

by a physician or dentist, must have been completed within four months prior to placement or within eight (8) weeks following placement. The facility or governing body shall ensure that each child receives a dental examination every six months or as required in writing by a dentist.

- F. At all times there shall be first aid supplies readily available at the facility and at least one (1) person present at the facility and supervising the children for every 20 children present, who is certified in First Aid or the equivalent and CPR for all ages of children in care.
- G. The facility, in conjunction with the parent(s) or guardian(s), shall make every effort to ensure that a child needing corrective devices such as glasses, hearing aids, etc., is provided with the necessary equipment.
- H. The facility has the right to request a statement regarding the child's general health from a medical examiner. In a potentially life- threatening situation, the facility shall refer the child's care to the appropriate medical and legal authority. If a child wishes an exemption from a medical examination or medical treatment due to religious beliefs, the child shall submit a written statement signed by his/her parent(s) or guardian(s) which states the reasons for such an exemption. The facility has the right to refuse admission to a child whose parent(s) or guardian(s) refuses medical treatment or examination based upon religious convictions.
- I. The facility shall regularly maintain and update a child's Human Services Health Passport, or a document containing all the information listed in the Health Passport, for children placed by a county department of social services. If received, the original of the document shall be given to the caseworker upon the child's discharge so that it can be given to the facility where the child is being admitted or to the child's parent(s), guardian(s), or family member(s) with whom the child is placed.
- J. Medications shall be administered and stored in the following manner:
  - 1. When a child first comes into care, the facility shall ascertain all medication the child is currently taking.
  - 2. All medication must be kept in a clean, locked storage area inaccessible to children and stored according to pharmacy instructions.
  - 3. All prescriptive medications shall be administered only upon the written prescription of a physician or nurse practitioner. The facility shall also obtain written authorization from the prescribing physician or nurse practitioner to administer any non-prescriptive medication, including dietary supplements.
  - 4. The facility shall have a written medication schedule for each child to whom medication is prescribed, a copy of which shall be available to staff.
  - 5. In an emergency situation, non-prescriptive medication may be administered on the verbal authorization of a physician. Written confirmation must then be obtained for the verbal authorization.
  - 6. The facility shall maintain for each child a cumulative record of all medication, both prescriptive and non-prescriptive, dispensed to that child including:
    - a. The name of the child.
    - b. The name and dosage of medication.
    - c. The time and date the medication was dispensed.

- d. The name of the person administering the medication.
- 7. The facility shall document the following information as it relates to handling and dispensing medication:
  - a. Documentation of:
    - 1) all medication errors; and,
    - 2) drug reactions.
  - b. Documentation of all discontinued medication and disposing of medications.
- 8. Only staff members trained and authorized by State statute shall administer medications. All direct care staff shall be trained in the recognition of common side effects of medication.
- K. In all instances where a new prescription medication is to be ordered as a part of a treatment program, the following information shall be provided to the client and his/her custodian or legal guardian:
  - 1. The name of the medication being prescribed;
  - 2. The proper use of the medication;
  - 3. The reasons for ordering the medication for this client;
  - 4. A description of the benefits expected;
  - 5. The common side effects, if any;
  - 6. The major risks, if any;
  - 7. The probable consequences of not taking the medication explained in a language or mode of communication that is easily understood by the child, his/her family and/or legal guardian.
- L. No involuntary medications may be administered.
- M. The facility shall have policy and procedures for documenting that the required information was given to the child before the child took the medication. When information is given to the child, the documentation shall include an assessment regarding whether the child understood.
- N. The child may refuse to take his/her medication at any time. The facility must document the refusal in the medication log.
- O. No child shall be threatened with or experience adverse behavioral consequences by staff action due to refusal to take medication.

**7.714.82 Food and Nutrition [Rev. eff. 7/2/06]**

- A. The facility shall provide nutritious foods in the variety and amounts as appropriate for the age, appetite, and activity of each child in care.
- B. At least three nourishing, wholesome, well-balanced meals a day shall be offered at regular intervals except when children receive their morning and/or noon meal(s) at school. No more than fourteen (14) hours shall elapse between the evening and morning meals. Nourishing snacks shall be part of the daily food provided.



- C. Children shall be encouraged to eat a variety of the food served but shall not be subjected to undue coercion, including forced feeding, or punished for refusal to eat.
- D. All food shall be from sources approved or considered satisfactory by the local health department.
- E. There shall be a record made of the special diets prescribed and prepared for a child.
- F. Children must not be given foods that are contrary to their religious beliefs, or those of their family, or are known to cause an allergic reaction or a health hazard.
- G. Water shall be readily accessible to children.

**7.714.83 Personal Hygiene and Daily Routine [Rev. eff. 7/2/06]**

- A. The facility shall establish procedures to ensure that children receive training in good habits of personal care, hygiene, and grooming appropriate to their age, gender, race and culture.
  - 1. There shall be supervision by staff to provide for proper grooming and physical cleanliness of the children.
  - 2. The facility shall ensure that children are provided with necessary and appropriately maintained toiletry items, individual towels and washcloths, toothbrush, toothpaste, comb, and shampoo.
- B. The facility shall have a plan of basic daily routines for children in care.
  - 1. Daily routines shall not be allowed to conflict with the implementation of a child's plan.
  - 2. Daily routines shall be established for mealtimes, waking, and bedtimes.
  - 3. Opportunity for physical exercise shall be planned for each child.

**7.714.84 Clothing and Personal Belongings [Rev. eff. 7/2/06]**

- A. The facility shall allow a child in care to bring his/her personal belongings to the program, as defined by the facility policy, and to acquire belongings of his/her own in accordance with the child's plan. However, the facility shall, as necessary, limit or supervise the use of these items while the child is in care. Where extraordinary limitations are imposed, the child shall be informed of the reasons, in a language or manner of communication the child can understand. The decision and reasons shall be recorded in the child's case record. Provisions shall be made for the protection of the child's property.
- B. The facility shall ensure that each child in care has adequate clean, proper-fitting, attractive, and seasonable clothing as required for health, comfort, and physical well-being and as appropriate to age, gender, individual needs, culture, and ethnicity.
  - 1. Each child's clothing shall be distinguished as his/her own in accordance with the facility's policies.
  - 2. A child's clothing shall be kept clean and in good repair. The child shall be involved, as appropriate, in the care and maintenance of his/her clothing. As appropriate, laundering, ironing, and sewing facilities shall be accessible to the child.
- C. The facility shall ensure that discharge plans make provisions for clothing needs at time of discharge. The wardrobe for each child shall go with him/her at time of discharge.

## **7.714.9 PERSONNEL/POLICY REQUIREMENTS**

### **7.714.91 General Requirements for All Staff [Rev. eff. 7/2/06]**

- A. The facility shall provide adequate numbers of staff to assure the health and safety and the proper care and treatment of the children in care.
- B. All staff in the facility shall demonstrate an interest in, and a knowledge of, children and a concern for their proper care and well-being.
- C. The facility shall have written screening procedures and make reasonable efforts to evaluate the overall emotional health and stability of each applicant and/or staff member. Procedures should include exploring for any history of child battering, child abuse, child molestation, child neglect, or previous criminal convictions.
- D. A facility shall not hire or continue to employ any person whose health, educational achievement, or emotional or psychological makeup impairs his/her ability to properly protect the health and safety of the children in care, or who could endanger the physical or psychological well-being of the children.
- E. A staff member who, upon examination or as a result of tests, shows indication of a physical condition which could be hazardous to a child, other staff, or self, or which would prevent performance of duties, shall not be assigned or returned to his/her position until the condition has cleared to the satisfaction of the examining physician or nurse practitioner.

### **7.714.92 Personnel Policy, Orientation, and Training [Rev. eff. 7/2/06]**

- A. The facility shall have a comprehensive written plan for the recruitment, hiring or certification, orientation, ongoing training, and professional development of staff.
  - 1. The facility shall have an introductory training and orientation program for all staff. This program shall include orientation to emergency and safety procedures and the general and specific duties and responsibilities of the job.
  - 2. The facility shall maintain written documentation of specific in-service training held, staff participating in the training, the hours involved, and/or other on-going training activities in which staff were involved. Activities related to supervision of the staff members' routine tasks shall not be considered training activities for the purpose of this requirement.
- B. The facility shall document that staff receive appropriate training in the following areas:
  - 1. The facility's emergency and safety procedures, including but not limited to fire evacuation drills and disaster drills, on at least a semiannual basis.
  - 2. The principles and practices of child care, including developmentally appropriate practices.
  - 3. The facility's and, where appropriate, certifying authority's administrative procedures and overall program goals.
  - 4. Acceptable behavior management techniques, including appropriate discipline and restraint of children in accordance with facility policies and these rules, including the ability to recognize and respond to signs of physical distress in children who are restrained.
  - 5. Techniques to identify staff and resident behaviors, events, and environmental factors that may trigger emergency safety situations.

6. The use of nonphysical intervention skills, such as de-escalation, mediation, conflict resolution, active listening, and verbal and observational methods to prevent emergency safety situations.
7. Appropriate professional boundaries (both physical and emotional) between staff and children while in placement at the facility and after discharge.
8. Positive and constructive methods of dealing with the child including but not limited to physical structuring of the environment and de-escalation of crisis situations.
9. Annual review of these regulations by all appropriate staff members of the facility.
10. All staff must have a minimum of twenty (20) clock-hours of on-going job specific training a year. Training may include areas listed above.
11. Individuals that are qualified by education, training, and experience must provide staff training.
12. Staff training must include training exercises in which staff members successfully demonstrate in practice the techniques which they have learned for managing emergency safety intervention.
13. Staff must demonstrate competencies on non-physical intervention skills and restraint on a semiannual basis.
14. The facility must document in the staff personnel record that the training and demonstration of competency were successfully completed. Documentation must include the date training was completed and the name of persons certifying the completion of training.

#### **7.714.93 Records and Reports**

##### **7.714.931 Confidentiality [Rev. eff. 7/2/06]**

- A. The facility shall have a policy as to the maintenance, storage and confidentiality of records.
- B. Records shall be the property of the facility and shall be protected against loss, tampering, or unauthorized use.
- C. Facts learned about children and their families shall be kept confidential, with the following exceptions:
  1. In medical emergencies, and then only when the assistance and/or expertise is required of that unauthorized person; or
  2. To the child, his/her parent(s) or guardian(s) and their respective legal counsel(s), a court having jurisdiction over the child, or an authorized public official, or licensing representative in performance of his/her mandated duties; or
  3. If the parent(s) or guardian(s) has given voluntary, written consent.
- D. School records shall be transmitted according to State law, pursuant to Section 24-72-204, C.R.S., and the Individuals with Disabilities Education Act.
- E. Medical records shall be kept in a secure location at the facility and only be released in accordance with the Health Insurance Portability and Accountability Act (HIPAA).

- F. Any information concerning observed behavior which reasonably appears to constitute a criminal offense committed on the premises of a facility or any criminal offense committed against any person while performing or receiving services is not considered privileged or confidential.
- G. All researchers conducting clinical research must sign an oath of confidentiality. All information identifying individual children by name, address, telephone number and/or social security number collected for research purposes, shall not be disclosed.
- H. When names are deleted and other identifying information is disguised or deleted, material from case records may be used for teaching purposes, development of the governing bodies' understanding and knowledge of the facilities' services or similar educational purposes.
- I. Information regarding treatment for alcohol or drug abuse may be released only in compliance with the Federal Regulations on Confidentiality of Alcohol and Drug Abuse Resident Records, 42 CFR, Part 2. No amendments or later editions incorporated.

**7.714.932 Records [Rev. eff. 7/2/06]**

- A. The facility shall maintain an organized, legible, chronological, current record for each child in care as required for the licensing or certification of the facility in accordance with the rules regulating the facility. The record shall be separated into discrete sections addressing medical, education, clinical, milieu, and fee for service therapy.
- B. Records for children shall be retained for at least three years. Retention of records for a longer period may be desirable when they reflect an accident, injury or other unusual circumstance.
- C. A record of admission shall be completed for each child in care prior to or at the time of placement. The admission record shall be maintained at the facility where the child resides and shall contain:
  - 1. Child's legal name, date and place of birth (verified by a birth certificate when possible), gender, race, religious preferences of parent(s) or child, date and reason for placement.
  - 2. Child's address and telephone number, parent(s) or guardian(s) address and telephone number if different from the child.
  - 3. Name, address, day and nighttime telephone number of individual or agency placing the child with the name of individual arranging the placement.
  - 4. Any documents pertaining to the child's legal status such as court orders, including the appointment of a Guardian Ad Litem, legal guardianship, custody agreements, or the termination of parental rights.
  - 5. A copy of the placement agreement pursuant to 7.714.2, G.
  - 6. Health records including a health history, chronic medical problems of the child, illnesses the child has had during the last six months and a complete list of all medications the child is taking.
  - 7. Current medical and dental reports, accident, injury, or illness reports, record of medication administered and necessary medical care provided to the child while in placement. Psychiatric and psychological reports, when available.
  - 8. Copies of educational records and reports of school work, including scholastic performance, certificates of achievement or award, and extracurricular interests.

9. The Child's Individual Plan (CIP) and Family Service Plan (FSP) when developed or ITP for committed youth, a summary of the periodic evaluations of the child's progress and resultant changes in the CIP, FSP or ITP.
  10. Summary recording of significant contacts with parent(s), guardian(s) and other involved agencies.
  11. Documentation of all transfers and reasons for transfers within the authorized facility.
- D. Within five (5) business days of when a child is removed from placement, the facility shall complete and send to the placing agency a summary of the child's discharge from the facility which includes at a minimum:
1. The date of the discharge of the child from the facility.
  2. Where the child was placed following discharge.
  3. A summary of the services provided to the child during care.
  4. Goals met/not met during treatment.
  5. The treatment goals and assessed needs which remain to be met and alternate service possibilities which might meet those goals and needs.
  6. A statement of an aftercare plan and identification of who is responsible for follow-up services and aftercare.
  7. If the discharge was planned or unplanned.
  8. The circumstances which led to an unplanned discharge.
- F. Copies of a child's file, including discharge information but excluding all medical information covered by HIPAA, shall be provided to parent(s) or guardian(s) upon request or to others by written consent pursuant to Section 7.714.931.
- G. A copy of all policies and dated revisions developed by the facility shall be maintained for at least three years.

**7.714.933 Required Notification [Rev. eff. 7/2/06]**

- A. The facility shall immediately notify the child's parent(s), guardian(s), and/or the responsible agency of any serious illness or serious injury resulting in medical treatment away from the facility, hospitalization or death involving a child in care.
- B. The facility shall notify the parent(s), guardian(s), or placing authority as soon as possible upon discovery that a child has run away.
- C. Critical incidents shall be reported as outlined in Section 7.701.52.
- D. A report about a death must include:
  1. The child's name, birth date, address, and telephone number.
  2. The names of the child's parent(s) or guardian(s) and their address and telephone number if different from that of the child.

3. Date of the fatality.
  4. Brief description of the incident or illness leading to the death.
  5. Names and addresses of witnesses or persons who were with the child at the time of death.
  6. Name and address of police department or authority to whom the report was made.
- E. Any change in the status of the facility that would affect care of children shall be immediately reported to the licensing agency.
- F. The facility must immediately notify the Department of any court order or physician's order that violates these regulations.
- G. The facility must notify the parent(s), guardian(s), or placing authority regularly of the issues related to the care of the child including use of time out rooms, discipline, treatment, and restriction of rights.

## **7.715 STANDARDS FOR HOMELESS YOUTH SHELTERS**

### **7.715.1 INTRODUCTION**

All rules in Section 7.715 will be known and hereinafter referred to as the Standards for Homeless Youth Shelters.

#### **7.715.11 Policy of the Colorado Department of Human Services**

It is the policy of the Colorado Department of Human Services ("the Department" ) to promote the provision of safe and adequate care of youth in an environment designed to meet the physical, emotional, cognitive and social needs of the youth at those times in the life of such youth when the youth's family of origin is unable or unwilling to provide adequate care. It is also the policy of the Department to require care providers to meet standards and conditions for the well being and protection of the youth in their care. In furtherance of the foregoing policy considerations, the proper enforcement of these rules requires thorough and ongoing appraisal of the youth care shelter where care is provided, the staff members providing the care, and the nature and quality of the care provided.

#### **7.715.12 Definitions**

- A. A **homeless youth shelter** ("the shelter" ) means a facility that, in addition to other services it may provide, provides services and temporary shelter for a period of three days or more to homeless youth.
- B. A **homeless youth** ("youth" ) means a youth who is at least 15 years of age but is less than 18 years of age and meets the statutory definition of a homeless youth pursuant to Section 26-5.7-102 (2), C.R.S.
- C. A **staff member** of the shelter as used in these rules includes staff that work time-limited work shifts and do not live at the shelter on a permanent basis.
- D. **Religion** when used in these regulations includes traditional religious beliefs and spiritual beliefs such as those of Native Americans.

### **7.715.2 MANAGEMENT REQUIREMENTS**

#### **7.715.21 Governing Body**

- A. The **governing body** is the individual, partnership, corporation or association in whom the ultimate authority and legal responsibility is vested for the conduct of the shelter.
- B. When the governing body does not include a board of directors, there shall be an advisory committee of at least two other individuals who act in an advisory capacity to the governing body. The names of the advisory committee members shall be disclosed to the Department. The advisory committee shall meet at regularly- stated intervals.
- C. Minutes of the advisory committee or the board of directors shall be maintained. The minutes shall be available to the Department upon request, except that the minutes containing confidential personnel information need not be shared with the Department.
- D. The functions of the governing body shall include:
  - 1. The appointment of an administrator who shall be responsible, according to established performance criteria, to the governing body, and shall delegate to him/her the executive authority and responsibility for the administration of the shelter according to its defined purpose.
  - 2. The formulation and regularly-planned review of policies and procedures to be followed by the shelter.
  - 3. The provision of necessary facilities, adequate financing, qualified personnel, services, and program functions for the welfare and safety of youth in accordance with these standards.

#### **7.715.22 Fiscal Management**

- A. A shelter shall demonstrate that it is financially sound and manages its financial affairs prudently. All funds disbursed by the shelter shall be expended in accordance with the program objectives as specified by the governing body.
- B. A shelter shall demonstrate fiscal accountability through regular recording of its finances.

#### **7.715.23 Insurance**

- A. Every shelter shall carry public liability insurance. The applicant or licensee shall submit the amount of the insurance and the name and the address of the insurance agency providing the insurance for the shelter. Information about the insurance should be maintained at the shelter.
- B. Facilities operating their own transportation vehicles shall carry insurance in compliance with the minimum limits as required by the Colorado Revised Statutes.
- C. The shelter shall carry workman's compensation and unemployment insurance as required by law.

### **7.715.3 HUMAN RESOURCES**

#### **7.715.31 Administrative Staff**

- A. Administrator

The on-site administrator of a shelter shall be qualified as follows:

- 1. The administrator shall have received a bachelor's degree from an accredited college or university and have three years of verified experience in the human services field, two of which were in a supervisory or administrative position; or

The administrator shall have received a master's degree and have two years of verified experience in the human services field, one of which was in a supervisory or administrative position.

2. The administrator shall assume the following duties:

- a. Overall direction and responsibility for the youth, program, shelter, and fiscal management.
- b. Overall direction and responsibility for supervision of adequate staff.
- c. The selection and training of a capable staff member who can assume responsibility for management of the shelter in the administrator's absence.
- d. The establishment of relationships and contact maintenance with allied agencies, services, and resources within the community.

B. Assistant or Acting Administrator

1. In each youth care shelter, there shall be a specifically designated staff member, age 21 or over, capable of acting as a substitute for the administrator during his/her absence. The duties and responsibilities of the substitute administrator shall be clearly defined in order to avoid confusion and conflict among other staff and youth.
2. If the administrator is regularly absent from the shelter more than 50 percent of his/her working hours, an assistant administrator shall be appointed who meets the same qualifications as the administrator found at Section 7.715.31, A.

C. Administrative Coverage

1. The Department shall be notified in writing when a possible change in administrator is anticipated or at the time there is a change in administrator. Documents verifying the qualifications of the acting/interim or new administrator, including official transcripts and documents verifying work experience, shall be submitted to the Department.
2. The administrator or the staff member to whom the administrator has delegated responsibility shall be available at all times.

**7.715.32 Youth Care Staff**

- A. Each youth care staff shall be at least 21 years of age and have completed two years of college education. A high school diploma or equivalent and one year's experience in the human services field may be substituted for the required college.
- B. Each peer counselor shall be at least 17 years old and shall work directly under the supervision of a youth care staff in activities specified by the youth care staff or with the approval of the shelter director.
- C. Relief staff shall have the same qualifications as regularly assigned youth care staff.
- D. There shall be one staff member that has basic knowledge and understanding of nutrition, food purchasing, menu planning, food handling, preparation, and storage.

**7.715.33 Youth Care Staff-to-Youth Ratios**



- A. There shall be a minimum of one (1) adult qualified as a youth care staff on duty and one (1) adult on call who can be summoned at all times when there is one youth or more at the shelter.
- B. At night there shall be at least one awake staff person within each physically separate building, and within hearing of youth, and a second person who can be immediately summoned in case of emergency.
- C. The ratio of youth care staff to youth in care shall be dependent on the needs of the youth but there shall always be at least 2 staff persons present when youth are present. The ratio of such staff shall not be less than the following schedule except when transporting youth in vehicles (see Section 7.715.87):

Youth Care Staff-to-Youth Ratios  
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#### **7.715.34 Volunteers and Students**

- A. If volunteers or students are used by a shelter, the administration shall define specifically the services to be given by that individual.
- B. Volunteers and students who are assigned to work directly with the youth shall:
  - 1. Be subject to reference checks similar to those performed for employment applicants.
  - 2. Be in good general health. The shelter has the right to contact the individual's physician.
- C. Volunteers and students shall be:
  - 1. Directly supervised by a paid staff member.
  - 2. Oriented and trained in the philosophy of the shelter, confidential nature of their work, and the specific job which they are to do, prior to assignment.

#### **7.715.35 Medical and Health Staff**

A shelter shall have a primary physician or Family Nurse Practitioner (FNP) licensed in Colorado, available to establish and maintain the health and medical plan and procedures of the shelter. This person must be present on-site at least weekly. All medical staff, whether employed by the shelter, or whether their services are purchased or volunteered, shall be licensed and responsible to the primary physician or FNP for the medical aspects of their job.

#### **7.715.36 Case Management Staff and Other Professional Staff**

- A. Case management shall be provided by:
  - 1. A qualified professional having a master's degree in social work, psychology, or child development from an accredited college or university. This professional shall have two years of treatment-oriented experience, or
  - 2. A designated member of the staff, who shall have a bachelor's degree from an accredited college or university with a major in behavioral science, human services or related fields, and three years experience in working with youth, or a designated member of the staff, who shall have at least five years verified full-time experience working with homeless or runaway youth; and for whom there is an effective arrangement for consultation from a qualified professional as described above.

3. The qualified professional, as specified in Section 7.715.36, A, 1, may be a full-time or part-time employee of the shelter, a staff member of a recognized agency, or an individual with which the shelter has a contract to provide the necessary services and/or consultation.
  4. The ratio of case management staff to youth shall be dependent on the type of shelter and the needs of the youth therein, but there shall be at least one full-time case management staff member for every twenty (20) youth, or a part-time staff member assigned for a fraction thereof.
- B. The case management staff shall be responsible for providing case management services as stated at Section 7.715.42, B.
- C. Youth in need of specific individual therapy shall be referred to an appropriate treatment provider.

#### **7.715.37 General Requirements for All Staff**

- A. The shelter shall provide adequate numbers of staff to assure the health and safety and the proper care and treatment of the youth in care.
- B. All staff in the shelter shall demonstrate an interest in, and a knowledge of, youth and a concern for their proper care and well-being.
- C. The shelter shall have written screening procedures and make reasonable efforts to evaluate the overall emotional health and stability of each applicant and/or staff member. Procedures should include exploring for any history of youth battering, youth abuse, youth molestation, youth neglect, or previous criminal convictions.
- D. Each staff member, including part-time staff and substitute staff, shall have on file at the shelter verification of tuberculin status. If the staff member has a certificate of previous negative testing, the testing does not need to be repeated. If there is no certificate, the testing needs to be completed prior to employment or certification.
- E. A staff member who, upon examination or as a result of tests, shows indication of a physical condition which could be hazardous to a youth, other staff, or self, or which would prevent performance of duties, shall not be assigned or returned to his/her position until the condition has cleared to the satisfaction of the examining physician or nurse practitioner.

#### **7.715.38 Personnel Policy, Orientation, and Training**

- A. The shelter shall have a comprehensive written plan for the recruitment, hiring or certification, orientation, ongoing training, and professional development of staff.
1. The shelter shall have an introductory training and orientation program for all staff. This program shall include orientation to emergency and safety procedures and the general and specific duties and responsibilities of the job.
  2. The shelter shall maintain written documentation of specific in-service training held, staff participating, the hours involved, and/or other on-going training activities in which staff were involved. Activities related to supervision of the staff members' routine tasks shall not be considered training activities for the purpose of this requirement.
- B. The shelter shall document that all staff receive appropriate training in the following areas:
1. The shelter's emergency and safety procedures, including but not limited to fire evacuation drills, tornado drills, where appropriate, and flood evacuation drills, where appropriate, on

at least a semiannual basis.

2. Universal precautions regarding safe work practices to prevent exposure to blood and bodily fluids.
3. The principles and practices of working with youth.
4. The shelter's administrative procedures and overall program goals.
5. Acceptable behavior management techniques, including appropriate discipline in accordance with shelter policies and these rules.
6. Appropriate professional boundaries (both physical and emotional) between staff and youth while in placement at the shelter and after discharge.
7. Positive and constructive methods of dealing with the youth including but not limited to physical structuring of the environment and de-escalation of crisis situations.
8. Annual review of these regulations by all appropriate staff members of the shelter.
9. All staff must have twenty-clock hours of on-going job specific training a year. Training may include areas listed above.

#### **7.715.4 PROGRAM**

##### **7.715.41 Program Description**

- A. The shelter shall have a written overall program description for the shelter.
- B. The written description shall address at least the following areas:

1. Case Management Provided
2. Family counseling
3. Education
4. Shelter provided (housing, food, clothing)

##### **7.715.42 Case Management Services**

- A. A staff member qualified as stated at Section 7.715.36, A, shall be assigned the responsibility for case management for each youth.
- B. Each individual assigned the responsibility of providing case management services for a youth shall:
  1. Participate actively in the treatment planning, discharge and after care planning.
  2. Assure that appropriate information concerning the youth and her/his background is shared with other staff members who deal with the youth regularly and to maintain communication with parents, guardians, if available, and with the individual or agency responsible for discharge planning and follow-up care of the youth, if applicable.
  3. Assure that the plan developed for each youth is implemented, and documented in the youth's file.

#### **7.715.43 Admission Policy and Procedures**

- A. Admission of a youth shall be in keeping with the stated purpose of the homeless youth shelter and shall be limited to those youth for whom the shelter is qualified by staff, program, equipment, and needs of youth already in residence to provide care deemed necessary. Care must be provided in the least restrictive, most appropriate setting in order to meet the youth's needs.
- B. Each shelter shall have a written admission policy which at a minimum must include:
  - 1. The policies and procedures related to intake.
  - 2. The age range and sex of youth accepted for care.
  - 3. The needs, problems, situations or patterns best addressed by the shelter's program.
  - 4. The anticipated criteria, problems, situations, and patterns that would result in the shelter requesting removal of a youth.
  - 5. A statement regarding the religious orientation or affiliation of the shelter, and of the religious activities at the shelter, if any.
  - 6. A statement regarding any charges or costs for services that may be expected from the youth, the youth's family or others who may be responsible for the youth.
- C. The shelter shall accept a youth into care only after a preliminary assessment and screening of presenting problems in areas such as social, physical health, mental health.
- D. Upon admission of a youth to a shelter, the shelter shall provide all necessary services pursuant to Section 26-5.7-106(2), C.R.S.
- E. Within 24 hours of arrival at the shelter, a youth shall be given an orientation to the shelter, consistent with the youth's age and ability to participate, which includes at least the following:
  - 1. Tour of the shelter and instruction on fire alarm and fire evacuation procedures, escape routes and exits.
  - 2. The rules/regulations of the shelter.
  - 3. Procedures affecting the youth's behavior, including limiting or restricting a youth's rights where allowed, the type of discipline used in the shelter, and consequences for certain behaviors.
  - 4. The complete youth's rights and youth's grievance procedures as developed by the shelter or by the certifying authority.
- F. Within 48 hours following admission to the shelter, excluding Saturdays, Sundays and legal holidays, and pursuant to Section 26-5.7-105 (2), C.R.S., the director of the shelter shall provide the youth and the youth's parent with a written statement identifying:
  - 1. The availability of counseling services;
  - 2. The availability of longer term residential arrangements; and
  - 3. The possibility of referral to the county department.

- G. Within 2 weeks following admission a placement agreement shall be developed with the involvement of the youth, and if possible, the youth's parent or the legal guardian(s). Where the involvement of any of these is not feasible or desirable, the reasons for the exclusion shall be recorded by the shelter. The placement agreement shall include at least the following information:
1. Discussion of the youth's and the parent's or guardian's expectations regarding: family contact, reconciliation and involvement; how family contact and involvement are to occur, the nature and goals of care, the anticipated planned discharge date and the plan for the youth following discharge.
  2. A delineation of the respective roles and responsibilities of all agencies and persons involved with the youth and his/her family.
  3. Legal status or custody of the youth.
  4. If a youth is placed by a Colorado county department of social services, the appropriate state form or contract shall be completed. This form or contract may provide some of the required authorizations.

#### **7.715.44 Youth Rights**

- A. The shelter shall have written policies and procedures that address and ensure the availability of each of the following core rights for youth in residence. These rights may not be restricted or denied by the shelter.
1. Every youth has the right to enjoy freedom of thought, conscience cultural and ethnic practice, and religion.
  2. Every youth has the right to a reasonable degree of privacy.
  3. Every youth has the right to have his or her opinions heard and considered, to the greatest extent possible, when any decisions are being made affecting his/her life.
  4. Every youth has the right to receive appropriate and reasonable adult guidance, support and supervision.
  5. Every youth has the right to be free from physical abuse or neglect and inhumane treatment. Every youth has the right to be protected from all forms of sexual exploitation.
  6. Every youth has the right to receive adequate, appropriate, and timely emergency medical care.
  7. Every youth has the right to receive adequate and appropriate food, clothing, and housing.
  8. Every youth has the right to live in clean, safe surroundings.
  9. Every youth has the right to participate in an educational program that will maximize his/her potential in accordance with existing law.
  10. Every youth has the right to communicate with others outside the shelter, such as a parent or guardian, caseworker, attorney or guardian ad litem, current therapist, physician, religious advisor, and, if appropriate, probation officer.
- B. The following youth's rights may be limited to reasonable periods during the day or restricted according to written policies of the shelter to ensure the protection of the youth, staff, and

program from unreasonable and unnecessary intrusions and disruptions and from health and safety hazards.

1. Every youth has the right to have access to letter-writing materials, including postage, and to have staff members of the shelter assist him/her if unable to write, prepare, and mail correspondence.
  2. Every youth has the right to have access to telephones to both make and receive local emergency telephone calls.
- C. Written policies that restrict or limit a youth's rights as listed at Section 7.715.44, B, must include at a minimum the requirement that the shelter notify the youth at the time of admission of any policy that would limit or restrict a youth's rights. The notification must be communicated in a language or mode of communication the youth can understand and, if possible, be signed by the youth.
- D. If the shelter enforces any restrictions upon the youth's rights as listed at Section 7.715.44, B, the shelter must, in compliance with the written policy and procedure of the shelter
1. Inform the youth in a language or mode of communication the youth can understand, of the conditions of and reasons for restriction or termination of his/her rights.
  2. Place a written report summarizing the conditions of and reasons for restriction, denial, or termination of the youth's rights in that youth's case record along with information about if or when the youth's right(s) can be restored. This information must be made available to the youth upon request.
  3. When a restriction of a youth's rights affects another youth at the shelter, the youth shall be informed, in a language or mode of communication the individual can understand, of the conditions of and reasons for the action.

#### **7.715.45 Youth's Grievance Procedure**

- A. The shelter must establish a written grievance procedure that provides adequate due process safeguards, spells out the appeal process, and assures that youth and parent(s) or guardian(s) are entitled to report any grievance and shall not be subject to any adverse action as a result of filing the grievance.
1. The shelter must follow grievance procedures without alteration, interference, or unreasonable delay.
  2. If a grievance is filed with the shelter, the grievance shall be recorded in the youth's record along with the investigation findings and resulting action taken by the shelter.
- B. A list of the youth's rights and the grievance procedures must be provided and explained to the youth and the parent or guardian in a language or manner of communication that they can understand.

#### **7.715.46 Discipline**

- A. The shelter shall have written policies and procedures regarding discipline that must be explained to all youth, parent(s), guardian(s), staff, and placing agencies. These policies must include positive responses to a youth's appropriate behavior.
- B. Discipline shall be constructive or educational in nature and may include talking with the youth about the situation, praise for appropriate behavior, diversion, separation from the problem situation, and withholding privileges.

- C. Basic rights shall not be denied as a disciplinary measure.
- D. Youth in care at the shelter shall not discipline other residents.
- E. A shelter shall prohibit all cruel and unusual discipline including, but not limited to, the following:
  - 1. Any type of physical hitting or any type of physical punishment inflicted in any manner upon the body of the youth such as spanking, striking, swatting, punching, shaking, biting, hair pulling, roughly handling a youth, striking with an inanimate object, or any humiliating or frightening method of discipline to control the actions of any youth or group of youth.
  - 2. Discipline that is designed to, or likely to, cause physical pain.
  - 3. Physical exercises such as running laps, push-ups, or carrying heavy rocks, bricks, lumber or other heavy items when used solely as a means of punishment.
  - 4. Assignment of physically strenuous or harsh work that could result in harm to the youth.
  - 5. Requiring or forcing a youth to take an uncomfortable position such as squatting or bending, or requiring a youth to stay in a position for an extended length of time such as standing with nose to the wall, holding hands over head, or sitting in a cross-legged position on the floor, or requiring or forcing a youth to repeat physical movements when used solely as a means of punishment.
  - 6. Group discipline except in accordance with the shelter's written policy and these rules.
  - 7. Verbal abuse or derogatory remarks about the youth, his/her family, his/her race, religion, or cultural background.
  - 8. Denial of any essential/basic program service solely for disciplinary purposes. This does not prohibit the shelter from requesting the youth to leave the shelter because of inappropriate behavior.
  - 9. Deprivation of meals or snacks to a youth that has not been requested to leave the shelter.
  - 10. Releasing noxious, toxic, or otherwise unpleasant sprays, mists, or aerosol substances in proximity to the youth's face.
  - 11. Denial of sleep.
  - 12. Requiring the youth to remain silent for a period of time inconsistent with the youth's age, developmental level, or medical condition.
  - 13. Denial of shelter, clothing or bedding to a youth that has not been requested to leave the shelter.
  - 14. Withholding of emotional response or stimulation.
  - 15. Isolating a youth in a locked room for discipline.
  - 16. Use of physical or mechanical restraint as discipline for a youth.

#### **7.715.47 Non-Discrimination**

In compliance with Section 7.701.14, the shelter shall not discriminate against a youth based upon race,

religion, age, gender or disability.

#### **7.715.48 RELIGION AND CULTURE**

- A. The shelter shall demonstrate consideration for, and sensitivity to, the cultural and religious backgrounds of youth in care.
- B. Youth in care at the shelter shall be allowed and encouraged to celebrate their cultural and religious holidays.
- C. A youth may be invited to participate in religious and cultural activities of the shelter.
- D. A youth shall not be coerced or forced to participate in the religious activities of a shelter or to attend religious services.
- E. Any form of religious or cultural intervention used by the shelter to control or change a youth's behavior, or treat or heal a medical condition, must be approved, in writing, by the legal guardian(s) of the youth prior to the use of the intervention.
- F. A shelter cannot deny medical care to a youth because of religious beliefs.

#### **7.715.5 PERSONAL CARE OF THE YOUTH**

##### **7.715.51 Medical and Health Services**

- A. The shelter shall ensure the availability of emergency medical care for each youth in care.
- B. Whenever indicated, a youth shall be referred to an appropriate specialist for either further assessment or treatment.
- C. At all times there shall be first aid supplies readily available at the shelter and at least one (1) person present at the shelter or with the youth who is certified in first aid, or the equivalent, and CPR for all ages of youth in care.
- D. The shelter, in conjunction with the parent(s) or guardian(s), shall make every effort to ensure that a youth needing corrective devices such as glasses, hearing aids, etc., is provided with the necessary equipment.
- E. In a potentially life-threatening situation, the shelter shall refer the youth's care to the appropriate medical and legal authority.
- F. Administration of any medication at the shelter shall be done only by a person licensed and authorized by law and administered according to the written policies of the shelter.
- G. All medication to be administered must be kept in a clean storage area inaccessible to the youth and stored according to pharmacy instructions.
- H. All prescribed medications shall be administered only upon the written prescription of a physician.

#### **7.715.6 FOOD, NUTRITION, PERSONAL HYGIENE, DAILY ROUTINE CLOTHING AND PERSONAL BELONGINGS**

##### **7.715.61 Food and Nutrition**

- A. The shelter shall provide nutritious foods in the variety and amounts as appropriate for the age,



appetite, and activity of each youth in care.

- B. At least three nourishing, wholesome, well-balanced meals a day shall be offered at regular intervals.
- C. Menus shall be planned at least one week at a time, shall be dated, posted and filed for at least one month.
- D. Youth shall be encouraged to eat a variety of the food served but shall not be subjected to undue coercion, including forced feeding, or punished for refusal to eat.
- E. All food shall be from sources considered satisfactory by the health authority. All foods shall be stored, prepared, and served in such a manner as to be clean, and wholesome.
- F. Youth must not be given foods that are contrary to their religious beliefs, or of their family, or are known to cause an allergic reaction or a health hazard.
- G. Water shall be readily accessible to youth by means of an approved water fountain or single-service cups.
- H. Common drinking cups shall not be permitted.

#### **7.715.62 Personal Hygiene and Daily Routine**

- A. The shelter shall establish procedures to ensure that youth receive training in good habits of personal care, hygiene, and grooming appropriate to their age, gender, race and culture.
- B. There shall be supervision by staff to provide for proper grooming and physical cleanliness of the youth.
- C. The shelter shall ensure that youth are provided with necessary and appropriate toiletry items, including clean, individual towels and washcloths, toothbrush, toothpaste, comb, and shampoo.

#### **7.715.63 Clothing and Personal Belongings**

- A. The shelter shall allow a youth in care to bring his/her personal belongings to the program, as defined by the shelter policy, and to acquire belongings of his/her own in accordance with the youth's plan. However, the shelter shall, as necessary, limit or supervise the use of these items while the youth is in care. Where extraordinary limitations are imposed, the youth shall be informed of the reasons, in a language or manner of communication the youth can understand. The decision and reasons shall be recorded in the youth's case record.
- B. Provisions shall be made for the protection of the youth's property while the youth is residing at the shelter. If the shelter safeguards any money, valuable: or personal property for a youth, the shelter shall maintain an inventory of such possessions. A full return or accounting of such possessions shall be made upon discharge of the youth from the shelter.
- C. The shelter shall ensure that each youth in care has adequate clean, proper-fitting, and seasonable clothing as required for health, comfort, and physical well-being and as appropriate to age, gender, individual needs, culture, and ethnicity.
- D. The wardrobe for each youth shall go with him/her at time of discharge.

### **7.715.7 LIVING SPACES, EQUIPMENT, AND NECESSARY FACILITIES**

#### **7.715.71 Living Spaces and Equipment Necessary in a Shelter**

- A. Youth 15-18 years of age may be housed in the same area in a shelter.
- B. There shall be separate sleeping rooms for boys and girls. Sleeping rooms above or below the floor of exit travel shall not be used for sleeping purposes for youth who are non-ambulatory.
- C. Each youth shall be provided suitable sleeping equipment consisting of individual beds, or bunks, complete with mattresses in good repair, or individual cots. All sleeping equipment shall be constructed so as to facilitate cleaning while in use by youth and upon each change of occupancy. Triple-deck bunks are prohibited. Sleeping equipment being used by youth shall have, clean sheets, pillows, pillowcases and blankets.
- D. Each room of occupancy shall be well-lighted and adequately ventilated.
- E. Staff rooms shall be located on the same floor or in the general area of youth's sleeping rooms so that the youth care staff can supervise youth and be readily accessible when needed.
- F. There shall be a designated space distinct from youth's living areas to serve as an administrative office.
- G. There shall be a designated space distinct from youth's living areas to allow for private discussions and/or counseling sessions.
- H. Each shelter shall have a telephone. Each separate living unit within a shelter shall have 24-hour telephone service or an intercom system connected with an outside telephone service. Emergency telephone numbers, including fire, police, physician, poison control, health agency, and ambulance shall be conspicuously posted adjacent to each telephone.

#### **7.715.72 Dining, Kitchen, Laundry, Bathroom Facilities**

- A. The dining area, whether located in the living unit or in a separate central dining room in the shelter, shall meet the following requirements:
  - 1. It shall be clean, well-lighted, properly heated, and ventilated.
  - 2. Walls and floors shall be of materials that are easy to keep clean.
- B. The kitchen shall be designed and equipped to meet the requirements of efficiency, sanitation, fire safety, and comfortable working conditions. There shall be:
  - 1. Adequate space for receiving, storage, refrigeration, and preparation of food. Storage space shall be clean and well-ventilated, and containers of food shall be covered and stored above the floor on shelves or other clean surfaces.
  - 2. Provision for daily disposal of garbage and other refuse.
  - 3. Separate storage of poisonous and toxic materials from food. Such materials shall be labeled and used only in ways that will neither contaminate food nor be hazardous to staff or youth.
  - 4. Mechanical dish washing equipment or other approved methods of dish washing in accordance with requirements of the State Department of Public Health and Environment.
  - 5. Hand washing and toilet facilities for use of kitchen staff shall be readily accessible.

- C. Bath and toilet rooms shall be constructed of easily cleanable material. All surfaces shall be maintained in good repair. Toilet and bathing facilities shall have doors or partitions.

## **7.715.8 BUILDING, FIRE SAFETY AND TRANSPORTATION**

### **7.715.81 Building Site**

- A. The shelter must be located in an area that is readily accessible to health resources, public and private utilities, adequate and safe water supplies, sewage disposal, and fire and police protection.
- B. The shelter site shall be located in accordance with local zoning department requirements.
- C. The entire premises of the shelter are subject to inspection for licensing purposes, including but not limited to the residence where care is to be provided, the grounds surrounding the shelter, the basement, the attic (if accessible), any storage buildings, and a garage or carport, if applicable.
- D. If the shelter is located in the same building as, or immediately adjacent to, other facilities, or an adult treatment center, or a nursing home, it shall be so arranged that the care and activities of the youth residing in the shelter are completely separate and independent from the other facility. The shelter may not be operated on the premises of a business that might be hazardous to the health, safety, morals, or welfare of youth and the operation of the shelter.
- E. The shelter, including indoor and outdoor space, shall be maintained in a dean and safe condition free from hazards to health and safety.
- F. There shall be outdoor space available to provide some recreation area for south.

### **7.715.62 Building Maintenance**

- A. Buildings shall be Kept in good repair and maintained in a safe, dean, and sanitary condition. Good housekeeping must be observed in all areas at all times.
- B. All areas of the shelter available to youth's activities including equipment, materials and furnishings shall be of sturdy, safe construction, easy to dean, and free of hazards, such as sharp points or comers, splinters, protruding nails, broken play and recreational equipment or paint that contains lead or other poisonous materials and might be dangerous to the life or health of youth.
- C. Closets, attics, basements, cellars, and furnace rooms shall be kept free from accumulation of significant amounts of extraneous materials such as furnishings, newspapers, or magazines that could pose a fire or health hazard.
- D. Provision shall be made for collection, storage, and disposal of refuse in an approved manner to prevent nuisance conditions.

### **7.715.83 Building Safety**

- A. Egress from each dwelling unit sleeping room, and dormitory shall be available directly to the outside or to a common hallway leading directly to the outside.
- B. In every building or structure, exits shall be so arranged and maintained as to provide free and unobstructed egress from all parts of the building or structure at all times when it is occupied. No lock or fastening to prevent free escape from the inside of any building shall be installed.
- C. Every exit shall be clearly visible or the route to reach it shall be conspicuously indicated in such a

manner that every occupant of every building or structure who is physically and mentally capable will readily know the direction of escape from any point. Each path of escape shall be so arranged or marked that the way to a place of safety outside is unmistakable.

- D. In every building or structure adequate and reliable illumination shall be provided for all exit facilities.
- E. Every building or structure shall be so constructed, arranged, equipped, maintained, and operated as to avoid undue danger to the lives and safety of its occupants from fire, smoke, fumes, or resulting panic during the period of time reasonably necessary for escape from the building or structure in case of fire or other emergency.
- F. The local fire department shall determine the adequacy of exits and other measures for life safety.

#### **7.715.84 Fire Safety**

- A. Fire hazards, such as defective electrical appliances and electric cords, dangerous or defective heating equipment or flammable material stored in such a manner as to create a risk of fire shall be corrected or eliminated.
- B. The shelter shall contain at least one U.L.-approved fire extinguisher, highly visible, easily accessible, and in working condition, weighing not less than five pounds, that has a rating of 2A, 10BC. This requirement may be waived where more extensive fire-control measures are required by a local fire department.
- C. A smoke detector, in working condition, must be installed on each level of the shelter where care occurs and near sleeping areas.
- D. No gas or electric space heaters, open-flame gas or oil stoves, hot plates, or unvented heaters shall be used in the shelter for heating purposes.
- E. Flammables, aerosol paints, insecticides, chemicals, and other dangerous materials shall be locked or stored so they are inaccessible to youth and must be stored in areas separate from sleeping or living areas. Flammables shall be stored in an approved container.
- F. Heating devices such as radiators, registers, fireplaces, and steam and hot water pipes that pose a fire or burn hazard to youth shall be screened or otherwise protected.
- G. Flammable material must not be stored near a furnace, hot water heater, or other heating device.
- H. There shall be no candles or other burnable objects permitted in sleeping areas. Youth shall not be permitted to smoke in sleeping or storage areas.
- I. Exit doors shall be obvious. No lock or fastening to prevent free escape from the inside of any room used by the youth shall be permitted.
- J. Exit routes shall be kept free of discarded furniture, furnishings, laundry, and stacks of newspapers or magazines that could interfere with the prompt evacuation of the shelter.

#### **7.715.85 Emergency Drills**

- A. There shall be written procedures for staff and youth to follow in case of emergency or disaster. These procedures shall be developed by the shelter with the assistance of qualified fire and safety personnel and shall include provisions for staff roles and responsibilities during an emergency, evacuation of the shelter, and the assignment of a central meeting place where each individual may be accounted for.

- B. Fire exit drills must be held regularly.
- C. Drills must be held at unexpected times and under varying conditions to simulate the conditions of an actual fire.
- D. Drills must emphasize orderly evacuation under proper discipline rather than speed. Running or horseplay shall not be permitted.
- E. Drills must include suitable procedures for ensuring that all persons in the shelter actually participate.
- F. A record of fire drills held over the past 12 months must be maintained by the shelter.
- G. Fire alarm facilities shall be regularly used in the conduct of drills.
- H. The shelter shall make special provisions for the evacuation of any physically handicapped youth in the shelter.
- I. The shelter shall take special care to help emotionally disturbed or perceptually handicapped youth understand the nature of such drills.
- J. If appropriate to the location of the shelter, tornado drills must be held often enough so that all occupants are familiar with the drill procedure and conduct during a drill is a matter of established routine. A record of tornado drills held over the last 12 months must be maintained by the shelter.

#### **7.715.86 General Comfort and Safety**

- A. All hazardous chemicals, tools, and other equipment, including matches, plastic bags, paints, gasoline, medicines, insecticides, and cleaning and laundry materials, shall be stored in a safe manner. Products which could cause poisoning or contamination shall not be stored in rooms or areas where food is stored or prepared.
- B. A shelter shall not maintain any firearms or air rifles on the grounds or within the structure of the shelter. A shelter shall not permit any staff member or youth to be in possession of any firearm on the grounds or within the structures of the shelter. Any other weapons such as bows, hunting knives and hunting sling shots must be unstrung at all times and must be locked and inaccessible to youth. Chemical weapons, even when carried by staff members to and from work for protection, shall be locked when present at the shelter. Weapons must not be transported in any vehicle in which youth are riding.
- C. Water from any source other than a regular municipal water supply shall be tested annually for compliance with water quality requirements. (Sterilized containers for free laboratory tests of drinking water may be secured from the county health department or by writing to the Colorado Department of Public Health and Environment, 4210 East 11th Avenue, Denver. Colorado 80220.)
- D. The shelter shall be equipped with adequate light, heat, ventilation, and plumbing for safe and comfortable occupancy.
- E. The shelter must be equipped with hot and cold running water.
- F. All garbage, refuse and other wastes shall be kept in a suitable receptacle and disposed of in such a manner as not to constitute a health hazard or nuisance.
- G. All stairways containing more than four steps shall be equipped with a handrail.
- H. The shelter shall have a telephone, and emergency numbers shall be posted near the telephone,

including those related to medical care, fire, law enforcement and poison control where available.

#### **7.715.87 Transportation**

- A. A shelter shall ensure that each youth is provided with the transportation necessary for implementing the youth's individual plan.
- B. A shelter shall have means of transporting youth in cases of emergency.
- C. Any vehicle used by the shelter in transporting youth in care, whether such vehicle is operated by a staff member or any other person acting on behalf of the shelter, shall be properly licensed, and the vehicle shall be maintained in accordance with Colorado law.
- D. Any staff member or other person acting on behalf of the shelter operating a vehicle for purpose of transporting youth shall be properly licensed to operate the class of vehicle in accordance with Colorado law.
- E. Youth under 16 years of age must be properly fastened into a restraint system that conforms to Section 42-4-236, C.R.S.
- F. A shelter shall not allow the number of persons in any vehicle used to transport youth to exceed the number of available seats and seatbelts in the vehicle.
- G. The vehicle shall be enclosed.
- H. A shelter shall ascertain the nature of any need or problem of a youth which might cause difficulty during transportation, such as seizures or a tendency toward motion sickness. The shelter shall communicate this information to the driver of any vehicle transporting youth in care.

#### **7.715.9 RECORDS, REPORTS AND CONFIDENTIALITY**

##### **7.715.91 Confidentiality**

- A. The shelter shall have a policy as to the maintenance, storage and confidentiality of records.
- B. Records shall be the property of the shelter and shall be protected against loss, tampering, or unauthorized use.
- C. Facts learned about youth and their families shall be kept confidential, with the following exceptions:
  - 1. In medical emergencies, and then only when the assistance and/or expertise is required of that unauthorized person; or
  - 2. To the youth, his/her parent(s) or guardian(s) and their respective legal counsel(s), a court having jurisdiction over the youth, or an authorized public official, or licensing representative in performance of his/her mandated duties; or
  - 3. If the parent(s) or guardian(s) has given voluntary, written consent.
  - 4. Mandatory reporting of child abuse as required by law; and;
  - 5. Reporting to the appropriate authority a youth's attempt to harm his/herself or others.
  - 6. A youth's records may only be released upon the written consent of the youth.

#### **7.715.92 Records**

- A. The shelter shall maintain complete records as required for the licensing of the shelter in accordance with the rules regulating the shelter.
- B. Records for youth shall be retained for at least three years. Retention of records for a longer period may be desirable when they reflect an accident, injury or other unusual circumstance.
- C. A record of admission shall be completed for each youth in care at the time of admission. The admission record shall be maintained at the shelter where the youth resides and shall contain:
  - 1. Youth's name, date and place of birth (verified by a birth certificate when possible), gender, race, religious preferences, and date of admission.
  - 2. Psychiatric and psychological reports, when available.
  - 3. Summary recording of significant contacts with parent(s), guardian [s] and other involved agencies.
- D. When a youth is removed or discharged from placement, the shelter shall complete a summary of the youth's discharge from the shelter which includes at a minimum:
  - 1. The date of the discharge of the-youth from the shelter.
  - 2. The plan for the youth.
  - 3. Circumstances which led to an unplanned discharge.
- E. Copies of a youth's file, including discharge information, shall be provided to parent(s) or guardian(s) upon request or to others by written consent pursuant to Section 7.715.91.
- F. A copy of all policies developed by the shelter shall be maintained for at least three years.

#### **7.715.93 Reports**

- A. The shelter shall immediately attempt to notify the youth's parent(s), guardian(s), and/or the responsible agency of any serious illness or serious injury resulting in medical treatment away from the shelter, hospitalization or death involving a youth in care.
- B. The shelter must immediately report in writing to the licensing authority any accidents, injuries, serious illnesses, or fatalities that occurred at the shelter and that resulted in emergency medical treatment away from the shelter, hospitalization or death. The report must be made within 48 hours after the accident, illness, or death occurred.
- C. A report about a death must include:
  - 1. The youth's name, birth date, address, and telephone number.
  - 2. If known, the names of the youth's parent(s) or guardian(s) and their address and telephone number if different from that of the youth.
  - 3. Date of the fatality.
  - 4. Brief description of the incident or illness leading to the death.

- 5. Names and addresses of witnesses or persons who were with the youth at the time of death.
- 6. Name and address of police department or authority to whom the report was made.
- D. The shelter must immediately report in writing to the department any change in the status of the shelter that would affect care of youth.
- E. The facility must immediately report in writing to the department any legal action brought against a shelter regarding any youth, staff, or conduct of the shelter at the time of initiation of such legal action

## **7.716 COLORADO SCHOOL READINESS QUALITY IMPROVEMENT PROGRAM**

The purpose of the program is to improve the school readiness of children, five (5) years of age or younger, who are cared for at early care and education facilities located in neighborhoods with eligible elementary schools pursuant to Section 26-6.5-106, C.R.S.

### **7.716.1 Definitions**

- A. "Child" means a child 5 years of age or younger.
- B. "Early Care and Education Provider" or "Provider" means any licensed child care center or family child care home or any school district, provider or facility that participates in the Colorado Preschool Program pursuant to Article 28 of Title 22, C.R.S., and that is located within a local community served by an Early Childhood Care and Education Council.
- C. "Early Care and Education Facility" or "ECE Facility" means an early care and education provider.
- D. "Early Childhood Care and Education Councils" or "Councils" means pilot site agencies or, in communities that are not under the purview of a pilot site agency, councils representative of public and private stakeholders identified or established locally pursuant to Section 26-6.5-106(3.5), C.R.S., for the purpose of developing and ultimately implementing a comprehensive early childhood system to ensure the school readiness of young children in the community.
- E. "Eligible Elementary School" means a public elementary school that:
  - 1. As of the date on which the Early Childhood Care and Education Council applies for funding through the Program, is receiving moneys pursuant to Title I of the Federal "Elementary and Secondary Education Act of 1965", 20 U.S.C. Section 6301, et seq., as re-authorized in 2002 as the "No Child Left Behind Act of 2001." No later editions or amendments are included. Copies may be obtained or examined by contacting the Child Care Administrator, Colorado Department of Human Services, Division of Child Care, 1575 Sherman Street, Denver, Colorado 80203; or any State Publications Depository Library; or at: <http://www.ed.gov/policy/elsec/leg/esea02/index.html>.
  - 2. For the school year immediately preceding submission of the Early Childhood Care and Education Council's application for funding, has an overall academic performance rating of "low" or "unsatisfactory", or has an overall academic performance rating of "average" with an academic growth rating of "decline" or "significantly decline", pursuant to Section 22 7-604, C.R.S.
- F. "Licensed" means any child care center or family child care home licensed by the State of Colorado under the Child Care Licensing Act pursuant to Section 26-6.5-106(2)(a), C.R.S.
- G. "Pilot Site Agencies" means the community consolidated child care pilot site agencies established



pursuant to Section 26-6.5 103, C.R.S.

H. "School Accountability Report" or "SAR" means the report that each public school receives on its performance and improvement in academic achievement, pursuant to Part 6 of Article 7 or Title 22, C.R.S.

I. The "State Department" or "State" means the Colorado Department of Human Services, which is the agency responsible for overseeing the project.

#### **7.716.2 Eligibility [Rev. eff. 6/1/06]**

##### **A. Eligible Early Childhood Care and Education Councils**

1. An Early Childhood Care and Education Council must apply for School-Readiness Quality Improvement funding on behalf of the community it represents.
2. Communities that are not under the purview of a pilot site agency may identify an existing entity to serve as the Early Childhood Care and Education Council, such as an interagency coordinating council or a Colorado Preschool Program advisory council, or may establish a new council. Councils shall include, but not be limited to, the following stakeholders:
  - a. School districts;
  - b. County departments;
  - c. Private for-profit and nonprofit licensed child care providers representing child care centers, family child care homes, and preschools;
  - d. Local child care resource and referral agencies;
  - e. Local health departments; and,
  - f. Local mental health communities.
3. The Council must submit a school-readiness plan to improve the readiness of children in the Council's community. The Council's school-readiness plan must:
  - a. Be for a three-year period; and,
  - b. Contain strategies for improving the school readiness of children who will ultimately attend eligible elementary schools in the Council's community.
4. Each Council's school-readiness plan must include, at a minimum, the following:
  - a. The number and location of eligible elementary schools in the Council's community, as described in Section 7.716.1, E.
  - b. The number and location of early care and education providers that will voluntarily participate in the program.
  - c. A commitment that the providers identified in the school-readiness plan will cooperate with and participate in the school-readiness rating system identified in the plan.
  - d. Community strategies to target school-readiness funds to improve the level of quality

at participating early care and education facilities that shall include one or more of the following strategies:

- 1) The quality of learning environments;
- 2) The quality of adult-child interactions;
- 3) The health and safety of children;
- 4) Parent and family engagement;
- 5) Professional development and education;
- 6) Management and leadership;
- 7) Business practices;
- 8) Special needs services, or,
- 9) Mental health services.

e. A methodology for equitably distributing school-readiness funds to eligible early care and education providers within their Council's;

f. Evidence that the voluntary school-readiness rating system is included in the school-readiness plan.

5. The Council must demonstrate the commitment of the ECE facilities identified in the Council's school-readiness plan to cooperate with and participate in the school-readiness rating system.

6. Councils that receive funds must distribute, or otherwise make provisions to distribute, those funds to ECE facilities in a timely fashion per their school-readiness plan as described in Section 7.716.2, A, 4, e.

7. Administrative costs associated with project budgets must not exceed five percent (5%) of the total amount requested from the State.

8. The voluntary school readiness rating system shall:

a. Measure elements of quality at an ECE facility such as:

- 1) Quality of the learning environment.
- 2) Quality of adult-child interactions.
- 3) Adult-to-child ratios.
- 4) Provider credentials including recognized credentials through the State Department's voluntary credentialing system or equivalent.
- 5) Parent-involvement activities at the ECE facility.

b. Inform parents, counties, and other purchasers of early care and education about the level of quality of an ECE facility in a simple and easy-to-understand manner.

- c. Be supported by statistically valid research as a reliable measure of quality of an ECE facility;
- d. Include a quality improvement plan that informs rated providers of their strengths and weaknesses and that provides such providers with strategies to improve the quality of their services; and,
- e. Have demonstrated effectiveness at improving the level of quality of providers in geographically diverse Colorado communities.

**B. Eligible Early Care and Education Providers**

- 1. Early care and education providers must participate in a local community Early Childhood Care and Education Council.
- 2. Early Childhood Care and Education Councils may work with any licensed ECE provider located within the Council's community.

**7.716.3 Application Process [Rev. eff. 6/1/06]**

- A. Requests for Proposals (RFPs) will be produced by the State Department.
- B. Each Early Childhood Care and Education Council may submit only one school-readiness application for the community it represents.
- C. A review committee comprised of a minimum of five (5) individuals shall be convened to evaluate the applications submitted by the eligible councils. To ensure that funds are equitably distributed among rural and urban communities, the review committee shall consider, at a minimum, the following elements for each application:
  - 1. Community demographic information.
  - 2. Completeness of response to application questions.
  - 3. Viability of the School-Readiness Plan submitted with applications.
  - 4. Demonstrated ability of the community to achieve the planned goals.

**7.716.4 Improvement in Ratings**

- A. Ratings must be translated into quality levels that are easily understood by parents.
  - 1. Centers:
    - a. Star 1 = 10-17 points
    - b. Star 2 = 18-25 points
    - c. Star 3 = 26-33 points
    - d. Star 4 = 34-42 points
  - 2. Homes:
    - a. Star 1 = 10-16 points

- b. Star 2 = 17-23 points
- c. Star 3 = 24-30 points
- d. Star 4 = 31-39 points

[Note: The above number of pointes for the approved levels are incorporated by reference from the "QualiStar Early Learning Four Star Quality Rating Criteria", January 2005. No later editions or amendments are included. Copies may be obtained or examined by contacting the Child Care Programs Administrator, Colorado Department of Human Services, Division of Child Care, 1575 Sherman Street, Denver, Colorado 80203; or any State Publications Depository Library.]

- B. To maintain eligibility for funding, early care and education facilities must achieve specific and measurable gains in their rating, as established by the rating organization and referred to in Section 7.716.4, A, as follows:
  - 1. ECE facilities with a quality rating of zero (0) to two (2) stars must increase their rating points by at least four (4) points within twelve (12) months following each rating; and if their score in the learning environment subcategory is less than six (6) points, they must also earn at least two (2) of these additional points in this category.
  - 2. ECE facilities with a quality rating of three (3) stars must maintain this quality rating level to continue to be eligible to receive school-readiness funds.
  - 3. ECE facilities with a quality rating of four (4) stars must maintain this quality rating level to continue to be eligible to receive school readiness funds. After they have maintained a rating of four (4) stars for two (2) consecutive ratings, they will receive reduced funding.
- C. At all quality levels, the ratio of adults-to-children must meet minimum licensing requirements.

#### **7.716.5 PUBLIC ACCESS TO RATINGS [Rev. eff. 6/1/06]**

School readiness ratings for any participating early care and education provider shall not be published without the provider's signed authorization until the participating provider has participated in the School-Readiness Quality Improvement Program for a minimum of 12 months in order to give participating providers an equitable opportunity to improve their scores. Ratings will be publicly accessible sixty (60) calendar days following the determination of subsequent ratings or following the issuance of a finalized rating after a dispute.

#### **7.716.6 Dispute Resolution**

- A. The State Department, through the Division of Child Care, shall provide for an informal dispute resolution process to resolve disputes between the rating organization and a participating provider concerning the ratings which the provider receives, and to resolve disputes arising when a provider's follow-up rating does not meet the criteria for continued eligibility as per Section 7.716.4, B.
- B. Participating providers shall be notified of the dispute resolution process when the providers begin their program participation and when notified of their rating.
- C. The Division of Child Care will convene a dispute resolution panel familiar with the rating system. The panel will consist of one person representing the Division of Child Care, one person representing the Colorado Department of Education, and one person certified as a rater in the approved rating system who is not an employee of the rating organization and who does not otherwise have an interest in the decision of the dispute resolution panel.

- D. The dispute resolution panel will make decisions by a simple majority vote of the panelists.
- E. Requests for dispute resolution by a provider must be submitted in writing to the Division of Child Care within thirty (30) calendar days of the day the provider receives the rating consultation from the rating organization. Requests must include, at a minimum, the name and address of the provider, the provider's license number, the rating in dispute, and the provider's reasons for disputing the rating.
- F. The panel will review all information submitted by the provider, the provider's council, the State Department, or the rating organization that is pertinent to the dispute.
- G. The dispute resolution panel will be able to conduct, at its discretion, face-to-face interviews or telephone conferences to hear arguments from the provider and/or the rating organization.
- H. The dispute resolution panel will require the rating organization to issue a new rating if the panel determines that the original rating was in error.
- I. In a dispute about a provider's continued eligibility in the program, the panel may give the provider a probationary period of up to six (6) months in which to improve in specified areas. At the end of the probationary period, the panel will reconvene to determine whether the provider satisfactorily met the terms of its probation.
- J. The cost of meeting the terms of probation may be partially or wholly borne by the provider as determined by the dispute resolution panel.
- K. The dispute resolution panel will have additional sixty (60) calendar days from receipt of the provider's request to issue a final decision to the provider in writing.

## **7.717 RULES REGULATING DEDICATED FAMILY HOMES**

Dedicated family homes must comply with the "Rules Regulating Family Foster Care Homes" or the "Rules Regulating Specialized Group Facilities" and the "General Rules for Child Care Facilities", except where specifically noted otherwise.

### **7.717.1 PURPOSE**

The purpose of the Dedicated Family Home Pilot is to have the ability for a child to return to a specific setting where the child has previously established a bond with a parental figure and to ensure that the setting to which the child may return is available to the child until the child attains the age of 18 years.

The pilot program ends June 30, 2008.

### **7.717.2 DEFINITIONS**

- A. "Dedicated family homes" are defined at Section 26-6-403, C.R.S., "Family Homes Pilot Program".
- B. "Dedicated family homes" means a single family dwelling or a group home that is licensed or certified pursuant to Section 26-6-104, C.R.S., for the purpose of providing twenty-four hour family care for a child who is at least 6 years of age and less than 18 years of age, and who is not related to the dedicated family home parent.
- C. "Dedicated family home parent" means a person specifically trained and certified by a county department or a licensed child placement agency to operate a dedicated family home. The parent shall agree to accept the return placement of a child that has significant barriers to achieving permanency in out-of-home placement until the child is 18 years of age if any interim placement

is unsuccessful.

- D. "Designated agencies" are no more than 10 county departments and licensed Child Placement Agencies that have volunteered to be a part of the Dedicated Family Home Pilot Program. Their responsibility is to recruit, train, monitor and investigate dedicated family home parent(s) who operate dedicated family homes.
- E. "Dedicated family home report" shall include the State Department's findings and recommendations, including whether the pilot program established in Section 26-6-401, C.R.S., should be terminated, extended, expanded or made permanent. The report is due to the House and Senate committees on Health, Environment, Welfare and Institutions no later than December 31, 2007.
- F. "Dedicated family home pilot funding" means funding provided by gifts, grants or donations from any private source for the purpose of implementing the Dedicated Family Home Pilot Program.

### **7.717.3 AGENCY INVOLVEMENT**

#### **A. Designated Agencies**

For Calendar Year 2005, designated agencies shall include those agencies directly participating in the pilot.

#### **B. Indirect Agencies**

County departments and child placement agencies may participate in the pilot indirectly and not as a designated agency by functioning as a county department with care and custody of a child involved with the Dedicated Family Home Pilot or as a child placement agency through which a child involved with the Dedicated Family Home Pilot is placed for care.

### **7.717.4 CHILDREN ELIGIBLE FOR INCLUSION IN THE DEDICATED FAMILY HOMES PILOT PROGRAM**

A child may be eligible if the child has the following characteristics:

- A. The child(ren) is 6 through 17 years of age; and,
- B. The child has a willing, potential dedicated family home from a past out-of-home placement; and,
- C. The child is identified as a candidate for a dedicated family home by a designated agency; and,
- D. The child(ren) has been in the child welfare system for one or more years; and,
- E. The child has had multiple placements, based on the child's challenging behavior, which may include the number of out-of-home placements and the length of out-of-home placements; and,
- F. Child(ren) 13-17 years of age have on-going mental health issues which may include those that require or have had hospitalizations or residential Treatment Center placements; and,
- G. Child(ren) 13-17 years of age have a primary or secondary goal of Other Planned Permanent Living Arrangement (OPPLA) as defined in Section 7.301.24, P, and the child is at high risk that no other permanent option is available.

### **7.717.5 QUALIFICATIONS OF DEDICATED FAMILY HOME PARENT**

In order to be qualified as a dedicated family home parent, an individual:

- A. Must be willing to serve as a dedicated family home for a child(ren) up until the child is 18 years of age and to maintain a life long connection with the child after the child turns 18 years of age.
- B. Must have demonstrated skills with a variety of age groups to meet the developmental needs of the foster child entering care and on-going during placement in the dedicated family home.
- C. Must have been certified or licensed as a foster or group home parent for a minimum of three (3) years.
- D. Must annually complete 32 hours of on-going training appropriate to the specific needs of the designated child and the other children in placement.
- E. Shall have at least one full-time stay-at-home dedicated family home parent or fully trained back-up substitute care provider.
- F. Must be able to provide independent living skills development and opportunities to the child/youth while the child/youth is in placement in the dedicated family home.

#### **7.717.6 COMPENSATION**

##### **7.717.61 Compensation Incentives for Dedicated Family Homes**

A dedicated family home parent shall receive a block stipend compensation for additional services that relate directly to supporting the transition of the child/youth including, but not limited to:

- A. Transition services;
- B. Respite care;
- C. Child care;
- D. Training;
- E. Family activities; and,
- F. Transportation.

##### **7.717.62 Period of Time for Compensation**

Compensation may be:

- A. For 3-6 months prior to child entering dedicated home; or,
- B. For 3-6 months during the time a child(ren)/youth is out of the Family Foster Care Home in a more restrictive setting, such as an RTC or psychiatric hospital; or,
- C. For up to 3 months following placement.

##### **7.717.7 DESIGN OF PILOT PROGRAM**

- A. Target Group

For the purpose of the pilot program, two groups of children/youth will be selected for tracking purposes:

1. 13-15 children/youth a year that meet the eligibility criteria in Section 7.717.4 shall be selected to participate in the pilot; and,
2. 13-15 children/youth a year that meet all of the criteria of Section 7.717.4, except that the children/youth do not have a designated dedicated family home to return to shall be selected as a control group.

#### **B. Capacity of Dedicated Family Home**

In order to provide care for a child/youth in a dedicated family, the home capacity may be increased by one child for a temporary period of time allowing the identified child/youth to return to the dedicated home until there is a natural transition of another child in care leaving placement.

### **7.717.8 REIMBURSEMENT WHILE CHILD/YOUTH IS IN PLACEMENT**

Reimbursement for care of the child while in placement in the dedicated family home shall come from the foster care maintenance funds and shall be payable through the Trails system.

### **7.717.9 TRACKING AND DATA COLLECTION**

Designated agencies shall:

- A. Track the following information for both control and sample groups, and shall report the results to the State on a quarterly basis:
  1. Length of time child/youth in placement;
  2. Specific services provided to child/youth;
  3. Contact hours with child in dedicated family home to include therapists and caseworker's time; and,
  4. Additional costs to preserve dedicated family home relationships.
- B. Track the following information for both control and sample groups, and shall report the results to the State on an annual basis:
  1. Life skills assessment for each child/youth; and,
  2. Educational skills assessment which includes the school setting, the number of credits and grade of the child, educational goals, and attendance.

## **7.701 GENERAL RULES FOR CHILD CARE FACILITIES**

### **7.701.1 INTRODUCTION**

#### **7.701.10 Rule Application**

All rules in 7.701 will be known and hereinafter referred to as the General Rules for Child Care Facilities and will apply to all child care applicants and licensees subject to the Child Care Licensing Act, Sections 26-6-101 to 26-6-115, C.R.S.

#### **7.701.11 Licensing Exemptions**

- A A license must be obtained before care begins unless such care is exempt as set forth below.



B A license is not required for:

1. A special school or class in which more than 50. percent of the time that children are present is spent in religious instruction. Religious instruction is defined to include such activities as worship, singing religious songs, listening to religious stories, learning and practicing religious cultural activities, and participating in religious celebrations.
  2. A child care center operated in connection with a church, shopping center, or business where children are cared for during short periods of time, not to exceed three hours in any twenty-four hour period of time, while parents or persons in charge of such children, or employees of the church, shopping center, or business whose children are being cared for at such location are attending church services at such location, shopping, patronizing or working on the premises of the business. This facility must be operated on the premises of the church, business, or shopping center. Only children of parents or guardians who are attending a church activity or patronizing the business or shopping center or working at the church, shopping center or business can be cared for in the center.
  3. Occasional care of children with or without compensation, which means the offering of child care infrequently and irregularly.
  4. A family care home in which less than 24-hour care is given for only one child or two or more children who are siblings from the same family household at any one time.
  5. A child care facility that is approved, certified, or licensed by any other state department or agency, or by a federal government department or agency, which has standards for operation of the facility and inspects or monitors the facility.
  6. The medical care of children in nursing homes.
  7. Ski area guest child care facilities as defined at Sections 26-6-102(5) and 26-6-103.5, C.R.S.
- C. Any child care providers wishing to be declared exempt from the Child Care Licensing Act based on the nature of their program must submit a request for exemption to the Department. That request must include the name and address of the facility, the number of children in care and their approximate ages, the hours of operation, and a basic description of the program and its curriculum.
- D. Decisions of the Department regarding exemption are the final agency decision of the Department and cannot be reviewed by an Administrative Law Judge.

#### **7.701.12 Civil Penalties and Injunctions**

- A. Violation of any provision of the Child Care Licensing Act or intentional false statements or reports made to the Department or to any agency lawfully delegated by the Department to make an investigation or inspection may result in fines assessed to a maximum of \$10,000.
1. A civil penalty will be assessed by the Department only in conformity with the provisions and procedures specified in Article 4 of Title 24, C.R.S. No civil penalty will be assessed without a hearing conducted pursuant to the Child Care Licensing Act and Article 4 of Title 24, C.R.S., before an Administrative Law Judge acting on behalf of the Department.
  2. Prior to receipt of a cease and desist order from the Department or from any agency delegated by the Department to make an investigation or inspection under the provision of the Child Care Licensing Act, any unlicensed child care facility may be fined up to \$100

a day to a maximum of \$1,000 for providing care for which a license is required.

3. For providing child care for which a license is required after receipt of a cease and desist order, an unlicensed facility will be fined \$100 a day to a maximum of \$10,000.
  4. Assessment of any civil penalty under this section will not preclude the Department from initiating injunctive proceedings pursuant to Section 26-6-111, C.R.S.
  5. A licensed child care facility may be fined up to \$100 a day to a maximum of \$10,000 for each violation of the Child Care Licensing Act or for any statutory grounds as listed at Section 26-6-108(2), C.R.S.
  6. Assessment of any civil penalty does not preclude the department from also taking action to deny, suspend, revoke, make probationary, or refuse to renew that license.
  7. Any person intentionally making a false statement or report to the Department or to any agency delegated by the Department to make an investigation or inspection under the provisions of the Child Care Licensing Act may be fined up to \$100 a day to a maximum of \$10,000.
  8. Civil penalties assessed by the department must be made payable to the Colorado Department of Human Services.
- B. In addition to civil penalties that may be assessed under Section 7.701.12, A, when an individual operates a facility after a license has been denied, suspended, revoked, or not renewed, or before an original license has been issued, injunctive proceedings may be initiated to enjoin the individual from operating a child care facility without a license.
- C. Within 10 working days after receipt of a notice of final agency action with regard to a negative licensing action or the imposition of a fine, each child care center or family child care home must provide the Department with the names and mailing addresses of the parents or legal guardians of each child cared for at the facility so that the Department can notify the parents or legal guardians of the negative licensing action taken. The facility will be responsible for paying a fine to the Department that is equal to the direct and indirect costs associated with the mailing of the notice.

#### **7.701.13 Waivers**

- A. A person who has applied for or been issued a certificate or license to operate a child care facility or child placement agency has the right to request a waiver of any rule or regulation which, in his/her opinion, works an undue hardship on the person, facility, or the community, or has been too stringently applied by a representative of the Department.
- B. Requests for waivers must be submitted to the department in writing within 60 calendar days of the date on which the rule allegedly was too stringently applied or created the hardship. Requests must include the name and address of the facility, its assigned license number, the citation of the rule for which a waiver is being sought, and all relevant information regarding the alleged hardship or evidence of the rule being too stringently applied.
- C. The Department will designate, pursuant to the Child Care Licensing Act, an appeal panel, which will meet to review appeal requests and make recommendations to the Department. Requests should be submitted to the Division of Child Care Services.
- D. If a child care facility or agency is aggrieved by the decision of the appeal panel, the facility or agency has a right to a formal hearing pursuant to Section 24-4-105, C.R.S., if the facility or

agency petitions the Department in writing within 30 calendar days of receipt of the written appeal decision.

- E. Written decisions of the appeal panel must be posted beside the child care license.

#### **7.701.14 Civil Rights**

All facilities licensed under the Child Care Licensing Act are subject to the non-discrimination provisions of Title VI of the Civil Rights Act of 1964, as amended, and its implementing regulation, Title 45 Code of Federal Regulations (CFR), Part 80; the Age Discrimination Act of 1975, as amended, and its implementing regulation, Title 45 CFR, Part 91; Section 504 of the Rehabilitation Act of 1973, as amended, and its implementing regulation, Title 45 CFR, Part 84.

All facilities licensed under the Child Care Licensing Act are also subject to Titles I through V of the Americans with Disabilities Act, as amended, and its implementing regulation, Title 29 C.F.R., Part 1630. Decisions related to the enrollment, placement, or dismissal of a child with a disability or chronic condition must be in compliance with the Americans with Disabilities Act. The facility must provide reasonable accommodations for the child with a disability who has special needs.

A lack of independent ambulation or the need for assistance in feeding, toileting, or dressing or in other areas of self care cannot be used as sole criteria for enrollment or placement or denial of enrollment or denial of placement. Efforts must be made to accommodate the child's needs and to integrate the child with his/her peers who do not have disabilities.

#### **7.701.2 DEFINITIONS**

##### **7.701.21 Family Care Home**

"Family Care Home" , defined at Section 25-6-102(4). C.R.S., includes the following types of facilities:

- A. A "Family Foster Home" is a facility providing care for a child or children not related to the head of household, or a certified Kinship foster care home, for regular 24-hour care.
- B. A "Family Child Care Home" is a type of family care Home that provides less than 24-hour care for 2 or more children on a regular basis in a place of residence Children in care are from different family households and are not related to the head of household.
- C. A "Specialized Group Facility" is sponsored and supervised by a county department or a licensed child placement agency for the purpose of providing 24-hour care for 5 or more children, but fewer than 12 children except as noted below, from 3 to 18 years of age, and for those persons to 21 years old who are placed by court order prior to their eighteenth birthday whose special needs can best be met through the medium of a small group A specialized group facility may serve a maximum of 1 child enrolled in Children's Habilitation Residential Program (CHRP) and 8 other foster children or 2 children enrolled in CHRP and 5 other foster children. Emergency placements will not exceed maximum established limits. Facilities that exceed established capacity at the time the rule takes effect may not accept additional children into the home until capacity complies with the rule.

Specialized Group Facility Maximum Capacity.jpg  
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1. "Specialized Group Homes or Group Centers" who are serving children enrolled in the Children's Habilitation Residential Program (CHRP) waiver shall be in compliance with rules contained within the Department of Health Care Policy and Financing's Medical Assistance Manual at Section 8.508 (10 CCR 2505-10)

2. A "Specialized Group Home" is located in a house owned or otherwise controlled by the group home parents who are primary responsible for the care of the children and reside at the home.
3. A "Specialized Group Center" is located in a facility owned or controlled by a governing body that hires the group center parents or personnel who are primarily responsible for the care of the children 7.701.22

#### **7.701.22 Child Care' Center**

"Child care centers" , less than 24-hour programs of care defined at Section 26-6-102(1) C.R.S., include the following types of facilities:

- A. A "large child care center" provides care for 16 or more children between the ages of 2 1/2 and 16 years
- B. A "small child care center" provides care for 5 through 15 children Between the ages of 2 and 16 years
- C. An "infant nursery" provides care for children between the ages of 6 weeks and 18 months.
- D. A "toddler nursery" provides care for children between the ages of 12 months (when walking independently) and 36 months.
- E. "Preschool" is a part-day child care program for 5 or more children between the ages of 2 1/2 and 7 years
- F. "Kindergarten" provides a program for children the year before they enter the first grade.
- G. A "school-age child care center" is a child care center that provides care for 5 or more children who are between 5 and 16 years of age. The centers purpose is to provide child care and/or an outdoor recreational experience using a natural environment. The center operates for more than one week during the year. The term includes facilities commonly known as "day camps," "summer camps." "summer playground programs," "before and after school programs." and "extended day programs." This includes centers operated with or without compensation for such care, and with or without stated educational purposes
  1. A "building-based school-age child care program" is a child care program that provides care for 5 or more children who are between 5 and 16 years of age. The center is located in a building that is regularly used for the care of children.
  2. A "mobile school-age child care program" provides care for 5 or more children who are at least 7 years of age or have completed the first grade. Children move from one site to another by means of transportation provided by the governing body of the program. The program uses no permanent building on a regular basis for the care of children.
  3. An "outdoor-based school-age child care program" provides care for 5 or more children who are at least 7 years of age or have completed the first grade. This program uses no permanent building on a regular basis for the care of children. Children are cared for in a permanent outdoor or park setting.
- H. A "Residential Camp" is a facility operating for three or more consecutive 24-hour days for the care of 5 or more children. The campers must have completed kindergarten or be at least 6 years old to 18 years old.

1. A residential camp may have a "Primitive Camp" which is a portion of the permanent camp premises or another site at which the basic needs for camp operation such as places of abode, water supply systems, and permanent toilet and/or cooking facilities are not usually provided.
  2. A "Trip Camp" is a camp in which children move from one site to another by means of the child's own power or by a transportation mode permitting the child's guidance of a vehicle or animal. The trip camp originates in Colorado and operates for three or more consecutive 24-hour days during the year for the care of 5 or more children who are at least 10 years old or have completed the fourth grade to 18.
- I. A "Day Treatment Center" is a facility that provides less than 24-hour care for groups of 5 or more children from 5 to 18 years of age and for those persons to 21 years old who are placed in the program by court order prior to their eighteenth birthday. The center must provide a structured program of various types of psycho-social and/or behavioral treatments to prevent or reduce the need for placement of the child out of the home or community. This definition does not include special education programs operated by a public or private school system or programs that are licensed by other regulations of the Department of Human Services for less than 24-hour care of children, such as a child care center or part-day preschool.

#### **7.701.23 Child Placement Agency**

A "Child Placement Agency" , defined at 26-6-102(2), C.R.S., is any corporation, partnership, association, firm, agency, institution, or person unrelated to the child being placed, who places or arranges for placement any child under the age of 18 years with any family, person or institution for purposes of foster care, treatment and/or adoption. The natural parents or legal guardian of any child who places that child for care shall not be deemed to be a Child Placement Agency.

To arrange for placement is to act as an intermediary by assisting a parent or guardian or legal custodian to place or plan to place a child with persons unrelated to the child for 24-hour care.

Any agency from out of state placing a child within Colorado must be licensed as a child placement agency by the Colorado Department of Human Services unless the placement services are coordinated with and provided by a county department of social services or a child placement agency licensed by the department.

#### **7.701.24 Residential Child Care Facility**

- A. "Residential Child Care Facility" , defined at 26-6-102(8), C.R.S., shall provide 24-hour residential group care and treatment for 5 or more children between the ages of 3 and 18 years old and for those persons to 21 years old who are placed by court order prior to their eighteenth birthday. A residential child care facility must offer opportunities for a variety of experiences through a group living program and specialized services that can be used selectively in accordance with an individual plan for each child. A residential child care facility includes "Shelter Care Facilities" and "Crisis Care Facilities" (see Sections 7.705.81 and 7.705.91).
- B. "Transition Program" may be a component of an RCCF program in which the child is residing in the RCCF part of the time and in a living situation that child is expected to move to after treatment in the RCCF is completed. The purpose of transition is to enable the child to transition to the home or a less restrictive setting in a manner that prepares the child for success in the new setting.

#### **7.701.25 Secure Residential Treatment Center**

A "Secure Residential Treatment Center" , defined at 26-6-102(9), C.R.S., provides care and treatment in a secure setting for persons up to 21 years of age.

## **7.701.26 Other Definitions**

- A. "Affiliate of a licensee" means any person or entity that owns more than five (5) percent of the ownership interest in the business operated by the licensee or the applicant for a license, or any person who is directly responsible for the care and welfare of children served, any executive, officer, member of the governing board, or employee of a licensee, or a relative of a licensee, which relative provides care to children at the licensee's facility, or is otherwise involved in the management or operations of the licensee's facility.
- B. For the purposes of all child care licensing rules, the terms "child battering", "child abuse", "child molesting", and "child neglect" are terms to be considered within the definition of abuse set forth in Section 19-1-103, C.R.S., unless otherwise indicated.
- C. The "Consumer Product Safety Commission" , as referred to in rules regulating child care facilities, means the National Commission that establishes standards for the safety of children's equipment and furnishings and for playground safety. Information about these guidelines may be obtained from the Office of Information and Public Affairs, U.S. Consumer Product Safety Commission (CPSC), Washington, D.C. 20207. The CPSC web address is <http://www.cpsc.gov>. The local U.S. Consumer Product Safety Commission Office is located at 1961 Stout Street, Denver, Colorado 80294. You may contact a Senior Resident Investigator in the Denver office for information. This rule refers to the current edition of the Consumer Product Safety Commission standards, in effect when rules referencing the Commission are referenced, and does not include later amendments to or editions of the standards. The standards may be examined at any State Publications Depository Library.
- D. A "critical incident" is a serious life safety or potential life safety incident or concern that poses a danger to the life, health, and/or well-being of a child or children at the facility or of a staff member at the facility.
- E. "Department" is the Colorado Department of Human Services.
- F. "Facility" is any business or operation established for the purpose of providing child care services that are required to be licensed pursuant to the Child Care Licensing Act, Section 26-6-101 et seq., C.R.S.
- G. "Final Agency Action" means the determination made by the State Department, after opportunity for hearing to deny, suspend, revoke, or demote to probationary status a license issued pursuant to the Child Care Licensing Act or an agreement between the Department and the licensee concerning the demotion of such a license to a probationary license.
- H. "Governing body" is the individual, partnership, corporation, or association in whom ultimate authority and legal responsibility are vested for the administration and operation of the child care facility.
- I. "Licensing specialist" is the authorized representative of the Colorado Department of Human Services who inspects child care facilities to ensure compliance with licensing requirements and to investigate possible violations of those requirements.
- J. "Negative licensing action" means a Final Agency Action resulting in the denial, suspension, or revocation of a license issued pursuant the Child Care Licensing Act or the demotion of such a license to a probationary license.

## **7.701.3 APPLICATION PROCESS**

### **7.701.31 Original Application**

- A. A completed original application accompanied by the appropriate fee must be submitted to the Department a minimum of 60 days prior to the proposed opening date for the facility.
- B. A licensing evaluation will occur only after the department has received the complete application and appropriate fee.

#### **7.701.32 Use of Reports and Records of Child Abuse or Neglect for Background and Employment Inquiries [Rev. eff. 9/1/06]**

A request to determine whether any owner, applicant, employee, licensee or resident of a licensed facility, or any supervisory employee of a guest care facility, was found to be responsible in a confirmed report of child abuse or neglect reported to the State Department's automated system shall be directed to and be the responsibility of the State Department.

- A. An inquiry is not necessary regarding out of state employees of a children's resident camp working in a temporary capacity for fewer than ninety (90) calendar days, if the employee changes employment to a different facility that has the same licensing body;
- B. The request must be made within ten (10) calendar days of the first day of employment for each employee or facility on the State prescribed form, accompanied by the required fee paid by check or money order (for fee assessment see section 7.000.73).
- C. The request must be accompanied by the individual's written authorization to obtain such information from the State automated system, if applicable.
- D. The State Department will inform the requesting party in writing of whether the individual has been confirmed to be responsible for an incident of child abuse or neglect.
  - 1. If the result of the inquiry is that the individual has been confirmed as responsible for an incident of child abuse or neglect, the State Department shall provide the requesting party with information regarding the date of the reported incident, the type of abuse or neglect with the severity level, and the county department that confirmed the report.
  - 2. If the result of the inquiry is that the individual has not been confirmed to be responsible for an incident of child abuse or neglect, the State Department shall notify the requesting party of this fact.
- E. The information provided by the State Department shall serve only as the basis for further investigation. The director or operator may inform an applicant or employee that the report from the State Department's automated system was a factor in the director or operator's decision with regard to the applicant or employee's employment.
- F. Any person who willfully permits or who encourages the release of data or information related to child abuse or neglect contained in the State Department's automated database to persons not permitted access to such information commits a Class 1 misdemeanor and shall be punished as provided in Section 18-1.3-501, C.R.S.

#### **7.701.33 Criminal Record Check**

- A. Each applicant for an original license or certificate for a foster care home, or original license for a center, facility, or agency and any adult who resides in the licensed or certified facility must submit to the Colorado Bureau of Investigation (CBI) a complete set of fingerprints taken by a qualified law enforcement agency to obtain any criminal record held by the CBI. Payment of the fee for the criminal record check is the responsibility of the individual being checked or the home, center, facility, or agency.

- B. Only in the case of a children's resident camp, out-of-state persons employed in a temporary capacity for less than 90 days are not required to be fingerprinted to obtain a criminal record check. Each person exempted from fingerprinting and being checked with the State Department's automated system must sign a statement which affirmatively states that she/he has not been convicted of any charge of child abuse or neglect, unlawful sexual offense, or any felony.

Prospective employers of such exempted persons shall conduct reference checks of the prospective employees in order to verify previous work history and shall conduct personal interviews with each such prospective employee.

- C. At the time the annual declaration of compliance is submitted to the department, a criminal record check is required only for adults living at the licensed facility who have not previously obtained one. Because the Colorado Bureau of Investigation (CBI) provides the Department with ongoing notification of arrests, owners, applicants, licensees, and persons who live in the licensed facility who have previously obtained a criminal record check are not required to obtain additional criminal record checks.

- D. Each owner, employee, and newly hired employee of a facility or agency must submit to CBI a complete set of fingerprints to obtain any criminal record held by the CBI. Payment of the fee for the criminal record check is the responsibility of the individual being checked or the facility or agency. The results of the criminal record check must be maintained at the home, center, facility, or agency and must be available for review upon request by a licensing specialist.

1. Employees and volunteers who are transferring from one child care facility to another or from a school district to a child care facility are not required to be re-fingerprinted if they complete the following process:
  - a. New employees must obtain their CBI clearance letter or a photocopy of their processed fingerprint card from their former employer or school district. They must attach it to a new fingerprint card, the top portion of which they have completed. The new fingerprint card must include the new employer's address and the new employer's license I.D. number in the box labeled MNU. "Transfer - Child Care" must be inserted in the "Reason Fingerprinted" block. The CBI clearance letter (or photocopy of the old fingerprint card) and the new fingerprint card must be sent with a \$2 money order payable to CBI to: Colorado Bureau of Investigation, 690 Kipling St., Ste. 3000, Denver, CO 80215. Those facilities that have accounts with CBI are not required to send the \$2 money order; instead, they shall enter their CBI account number in the OCA block of the new fingerprint card.
  - b. New employees who cannot obtain the CBI clearance letter or photocopy of the processed fingerprint card from their former employer must have their fingerprints retaken and follow the process detailed in Section 7.701.33, D, 1, a.
  - c. When an individual leaves employment, the facility must submit to CBI a completed Notification of Name Removal form to request the removal of the individual's name from their facility license number in the CBI database.
  - d. School district employees who currently work at a child care facility must have their criminal history report linked to the license number of the child care facility as well as the school district. These employees can be linked to the child care license number by following the transfer process detailed at Section 7.701.33, D, 1, a.
2. Licensees must send a copy of an employee's or a resident's criminal record check to his/her



new employer upon written request from that employer

3. Any adult volunteer, working as a staff member to meet the required staff child ratio or staff qualifications, who works 14 days or more in a calendar year, must submit to CBI a complete set of fingerprints taken by a qualified law enforcement agency to obtain a criminal record check. The results of the criminal record check must be maintained at the facility or agency and must be available for inspection by a licensing specialist.
4. Requests for a criminal record check must be submitted to the CBI within 5 working days of the day that the individual begins to work at the facility or agency.
5. For the purposes of these rules, "convicted" means a conviction by a jury or by a court and shall also include a deferred judgment and sentence agreement, a deferred prosecution agreement, a deferred adjudication agreement, an adjudication, and a plea of guilty or nolo contendere.
6. Facilities and agencies that hire individuals who have been convicted of any felony, except those listed in a-f below, misdemeanor child abuse, unlawful sexual behavior, or any misdemeanor, the underlying factual basis of which has been found by the court on record to include an act of domestic violence must inform the department of that hiring within 15 calendar days of receiving knowledge of the conviction.
7. A child care facility shall not employ, or a child placement agency shall not employ or certify, an individual who has been convicted of:
  - a. Child abuse, as specified in Section 18-6-401, C.R.S.
  - b. A crime of violence, as defined in Section 18-1.3-406, C.R.S.
  - c. Any felony offenses involving unlawful sexual behavior, as defined in Section 16-22-102(9), C.R.S.
  - d. Any felony, the underlying factual basis of which has been found by the court on the record to include an act of domestic violence, as defined in Section 18-6-800.3, C.R.S.
  - e. Any felony involving physical assault, battery, or a drug-related/alcohol-related offense within the five years preceding the date of application for a license or certificate;
  - f. Any offense in any other state, the elements of which are substantially similar to the elements listed in a-e above; or,
8. No license or certificate to operate any agency or facility shall be issued by the Department, a county department, or a licensed Child Placement Agency if the person applying for such license or certificate or an affiliate of the applicant, a person employed by the applicant, or a person who resides with the applicant of the facility.
  - a. Has been determined to be insane or mentally incompetent by a court of competent jurisdiction and, should a court enter, pursuant to Part 3 or Part 4 of Article 14 of Title 15, C.R.S. or Section 27-10-109(4) or 27-10-125, C.R.S., an order specifically finding that the mental incompetency or insanity is of such degree that the applicant is incapable of operating a family child care home, foster care home, child care center, or child placement agency, the record of such determination and entry of such order being conclusive evidence thereof.

b. Has shown a pattern of misdemeanor convictions within the ten (10) years immediately preceding submission of the application. "Pattern of misdemeanor" shall include consideration of Section 26-6-108(2), C.R.S., regarding suspension, revocation and denial of a license, and shall be defined as:

1) three (3) or more convictions of 3rd degree assault as described in Section 18-3-204, C.R.S., and/or any misdemeanor, the underlying factual basis of which has been found by any court on the record to include an act of domestic violence as defined in Section 18-6-800.3, C.R.S.; or,

2) five (5) misdemeanor convictions of any type, with at least two (2) convictions of 3rd degree assault as described in Section 18-3-204, C.R.S., and/or any misdemeanor, the underlying factual basis of which has been found by any court on the record to include an act of domestic violence as defined in Section 18-6-800.3, C.R.S.; or,

3) seven (7) misdemeanor convictions of any type.

E. Any individual who is obtaining a criminal record check and who has lived in Colorado for 24 or fewer months must request that the CBI obtain a criminal record check from the Federal Bureau of Investigation (FBI). Payment of the fee for the FBI check is the responsibility of the individual who is obtaining the check or the facility or agency.

F. The Department may deny, revoke, suspend, change to probationary or fine a child care facility or child placement agency if the applicant(s), an affiliate of the applicant, or any person living with or employed by the applicant has:

1. Been convicted in Colorado or in any other state of any felony, or has entered into a deferred judgment agreement or a deferred prosecution agreement in Colorado or in any other state to any felony other than those offenses specified in Section 26-6-104(7), C.R.S., or child abuse, as specified in Section 18-6-401, C.R.S., the record of conviction being conclusive evidence thereof, notwithstanding Section 24-5-101, C.R.S.; or,

2. Been convicted of third degree assault, as described in Section 18-3-204, C.R.S., any misdemeanor, the underlying factual basis of which has been found by the court on any record to include an act of domestic violence, as defined in Section 18-6-800.3, C.R.S., any misdemeanor violation of a restraining order, as described in Section 18-6-803.5, C.R.S., any misdemeanor offense of child abuse as defined in Section 18-6-401, C.R.S., or any misdemeanor offense in any other state, the elements of which are substantially similar to the elements of any one of the offenses described in this paragraph; or,

3. Used any controlled substance as defined in Section 12-22-303(7), C.R.S. or consumed any alcoholic beverage or been under the influence of a controlled substance or alcoholic beverage during the operating hours of the facility; or,

4. Been convicted of unlawful use of a controlled substance as specified in Section 18-18-404, C.R.S., unlawful distribution, manufacturing, dispensing, sale, or possession of a controlled substance as specified in Section 18-18-405, C.R.S., or unlawful offenses relating to marijuana or marijuana concentrate as specified in Section 18-18-406, C.R.S.; or,

5. Consistently failed to maintain standards prescribed and published by the Colorado Department of Human Services; or,

6. Furnished or made any misleading or any false statement or report to the Colorado

Department of Human Services; or,

7. Refused to submit to the Colorado Department of Human Services any reports, or refused to make available to the Department any records required by it in making investigation of the facility for licensing purposes; or,
  8. Failed or refused to submit to an investigation or inspection by the Colorado Department of Human Services or to admit authorized representatives of the Department at any reasonable time for the purpose of investigation or inspection; or,
  9. Failed to provide, maintain, equip, and keep in safe and sanitary condition premises established or used for child care pursuant to standards prescribed by the Colorado Department of Public Health and Environment and the Colorado Department of Human Services or by ordinances or regulations applicable to the location of the foster care home; or,
  10. Willfully or deliberately violated any of the provisions of the Child Care Licensing Act; or,
  11. Failed to maintain financial resources adequate for the satisfactory care of children served in regard to upkeep of premises and provision for personal care, medical services, clothing, and other essentials in the proper care of children; or,
  12. Been charged with the commission of an act of child abuse or an unlawful sexual offense, as specified in Section 18-3-411(1), C.R.S., if:
    - a. Such individual has admitted committing the act or offense and the admission is documented or uncontroverted; or,
    - b. An Administrative Law Judge finds that such charge is supported by substantial evidence; or,
  13. Admitted to an act of child abuse or if substantial evidence is found that the licensee, person employed by the licensee, or person who resides with the licensed in the foster home has committed an act of child abuse, as defined at Section 19-1-103(1), C.R.S.; or,
  14. Been the subject of a negative licensing action.
- G. The Department may deny an application for a child care facility license or a child placement agency license if the applicant is a relative affiliate of a licensee, as described in Section 26-6-102(1)(d), C.R.S., of a child care facility or child placement agency, which licensee is the subject of a previous negative licensing action or is the subject of a pending investigation by the Department that may result in a negative licensing action.
- H. For all CBI fingerprint checks required in this Section 7.701.33, including those confirming a criminal history as well as those confirming no criminal history, the Department will conduct a comparison search on the State Judicial Department's ICON system. The ICON search, based on name, date of birth, and any other available criminal history data that the Department deems appropriate, is used to determine the type of crime(s) for which a person was arrested or convicted and the disposition thereof.

#### **7.701.34 Fire and Health Inspections, Zoning Codes**

- A. Prior to the original license being issued, following the renovation of the facility that would affect the licensing of the facility and at least every 2 years thereafter, all child care facilities except family child care homes must be inspected and obtain an approving inspection report from the local

department of health or the State Department of Public Health and Environment and from the local fire department. These reports must be maintained at the facility and be available for review upon request by a licensing specialist.

- B. Prior to the original license being issued, all child care facilities, except for family foster homes, must submit to the state department written approval from the local zoning department approving operation of the facility. The approval must include the address of the child care facility and the ages and numbers of children to be served. The facility must also submit written zoning department approval to the state department any time there is a change to the license, including moving the facility to another location, increasing the capacity, or adding different ages of children.
- C. All child care facilities must operate in compliance with local planning and zoning requirements of the municipality, city and county, or county where the facility is located.

#### **7.701.35 Changes Requiring a New Application**

A license is deemed surrendered and a new application is required in the following circumstances:

- A. Change of licensee, owner, or governing body.
- B. Change in classification of facility or service offered.
- C. Change in location of the facility.

#### **7.701.36 Permanent License**

- A. A permanent license is granted when the Department is satisfied that the facility or agency is in compliance with the appropriate Department rules and the Child Care Licensing Act. The permanent license remains in effect until surrendered or revoked.
- B. Once a permanent license has been issued, the licensee must annually submit to the Department a declaration of compliance with the applicable licensing rules and notice of continuing operation on the form prescribed by the Department, along with the appropriate annual fee as set forth at Section 7.701.4.
- C. Failure to submit the annual declaration and fee will constitute a consistent failure to maintain department standards and may result in revocation of the license.
- D. At the time the annual declaration of compliance is submitted to the Department, the licensee must also complete a written self- evaluation on the forms prescribed by the Department. The self-evaluation form must be maintained by the facility and be available for review upon request by the licensing specialist.

#### **7.701.37 Provisional License**

- A. A provisional license or certificate may be issued only for the initial 6- month licensing period.
- B. This license permits the facility to operate while it is temporarily unable to conform to all rules upon proof by the applicant that attempts are being made to comply with the rules.
- C. If an applicant holds a valid provisional license at the time of application for a permanent license, the provisional license will remain in effect until the application is acted on by the Department.

#### **7.701.38 Probationary License**

- A. A probationary license or certificate may be granted to a licensed facility or agency as provided in Section 26-6-108(2), C.R.S.
- B. If the applicant holds a valid probationary license at the time of application for a permanent license, the current license will remain in effect until the application is acted on by the Department.

#### **7.701.39 Multiple Licenses**

- A. If a licensee wishes to assume child care responsibility in more than one classification of care, separate applications, fees, and licensing evaluations are required for each classification.
- B. If a licensee wishes to operate more than one facility of the same classification but at different locations, a separate application, fee, and evaluation are required for each location.

#### **7.701.4 FEES**

- A. The appropriate application fee outlined in 7.701.4, C, must be submitted to the department with the application for a child care license at least 60 calendar days prior to the opening date of the facility or the expiration date of the provisional or probationary license.
- B. The appropriate application fee outlined in 7.701.4, C, must be submitted to the department annually, at least 60 calendar days prior to the anniversary date of the license, along with a completed continuation declaration.

- C. Following is a schedule of original and annual fees for all types of child care facilities and agencies:

##### **Original And Annual Fees For All Types Of Child Care Facilities And Agencies**

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##### **Child Care Centers, Preschools, School Age Child Care and Resident Camps**

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##### **Child Placement Agencies Licensed for Foster Care**

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##### **Child Placement Agencies Licensed for Adoption**

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##### **Residential Child Care Facility**

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##### **Homeless Youth Shelter**

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##### **Secure Residential Treatment Center**

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##### **Changes to Licenses / Duplicate Licenses**

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#### **7.701.5 ADMINISTRATION**

##### **7.701.51 Governing Body**

- A. The governing body must be identified by its legal name on the original application and annual declaration. The names and addresses of individuals who hold primary financial control and officers of the governing body must be fully disclosed to the Department.
- B. The governing body must demonstrate to the Department, upon request, that there is sufficient financial support to operate and maintain the facility in accordance with all rules in Section 7.701, the rules regulating the specific type of facility, and the goals and objectives of the facility.

##### **7.701.52 Reports**

- A. Within 24 hours, excluding weekends and holidays, of the occurrence of a critical incident at the facility or within 24 hours of a child's return to the facility if the child was on authorized or unauthorized leave from the facility, the facility or child placement agency must report in writing to the licensing or certifying authority the following critical incidents involving a child in the care of the facility or a staff member on duty:
1. The death of a child or staff member as a result of an accident, suicide, assault, or any natural cause while at the facility, or while on authorized or unauthorized leave from the facility.
  2. An injury to a child or staff member that requires emergency medical attention by a health care professional or admission to a hospital.
  3. A mandatory reportable illness, as required by the Colorado Department of Public Health and Environment, of a child or staff member that requires emergency medical attention by a health care professional or admission to a hospital.
  4. Any allegation of physical, sexual, or emotional abuse or neglect to a child that results in reporting to a law enforcement or social services agency.
  5. Any fire that is responded to by a local fire department.
  6. Any major threat to the security of a facility including, but not limited to, a threat to kidnap a child, riots, bomb threats, hostage situations, use of a weapon, or drive by shootings.
  7. A drug or alcohol related incident involving a staff member or a child that requires outside medical or emergency response.
  8. An assault, as defined by Sections 18-3-201 through 18-3-204, C.R.S., by a child upon a child, a child upon a staff member, or a staff member upon a child which results in a report to law enforcement.
  9. A suicide attempt by a child at the facility which requires emergency intervention.
  10. Felony theft or destruction of property by a child while in placement at the facility for which law enforcement is notified.
  11. Any police or sheriff contact with the facility for a crime committed by a resident while in placement at the facility.

A report of a critical incident must be submitted on the Colorado Department of Human Services, Division of Child Care, critical incident form.

- B. The following items must be reported in writing to the department within 10 working days, unless otherwise noted:
1. Any legal action against a facility, agency, owner, operator, or governing body that relates to or may impact the care or placement of children.
  2. Change of director of facility or agency.
  3. Proposed change in the number, sex, or age of children for whom the facility is licensed that differs from that authorized by the license.
  4. Change of address of child placement agency.

5. Changes in the physical facility or use of rooms for child care at a facility.
6. Closure of the facility or agency.
7. Change of name of the facility or agency.
8. Change of residents in the facility, not to include those residents placed in the facility by a county department or a child placement agency.

#### **7.701.53 Reporting of Child Abuse**

- A. A child care facility must require each staff member of the facility to read and sign a statement clearly defining child abuse and neglect pursuant to state law and outlining the staff member's personal responsibility to report all incidents of child abuse or neglect according to state law.
- B. Any caregiver or staff member in a child care facility who has reasonable cause to know or suspect that a child has been subjected to abuse or neglect or who has observed the child being subjected to circumstances or conditions that would reasonably result in abuse or neglect must immediately report or cause a report to be made of such fact to the county department of social services or local law enforcement agency.
- C. If the suspected child abuse occurred at the child care facility, the report of suspected child abuse must be made to the county department of social services, police department, or other law enforcement agency in the community or county in which the child care facility is located.
- D. If the suspected child abuse did not occur at the child care facility, the report of suspected child abuse must be made to the county department of social services in the county in which the child resides or to the local law enforcement agency in the community in which the incident is believed to have occurred.
- E. At the time of admission the facility must give the child's parent or guardian information that explains how to report suspected child abuse or child neglect.

#### **7.701.54 Investigation of Child Abuse**

- A. Staff members of the county department of social services or a law enforcement agency that investigates an allegation of child abuse must be given the right to interview staff and children in care and to obtain names, addresses, and telephone numbers of parents of children enrolled at the child care facility.
- B. Any report made to the law enforcement authorities or a county department of social services of an allegation of abuse of any child at the child care facility will result in the temporary suspension or reassignment of duties of the alleged perpetrator to remove the risk of harm to the child/children if there is reasonable cause to believe that the life or health of the victim or other children at the facility is in imminent danger due to continued contact between the alleged perpetrator and the child/children at the facility. Such suspension or reassignment of duties will remain in effect pending the outcome of the investigation by the appropriate authorities.

#### **7.701.55 Reporting of Licensing Complaints**

Child care facilities must provide written information to parents at the time of admission and staff members at the time of employment on how to file a complaint concerning suspected licensing violations. The information must include the complete name, mailing address, and telephone number of the Colorado Department of Human Services, Division of Child Care.

#### **7.701.56 Posting Licensing Information**

- A. At all times during the operating hours of the facility, except for foster care homes, the facility/agency shall post the current child care license in a prominent and conspicuous location easily observable by those entering the child care facility or agency. For family foster care homes, the certificate shall be available for review/upon request.
- B. At all times during the operating hours of a family child care home, child care center, school-age child care center, or children's resident camp, the facility shall post its most recent licensing inspection report or a notice as to where the report may be reviewed at the facility by the parent or legal guardian of a child or their designee.
- C. At all times during the operating hours of a child care facility, except for family foster care homes and child placement agencies, the facility shall post in a prominent and conspicuous location information regarding the procedures for filing a complaint with the Colorado Department of Human Services, Division of Child Care, including the telephone number and mailing address. For family foster care homes and child placement agencies, information for filing a complaint shall be made available upon request.
- D. The facility must post in every room of the child care facility, excluding bedrooms and living areas, the license capacity of the room and the staff-to-child ratio required by regulation to be maintained for the age of children cared for in the room.

#### **7.701.6 CONFIDENTIALITY OF RECORDS**

- A. The records concerning the licensing of facilities and agencies are open to the public except as provided below.
- B. Anyone wishing to review a record must make a written request to the department.
- C. The following documents are confidential and not available for review:
  - 1. Information identifying children or their families.
  - 2. Scholastic records, health reports, social or psychological reports. These are available only to the person in interest.
  - 3. Personal references requested by the department.
  - 4. Reports and records received from other agencies, including police and child protection investigation reports.

#### **7.701.7 PARENTAL ACCESSIBILITY**

- A. During hours of operation, a facility must allow access to parents and guardians having legal custody of a child in care to those areas of the facility that are licensed for child care.
- B. During the hours of operation, the facility's most recent licensing, fire department, and health department inspection reports must be accessible to parents and legal guardians of children in care or their designee and to parents and legal guardians considering placing their children in care at the facility.

#### **7.701.8 PERJURY STATEMENT - APPLICATION FORMS FOR EMPLOYMENT WITH A CHILD CARE PROVIDER**



Every application used in the State of Colorado for employment with a child care provider or facility, or for the certification of a foster home, shall include the following notice to the applicant:

"Any applicant who knowingly or willfully makes a false statement of any material fact or thing in the application is guilty of perjury in the second degree as defined in Section 18-8-503, C.R.S., and, upon conviction thereof, shall be punished accordingly."

## **7.702 RULES REGULATING CHILD CARE CENTERS (LESS THAN 24-HOUR CARE)**

All child care centers must comply with the "General Rules for Child Care Facilities" as well as the "Rules Regulating Child Care Centers (Less Than 24-Hour Care)" and the "Rules and Regulations Governing the Sanitation of Child Care Centers in the State of Colorado."

All infant nurseries and toddler nurseries must meet all of the requirements for centers in 7.702 except where rules specific to infant or toddler nurseries replace other rules. Rules that apply *only* to infant and toddler nurseries appear in bold type/italics at the end of sections. These rules either replace other rules in that section or are in addition to other rules in that section. The "contents" pages also indicate rules that apply only to infant nurseries and toddler nurseries.

### **7.702.1 POLICY OF THE COLORADO DEPARTMENT OF HUMAN SERVICES**

It is the policy of the Colorado Department of Human Services ("the Department") to promote and encourage child care in environments that contribute to the safety, health, protection, and well-being of children. To verify compliance with standards intended to ensure such an environment, the department requires thorough and ongoing appraisals of child care facilities, persons working in the child care profession, and the nature of care provided.

### **7.702.2 DEFINITIONS**

- A. Child care centers, less than 24-hour care (referred to as "centers"), provide comprehensive care for children when the parents or guardians are employed or otherwise unavailable to care for the children. Child care centers may operate 24 hours a day, but the children are cared for at the center fewer than 24 hours a day.
- B. Child care centers, less than 24-hour programs of care, include the following types of facilities:
  - 1. A "large child care center" provides care for 16 or more children between the ages of 2 1/2 and 16 years.
  - 2. A "small child care center" provides care for 5 through 15 children between the ages of 2 and 16 years.
  - 3. An "infant nursery" provides care for children between the ages of 6 weeks and 18 months.
  - 4. A "toddler nursery" provides care for children between the ages of 12 months (when walking independently) and 36 months.
  - 5. "Preschool" is a part-day child care program for 5 or more children between the ages of 2½ and 7 years.
  - 6. "Kindergarten" provides a program for children the year before they enter the first grade.
  - 7. A "drop-in child care center" provides occasional care for 40 or fewer children between the ages of 12 months and 13 years of age for short periods of time not to exceed six (6) hours in any 24-hour period of time or fifteen (15) hours in any seven (7) day period of

time.

### **7.702.3 ADMINISTRATION**

(See also "Administration" at 7.701.5, General Rules for Child Care Facilities)

- A. The governing body must appoint a director who will be responsible to the governing body and who will be delegated the authority and responsibility for the operation of the center according to its defined purpose and policies.
- B. The governing body must formulate the purpose and policies to be followed by the center. It must have a regular planned review of such purpose and policies to determine that the center is in compliance with licensing rules.
- C. The governing body is responsible for providing necessary facilities, adequate financing, qualified personnel, services, and program functions for the safety and well-being of children in accordance with these rules.
- D. The director of the center is responsible for administering the center in accordance with licensing rules. The director must plan and supervise the child development program, plan for or participate in selection of staff, plan for orientation and staff development, supervise and coordinate staff activities, evaluate staff performance, and participate in the program activities.
- E. The director of a part-day preschool program operated by an accredited public school system is responsible for administering the center in accordance with licensing rules and supervising the child development program. The director must plan for or participate in orientation and staff development, supervise or coordinate staff activities, participate in the evaluation of staff performance, and participate in program activities.

### **7.702.4 POLICIES AND PROCEDURES**

#### **7.702.41 Statement of Policies and Procedures**

A written statement of the center's policies and procedures must be made available to parents and guardians and to staff and must include the following:

- A. The center's purpose and its philosophy on child care.
- B. The ages of children accepted.
- C. Services offered for special needs children in compliance with the Americans with Disabilities Act.
- D. The hours the center is open, specific hours during which special programs are offered, holidays when the center is closed.
- E. The policy regarding inclement and excessively hot weather.
- F. The procedure concerning admission and registration of children.
- G. An itemized fee schedule.
- H. The procedure for identifying where children are at all times.
- I. The policy on discipline.

- J. The procedure, including notification of parents or guardians, for handling children's illnesses, accidents, and injuries.
- K. The procedures for responding to emergencies such as lost children, tornadoes, and fires.
- L. The procedure for transporting children, if applicable, including transportation arrangements and parental permission for excursions and related activities.
- M. The written policy and procedure governing field trips, television and video viewing, and special activities, including the staffs responsibility for the supervision of children.
- N. The policy on children's safety related to riding in a vehicle, seating, supervision, and emergency procedures on the road.
- O. The procedure for releasing children from the center only to persons for whom the center has written authorization.
- P. The procedures followed when a child is picked up from the center after the center is closed or not picked up at all, and to ensure that all children are picked up before the staff leave for the day.
- Q. The procedure for caring for children who arrive late to the center and their class/group is away from the center on a field trip or excursion.
- R. The procedure for storing and administering children's medicines and delegation of medication administration in compliance with Section 12-38-132, C.R.S., of the "Nurse Practice Act" .
- S. The procedure concerning children's personal belongings and money.
- T. The policy concerning meals and snacks.
- U. The policy on diapering and toilet training.
- V. The policy regarding visitors to the center.
- W. The policy on parent and staff conferences to inform the parents or guardians of the child's behavior, progress, and social and physical needs.
- X. The procedure for filing a complaint about child care (see 7.701.5, General Rules for Child Care Facilities).
- Y. The policy regarding the reporting of child abuse (see 7.701.5, General Rules for Child Care Facilities).
- Z. The policy regarding notification when child care service is withdrawn and when parents or guardians withdraw their children from the center.

#### **7.702.42 Communication, Emergency, and Security Procedures**

(See also Sections 7.702.41, A, and 7.702.62, B)

- A. The center must notify the parents or guardians in writing of significant changes in its services, policies, or procedures so that they can decide whether the center continues to meet the needs of the child.
- B. For security purposes, a sign-in/sign-out sheet or other mechanism for parents and guardians must

be maintained daily by the center. It must include, for each child in care, the date, the child's name, the time when the child arrived at and left the center, and the parent or guardian's signature or other identifier.

- C. The center must have a working telephone with the number available to the public. Emergency telephone numbers of the following must be posted near the telephone: a 911 notice, where 911 is available, or rescue unit if 911 isn't available; a hospital or emergency medical clinic; the local fire, police, and health departments; and Rocky Mountain Poison Control. The telephone must be available to staff at all times that the center is in operation.
- D. The center must be able to provide emergency transportation to a health care facility at all times.
- E. The director of the center or the director's delegated substitute must have a means for determining at all times who is present at the center.
- F. A written policy regarding visitors to the center must be posted and a record maintained daily by the center that includes at a minimum the visitor's name and address and the purpose of the visit. At least one piece of identification must be inspected for individuals who are strangers to personnel at the center.
- G. The center must release the child only to the adult(s) for whom written authorization has been given and is maintained in the child's record (see 7.702.101). In an emergency, the child may also be released to an adult for whom the child's parent or guardian has given verbal authorization. If the staff member who releases the child does not know the adult, identification must be required to assure that the adult is authorized to pick up the child.
- H. The center must have a procedure for dealing with individuals not authorized by the parent or guardian of a child who attempts to have the child released to them.
- I. The center must have a written emergency procedure that explains, at a minimum, how the center will be evacuated in case of fire or other disaster requiring evacuation, how to function during a tornado alert, and the reporting of reportable communicable illnesses to the local health department pursuant to regulations of the State Department of Public Health and Environment.
- J. The center must have a written procedure for closing the center at the end of the day to ensure that all children are picked up.

#### **7.702.43 Personnel Policies, Orientation, and Staff Development**

- A. The duties and responsibilities of each staff position and the lines of authority and responsibility within the center must be in writing.
- B. At the time of employment, staff members must be informed of their duties and assigned a supervisor.
- C. Prior to working with children, the staff member must read and be instructed about the policies and procedures of the center, including those related to hygiene, sanitation, food preparation practices, proper supervision of children, and reporting of child abuse. Staff members must sign a statement indicating that they have read and understand the center's policies and procedures.
- D. The child care center must ensure that all staff are familiar with the licensing rules governing child care centers within 90 days of employment at the center.
- E. The center must have a staff development plan that includes a minimum of nine (9) clock hours of training each year for all staff. The training must relate to one or more of the following areas-child

growth and development, healthy and safe environment, developmentally appropriate practices, guidance, family relationships, cultural and individual diversity, and professionalism.

- F. All staff must complete at least 1½ hours of training in universal precautions within 3 months of employment at the center and at least every 3 years thereafter. Renewal of universal precautions training may be part of the first-aid training.
- G. If volunteers are used by the center, there must be a clearly established policy in regard to their function, orientation, and supervision. See also Section 7.702.54, D.

## **7.702.5 PERSONNEL**

### **7.702.51 General Requirements for All Personnel**

- A. All personnel at the center must demonstrate an interest in and a knowledge of children and concern for their proper care and well-being.
- B. The center must determine if any staff person who works at the center has ever been convicted of a crime as found at Section 7.701, D, 5 or 6 of the General Rules for Child Care Facilities.
- C. A criminal record check request must be submitted to the Colorado Bureau of Investigation within 5 days that an individual is employed by the center. The personnel file of each staff member of the center must contain clearance or arrest report from the Colorado Bureau of Investigation resulting from the staff member's criminal record check. The requirement for a criminal record check is found in Section 7.701.33 of the General Rules for Child Care Facilities.
- D. A request for a review of the State Department's automated system must be made within 10 working days of each staff member's first day of employment. The method for making the request is found in Section 7.701.32 of the General Rules for Child Care Facilities.
- E. Staff members must be current for all immunizations routinely recommended for adults by their health care provider.
- F. All staff members must submit to the center a medical statement, signed and dated by a licensed physician or other health care professional, verifying that they are in good mental, physical, and emotional health appropriate for the position for which they have been hired. This statement must be dated no more than 6 months prior to employment or within 30 days after the date of employment. This statement must indicate when subsequent medical statements are required.

Subsequent medical statements must be submitted as required in writing by a physician or other health care professional.

- G. If, in the opinion of a physician or mental health practitioner, an employee's examination or test results indicate a physical, emotional, or mental condition that could be hazardous to a child, other staff, or self, or that would prevent satisfactory performance of duties must not be assigned or returned to a position until the condition is cleared to the satisfaction of the examining physician.

### **7.702.52 Director Qualifications - Large Child Care Center**

- A. The educational requirements for the director or substitute director of a large center must be met by satisfactory completion of one of the following. (All course hours are given in semester hours, but equivalent quarter hours are acceptable.) Official college transcripts must be submitted to the Department for evaluation of qualifications.

1. A Bachelor's or Master's degree with a major emphasis in child development, early childhood

education, or early childhood special education, including the minimum course work outlined at Section 7.702.52, A, 5, from a regionally accredited college or university. No additional experience is required.

2. A Bachelor's degree in elementary education from a regionally accredited college or university including course credits in the following topics:
  - a. Three semester hours or equivalent in child growth and development or child psychology.
  - b. Three semester hours or equivalent in methods and techniques of teaching the preschool-age child.
  - c. A total of 6 semester hours or equivalent quarter hours in 2 classes: health, nutrition, and safety; and administration of a child care center which must be at least 3 semester or equivalent quarter hours; or  
  
Directors of public school preschools must attend a department-approved course of training in nutrition and implementation of rules regulating child care.
3. A 2-year college degree in child development or early childhood education from a regionally accredited college or university, including 24 semester hours in courses listed at Section 7.702.52, A, 5.
4. All individuals holding an approval letter for director qualifications from the Department of Human Services, with a date of January 1, 2002 or earlier, are considered director qualified. Prior to January 1, 2002, individuals are required to complete a minimum of 24 semester hours of college credit from a regionally accredited college or university in the following courses:
  - a. Twelve semester hours in the area of early child growth and development and early childhood education. At least 1 course must be completed in child psychology or early child growth and development and 1 course in methods and techniques in teaching the preschool-age child. A maximum of 3 semester hours in a supervised student participation course will be counted toward the 12 semester hour requirement. This practicum must be with children from birth to 6 years of age.
  - b. Three semester or equivalent quarter hours in psychology.
  - c. Three semester or equivalent quarter hours in sociology.
  - d. A total of 6 semester or equivalent quarter hours in nutrition and administration of a child care center with at least 3 semester hours in administration.
5. After January 1, 2002, all individuals submitting official transcripts for evaluation and/or completing necessary college coursework to become qualified as a director of a large center must complete a 3 semester hour or equivalent quarter hour course from a regionally accredited college or university in each of the following subject areas (a total of 24 semester hours or equivalent quarter hours):
  - a. Introduction to Early Childhood Professions
  - b. Introduction to Early Childhood Lab Techniques

- c. Guidance Strategies for Children
- d. Health, Nutrition, and Safety
- e. Administration of Early Childhood Care and Education Programs
- f. Administration: Human Relations for Early Childhood Professions
- g. Methods and Techniques of Teaching the Preschool-Age Child
- h. Early Childhood Growth and Development

B. The experience requirements for the director of a large center must be met by completion of the following amount of work experience in a child development program, which includes working with a group of children in such programs as a preschool, child care center, kindergarten, or Head Start program:

- 1. Persons with a 2-year college degree in early childhood education or child development must have 12 months (1,820 hours) of verified experience working directly with children in a child development program.
- 2. Persons with a bachelor's degree and completion of courses specified in Sections 7.702.52, A, 2, or 7.702.52, A, 5, must have 12 months (1,820 hours) of verified experience working directly with children in a child development program.
- 3. Persons who have no degree but have completed the 24 semester hours specified in Section 7.702.52, A, 5, must have 24 months (3,640 hours) of verified experience working directly with children in a child development program.
- 4. Verified experience acquired in a licensed family child care home or school-age child care center may count for up to half of the required experience for director qualifications.

C. Substitute directors of large child care centers who do not meet all of the director educational and experience requirements may substitute for the director for a maximum of 2 weeks per calendar year if they meet one or more of the following requirements:

- 1. At least one year of experience as group leader at the center.
- 2. A Bachelor of Arts or Bachelor of Science in the human services field.
- 3. Qualification as group leader and completion of at least half of the required coursework for director qualifications including the administration class.

D. Whenever the director of a drop-in child care center cannot be present fifty percent (50%) of any day the center is in operation, a substitute that meets one of the following qualifications must be present:

- 1. At least one (1) year of experience as a qualified group leader at the drop-in child care center;
- 2. 18 months experience as a qualified group leader with children under 12 years of age and at least six (6) months experience at the drop-in child care center;
- 3. A Bachelor of Arts or Bachelor of Science degree from an accredited college or university in the human services field; or,

4. Qualification as a group leader and completion of at least half of the required coursework for director qualifications, including one of the administration classes.
- E. In addition to the annual ongoing training of 9 hours each year, directors of large full-day child care centers operating more than 6 hours a day must complete a 3 semester hour course every 5 years in a subject related to the operation of a child care center.

#### **7.702.53 Director Qualifications - Small Child Care Center**

- A. The director or substitute director of a small center must have completed one of the following:
1. Three years' satisfactory experience in the group care of children and at least 3 semester hours, or 45 hours of documented training, in early childhood education; or
  2. Two years' college education at an accredited college or university, with at least a 3-semester-hour course in early childhood education, and 1 year of satisfactory experience in the group care of children; or
  3. Current certification as a Child Development Associate (CDA) or Certified Child Care Professional (CCP) or other department-approved credential; or
  4. A 2-year college degree in child development or early childhood education from an accredited college or university.
- B. Satisfactory experience includes being a licensee of a family child care home; a teacher's aide or teacher in a child care center, preschool, or elementary school; or work with disabled children.

#### **7.702.54 Qualifications for Other Staff Members**

- A. Group Leader
1. A group leader assigned responsibility for a single group of children and working under the supervision of a director must be at least 18 years of age and must meet at least one of the following qualifications:
    - a. A bachelor's degree from an accredited college or university.
    - b. A 2-year college degree in child development or early childhood education from an accredited college or university.
    - c. Current certification as a Child Development Associate (CDA) or Certified Child Care Professional (CCP) or other department-approved credential.
    - d. Completion of 2 years of college education with at least 1 college course in child development, plus 6 months (910 hours) of verified experience in the care and supervision of 4 or more children under 6 years of age who are not related to the individual.
    - e. Twelve semester hours in college-level credits in the area of child growth and development and/or early childhood education, plus 9 months (1,395 hours) of verified experience in the care and supervision of 4 or more children under 6 years of age who are not related to the individual.
    - f. Completion of a course of training approved by the department that includes training and work experience with children.



- g. Completion of a vocational or occupational education sequence in child growth and development plus 12 months (1,820 hours) of verified experience in the care and supervision of 4 or more children under 6 years of age who are not related to the individual.
  - h. Thirty-six months (5,460 hours) of verified experience in the care and supervision of 4 or more children under 6 years of age who are not related to the individual.
- 2. An assistant group leader must be at least 21 years old and have at least 1 year (1,820 hours) of verified experience in the care and supervision of 4 or more children under 6 years of age who are not related to the individual.
  - 3. Satisfactory experience includes being a licensee of a family child care home; a teacher's aide or teacher in a child care center, preschool, or elementary school; or work with disabled children.

#### B. Kindergarten Teacher

Each teacher of a kindergarten class must have the same qualifications as a director for a large center (see Section 7.702.52) or be state certified or licensed as an elementary or early childhood teacher.

#### C. Staff Aide

Staff aides must be at least 16 years of age and must work directly under the supervision of the director or a group leader.

Infant Staff Aides must be at least 18 years of age.

#### D. Volunteers

(See also Section 7.702.43, G)

- 1. Volunteers must have qualifications suitable to the tasks they are assigned.
- 2. Volunteers must be supervised and given instruction as to the center's policies and procedures.

### **7.702.55 Required Staff and Supervision**

#### A. Staff-Child Ratios

- 1. At any time when 9 or more children are present at the center, at least 2 adult staff members must be on duty. When 8 or fewer children are present, there must be at least 1 adult staff member working with the children and a second adult on call and immediately available.
- 2. The director or director substitute of the center must be present at the center at least 60 percent of any day that the center is open.
- 3. The director or substitute director of an extended hour drop-in child care center operating at least six days per week must be present at the center or involved in director activities at least fifty percent (50%) of the hours of operation of any day the center is in operation.
  - a. If the director is not on site at the center for a portion of any day the center is in

operation, the director must be available by phone.

b. The director must be present in the center at least 30 hours each week.

4. There must be assigned at least a qualified group leader for each group of children.
5. In determining staff-child ratios, only staff members who work directly with children are counted.
6. Formal kindergarten class sessions must have 1 staff member for each 25 or fewer children in attendance. At other parts of the day when children are in attendance, the ratio must be 1 staff member to each 15 or fewer children.
7. Children of the director or of staff members who attend the center and other children on the premises for supervision and care must be counted against the licensed capacity in the appropriate age groups.
8. In determining staff-child ratios, children who are in attendance for only part of the day are counted only while at the center.

#### 9. Staff-Child Ratios

##### Staff-Child Ratios

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In other preschool age combinations, the staff ratio for the youngest child must be utilized if more than 20% of the group is composed of younger children.

Drop-in child care centers may follow a ratio of one (1) adult for every eight (8) children for children in a mixed age group of 2 years of age to 12 years. 1-2 children 1 year of age to 2 years of age may join the preschool age group of children for short periods of time for structured activities as long as the 1 year old children are safely confined in a toddler seat or high chair.

#### 10. Maximum Group Size for Children

##### Maximum Group Size for Children

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In other preschool age combinations, the maximum group size for the youngest child must be utilized if more than 20% of the group is composed of younger children.

Preschool age and school-age groups of children must be separated into age-appropriate activities. Groups are not required to be separated from each other by permanent or portable dividers or walls.

Toddler-age groups of children must be separated from each other by permanent or portable dividers or other methods as approved by the Department.

#### B. Service/Housekeeping Personnel

1. Service personnel must be available for housekeeping and food preparation as needed for adequate operation and maintenance of the center.
2. Assignment of housekeeping and maintenance duties to child care staff must not interfere with their supervisory responsibilities and child care duties.

#### C. Health Consultant

1. Staff must consult with a currently Colorado licensed registered nurse with knowledge and experience in maternal and child health, a pediatric nurse practitioner or a family nurse practitioner, or a pediatrician at least once a month at the child care facility. The monthly consultation must be specific to the needs of the facility and include some of the following topics: training, delegation and supervision of medication administration and special health procedures, health care, hygiene, disease prevention, equipment safety, nutrition, interaction between children and adult caregivers, and normal growth and development. In part day preschools that operate less than four (4) hours per day or drop-in child care centers, consultation must occur as often as the nurse delegating medications requires.
2. The date and content of each consultation must be recorded and maintained in the center's files.

#### D. Substitutes

1. Qualified staff must be available to substitute for regularly assigned staff who are sick, on vacation, or otherwise unable to be on duty.
2. In the absence of the director of a small center, an individual who meets director qualifications for a small center must substitute for the director.
3. When the director of a large center is absent from the center, a staff member meeting group leader qualifications (see Section 7.702.54, A) must be in charge of the center. When 8 or fewer children of mixed ages are present at the center, with no more than 2 under 2 years of age, an assistant group leader may be in charge for no more than 1 hour of the day or for a longer period of time in extremely low attendance situations.
4. If the director of a large center cannot be present 60 percent of any day, a center staff member or other individual who meets director qualifications for a large center must substitute for the director.
5. When there is a director vacancy, a director-qualified substitute must be at the center at least 60 percent of any day the center is open until a new director is appointed.
6. Substitutes for directors of part-day public school preschools may be from the sponsoring school system's list of approved substitutes. Substitutes who do not meet director qualifications must consult with a qualified director on administering the center in accordance with early childhood principles and practices and licensing rules.

### **7.702.56 Infant Nursery Staff**

#### A. Staff Requirements

1. If a center operates solely as an infant nursery, there must be a director who meets the qualifications for a director of either a small center or a large center (Sections 7.702.52 and 7.702.53), depending upon the number of children for which the infant center is licensed.
2. The infant nursery must have an infant nursery supervisor who has verified training and experience in one of the following:
  - a. A registered nurse, licensed to practice in Colorado, with a minimum of 6 months of experience in the care of infants, which may include parenting experience with an infant.

- b. A licensed practical nurse with 12 months of experience in the care of infants, which may include parenting experience with an infant.
  - c. An adult who holds a certificate in infant and toddler care from an accredited college or university with completion of a minimum of 30 semester hours in subject matter described in Section 7.702.56, A, 2, e.
  - d. An adult who is certified as a Child Development Associate (CDA) or Certified Child Care Professional (CCP).
  - e. An adult who:
    - is at least 19 years of age, and
    - is qualified as a group leader (Section 7.702.56, A, 4), and
    - has a minimum of 12 months of verifiable full-day experience in the group care of infants or toddlers; and,
    - has completed at least 3 semester hours or equivalent in college courses on the development and care of infants and toddlers in a group setting or has successfully completed a course of training approved by the Department specific to the development and care of infants and toddlers in a group setting. Content in such courses must include the following subject matter: child growth and development, infant stimulation, nutrition, and care practices with children birth to 3 years old.
  - f. An adult who:
    - is at least 19 years of age, and
    - is qualified as a group leader (Section 7.702.56, A, 4), and
    - has at least 2 years of verifiable full-day experience in the group care of infants or toddlers, and
    - will complete within the first 6 months of employment 3 semester hours or equivalent quarter hours of college courses or successfully complete a course of training approved by the Department specific to the development and care of infants and toddlers in a group setting with content as described in Section 7.702.56, A, 2, e.
  - g. An adult who has had 5 years of verifiable full-day, supervised experience in the care of children under 3 years of age.
3. An infant nursery group leader must have completed 8 hours of orientation in the infant nursery; have at least 6 months of experience in the care of infants or toddlers, which may include parenting experience; and must meet qualifications for a group leader found at Section 7.702.54, A, or be qualified as an infant nursery supervisor.
  4. The infant nursery staff aide must be at least 18 years old, must have completed 8 hours of orientation at the infant nursery and must work under the direct supervision of an infant group leader.
  5. There must be at least 1 staff member on duty in each infant room at all times who holds a

current department-approved first aid and safety certificate that includes CPR for all ages of children.

**B. Required Staff and Supervision**

(See chart in Section 7.702.55)

1. In the infant nursery there must be a qualified infant nursery supervisor present 60 percent of the hours of operation of the infant nursery who is responsible for the care of the infants. An individual qualified as an infant nursery group leader must be responsible during the remaining time.
2. The infant nursery supervisor or an infant nursery group leader must be assigned to each group of 10 or fewer infants in attendance. An infant nursery staff aide may be assigned to assist the infant nursery supervisor or group leader when 6 through 10 infants are in care in the group to maintain the staff ratio of 1 adult for each 5 infants.
3. There must be assigned at least 1 infant nursery supervisor in the infant nursery for each 20 or fewer infants in attendance.

**7.702.57 Toddler Nursery Staff**

**A. Staff Requirements**

1. If a center operates solely as a toddler nursery, there must be a director who meets the qualifications for a director of either a large center or a small center ( 7.702.52 and 7.702.53), depending upon the number of children for which the toddler center is licensed.
2. The toddler group leader, a staff member assigned responsibility for a single group and working under the supervision of the director, must meet at least one of the following qualifications:
  - a. A registered nurse, licensed to practice in Colorado, with a minimum of 6 months of experience in the care of infants and/or toddlers.
  - b. An adult who holds a certificate in infant and toddler care from an accredited college or university with completion of at least 30 semester hours or equivalent in such courses as child growth and development, nutrition, and care practices with children birth to 3 years old.
  - c. An adult who is certified as a Child Development Associate (CDA) or Certified Child Care Professional (CCP) or holds another Department-approved certificate.
  - d. A licensed practical nurse with at least 12 months of verifiable experience in the care of children less than 3 years old.
  - e. An adult who meets the education and experience requirements for group leader of a large center (Section 7.702.54, A).
3. Staff aides must be at least 16 years of age, must work directly under the supervision of the director or a toddler group leader, and must have completed 8 hours of orientation at the toddler nursery.
4. For every 15 or fewer toddlers, there must be at least 1 staff member in the toddler nursery at

all times who has a current Department-approved first aid and safety certificate that includes CPR for all ages of children.

**B. Staff-Child Ratio & Group Size**

(See chart in Section 7.702.55)

One qualified toddler group leader must be assigned to each group at all times, and additional staff must be assigned to meet the required staff-child ratio.

**7.702.58 Infant and Toddler Nurseries Affiliated with Public School Teen Parent Programs**

A. Infant nursery programs affiliated with teen parent programs that are operated by accredited public school systems and on school premises may substitute the following age requirements for those at Section 7.702.2,B, 3.

1. The minimum age of infants in care is 7 days.
2. Infants between the ages of 7 and 14 days may be accepted for care only with written approval from a health care professional and if there are no medical complications for the infant and/or teen mother.
3. Infants 14 days of age and over may be accepted for care if there are no medical complications for the infant and/or teen mother.
4. The maximum age of infants in care may be extended only in those situations where no teen parent program toddler nursery exists. In this circumstance, an infant may remain in the infant nursery until the end of the school semester in which the infant becomes 18 months old.

B. Infant and toddler nursery programs affiliated with teen parent programs that are operated by accredited public school systems on school premises may substitute the following staff requirements for those at 7.702.56 and 7.702.57:

1. Director qualifications may be met by a certified teacher with a major in home economics education or a vocationally credentialed teacher in consumer and homemaking or early childhood occupations. The director must complete at least 3 semester hours in administration of a child care center.
2. The director must be present in the nursery or adjacent teen parent classroom at least 60 percent of any day the center is open.
3. If the director cannot be present 60 percent of any day, an individual who meets director qualifications must substitute for the director.
4. Infant staff aides must be at least 15 years of age and may be parents-to-be, parents of enrolled infants, or students enrolled in a child care related course with the sponsoring school system.
5. Substitutes for nursery staff must be from the sponsoring school system's list of approved substitute nursery staff members. Substitutes who do not meet minimum staff qualifications can work in the nursery no more than 10 consecutive days per assignment.
6. Substitutes for nursery staff must hold a current department-approved first aid and safety certificate that includes CPR for all ages of children.

## **7.702.6 CHILD CARE SERVICES**

### **7.702.61 Admission Procedure**

- A. The center can accept children only of the ages for which it has been licensed. At no time can the number of children in attendance exceed the number for which the center has been licensed.  
Rev. eff. 11/1/01
- B. Admission procedures must be completed prior to the child's attendance at the center and must include:
  - 1. A pre-admission interview with the child's parent(s) or guardian(s) to determine whether the services offered by the center will meet the needs of the child and the parent(s) or guardian(s).
  - 2. Explanation of the center's policies and procedures. Parents' signatures must be secured, indicating that they have read and agree to the center's policies and procedures.
  - 3. Completion of the registration information required for inclusion in the child's record as required in Section 7.702.101.
- C. Special Needs Children
  - 1. The admission of a child with special needs must be in compliance with the Americans with Disabilities Act, and a reasonable effort must be made to accommodate the child's needs and to integrate the child with other children. (See General Rules for Child Care Facilities, Section 7.701.14)
  - 2. Upon enrollment of a child with special health care needs, the center must obtain from the child's parent or guardian a copy of an existing individualized health care plan for the child that can be reviewed, adopted, and implemented by the center staff when providing child care services to the child. An individualized health care plan shall include the following as needed for the child and must be signed by the health care provider:
    - a. Medication schedule
    - b. Nutrition and feeding instructions
    - c. Medical equipment or adaptive devices, including instructions
    - d. Medical emergency instructions
    - e. Toileting and personal hygiene instructions
  - 3. For a child with special health care needs, the center must obtain written instructions for providing services from the child's parents or legal guardian and the health care provider. If the child with special health care needs does not have an existing individualized health care plan, the individualized health care plan must be completed within 30 calendar days of the child's enrollment.
  - 4. The plan must be updated at least every 12 months from the date of the initial plan or as changes occur.
  - 5. The center must inform its child care health consultant as soon as possible of the enrollment of a child with special health care needs so staff can receive training and support as

indicated by the child's individualized health care plan.

- D. If the parent agrees that the center should care for a child in the infant nursery who is 18 months or older, the center must have on file a written statement from a licensed physician confirming that care for the child is appropriate in this infant nursery.
- E. If the parent agrees that the center should care for a child in the toddler nursery who is 12 months old but not walking independently, or is over 36 months old, the center must have on file a written statement from a licensed physician confirming that care for the child is appropriate in this toddler nursery.

#### **7.702.62 Health Care**

##### **A. Statements of Health Status Rev. eff. 4/1/06**

1. At the time of admission, the center must obtain health information for each child entering the center, including any known allergies, medication being taken, special diets required, or any chronic health condition. The name, address, and phone number of the child's physician and dentist must be provided. The center must also obtain information regarding all immunizations a child has had, including month, date, and year each immunization was administered. Immunizations must be recorded on the Certificate of Immunization form supplied by the Colorado Department of Public Health and Environment (CDPHE) or an approved alternate certificate approved by CDPHE. If immunizations are contraindicated because of a medical condition, a statement from the child's health care provider must be on file.
2. The parent or guardian of each child 2 1/2 years of age and over must submit a statement of the child's current health status signed and dated by an approved health care professional who has seen the child within the last 12 months. The statement of health status must be obtained at the time of admission or within 30 days after admission or for a drop-in child care center at the second visit, whichever is longer, must be kept at the center. If a child has an identified health condition or developmental concern including, but not limited to, seizures, asthma, diabetes, allergies, heart or respiratory conditions, and physical disabilities, information and instruction on care of the child must be included on the statement of health status signed by the physician. The center has the right to refuse to admit a child if a statement from an approved health care professional is not submitted.
3. Subsequent statements of the child's current health status, signed and dated by an approved health care professional, must be obtained at least annually for each child 2 to 6 years of age and whenever the director has reason to suspect that a child participating in the program may have a condition potentially hazardous to others, or finds that the child's general condition indicates the need for such examination.
4. For children 6 years of age and older or who have completed the first grade, subsequent statements of health status must be submitted every 3 years thereafter.
5. For children attending a drop-in child care center, subsequent statements are not necessary if there have been no health changes in the child and the parent(s) attest in writing to the health status of the child on an annual basis. Children with special medical needs must have the statement from a health care professional as indicated at Section 7.702.62, A, 3-4.
6. If a parent or guardian of a child wishes an exemption from the requirement for immunizations due to religious or personal beliefs, a written statement signed by the child's parent or



guardian which states the reason for such an exemption and that the child is in good health must be submitted to the center.

Parents must be notified in writing prior to their child's enrollment in the center if non-immunized children are admitted to the center. This information must be contained in the policies required at Section 7.702.41, F.

7. In an infant nursery, at the time of admission or within 30 days, each infant's parent or guardian must submit a statement dated and signed by an approved health care professional. The statement must include information about the infant's health status and special needs. All immunizations must be recorded on the Certificate of Immunization supplied by CDPHE or an approved alternate certificate approved by CDPHE, including month, day, and year each immunization was administered, and must be on file the first day of admission.

Infants and toddlers under 2 years of age must follow the recommended Academy of Pediatrics schedule for routine health assessments

8. In a toddler nursery, at the time of admission or within 30 days, each toddler's parent or guardian must submit a statement of the child's health status as required at Section 7.702.62, A, 2, signed and dated by an approved health care professional who has seen the child within the last 6 months.

#### B. Emergency Procedures

1. At the time of admission, the center must obtain telephone numbers of the child's physician or other appropriate health care professional and numbers where the parent or guardian and at least 1 other responsible adult can typically be reached in the event of accident, illness, or other emergency.
2. The center must obtain written authority to arrange for medical care in the event of an emergency. This information must be on file the first day a child attends the center.
3. When accidents, injuries, or illnesses occur, the director or responsible adult in charge must notify the parent or guardian of the child and if necessary call the physician or medical facility as instructed in writing by the parent or guardian.
4. For every 30 or fewer children in attendance, there must be at least one (1) staff member on duty who holds a current department-approved first aid and safety certificate (including CPR for all ages of children) and is responsible for administering first aid and CPR to children. Such individuals must be with the children at all times when the center is in operation. If children are at different locations, there must be a first aid and CPR qualified staff member at each location.
5. Children too ill to remain in the group must be comfortably cared for and supervised until they can be taken home or suitably cared for elsewhere.
6. Portable first aid kits must be available to staff at all times, including field trips, and must be located out of reach of children and maintained in a sanitary condition. First aid kits must be checked and restocked on at least a monthly basis.

#### C. Medication

1. Prescription and non-prescription (over-the-counter) medications for eyes or ears, all oral medications, topical medications inhaled medications, and certain emergency injections

can be administered only with the written order of a person with prescriptive authority and with written parental consent. Centers may administer medications for chronic health conditions or emergency situations.

2. The written order by the licensed prescribing practitioner must include:

- Child's name
- Licensed prescribing practitioner name, telephone number, and signature
- Date authorized
- Name of medication and dosage
- Time of day medication is to be given
- Route of medication
- Length of time the medication is to be given
- Reason for medication (unless this information needs to remain confidential)
- Side effects or reactions to watch for
- Special instructions

3. Medications must be kept in the original labeled bottle or container. Prescription medications must contain the original pharmacy label that lists:

- Child's name
- Prescribing practitioner's name
- Pharmacy name and telephone number
- Date prescription was filled
- Expiration date of the medication
- Name of the medication
- Dosage
- How often to give the medication
- Length of time the medication is to be given

Over-the-counter medication must be kept in the originally labeled container and be labeled with the child's first and last name.

4. In the case medication needs to be given on an ongoing, long-term basis, the authorization and consent forms must be reauthorized on an annual basis. Any changes in the original medication authorization require a new written order by the prescribing practitioner and a change in the prescription label. Verbal orders taken from the licensed prescriber may be accepted only by a licensed registered nurse.

5. All child care staff designated by the center director to give medications must complete the 4-hour Department-approved medication administration training and have current first aid and universal precautions training prior to administering medication. Staff of drop-in child care centers may complete training from their nurse consultant delegating medication.
6. The center's licensed health consultant:
  - Must observe and document the competency of each staff member involved in medication administration
  - Must delegate to one or more of the child care staff the task of medication administration, to include routine medications only. For medications not covered in the medication training, the health consultant must provide additional training, delegate on a one-to-one (1:1) basis, and provide ongoing supervision.
7. Medications must be kept in an area, locked and inaccessible to children. Controlled medications must be counted and safely secured, and specific policies regarding their handling require special attention in the center's policies. Access to these medications must be limited (see Section 12-22-318, C.R.S.).
8. Children are not allowed to bring medications to child care unless accompanied by a responsible adult. If a medication is out of date or left over, parents are responsible for picking up the medication. If parents do not respond, the center is responsible for the disposal of medications according to center policy and procedures. Disposal of medications must be documented.
9. A written medication log must be kept for each child. This log is part of the child's records. The log must contain the following:
  - Child's name
  - Name of the medication, dosage, and route
  - Time medication is to be given
  - Special instructions
  - Name and initials of the individuals giving the medication
  - Notation if the medication was not given and the reason
10. Topical preparations such as petroleum jelly, diaper rash ointments, sunscreen, bug sprays, and other ointments may be administered to children with written parental authorization. These preparations may not be applied to open wounds or broken skin unless there is a written order by the prescribing practitioner.

#### D. Sun Protection

1. The center must obtain the parent or guardian's written authorization and instructions for applying sunscreen to their children's exposed skin prior to outside play. A doctor's permission is not needed to use sunscreen at the center.
2. When supplied for an individual child, the sunscreen must be labeled with the child's first and last name.

3. If sunscreen is provided by the center, parents must be notified in advance, in writing, of the type of sunscreen the center will use.
4. Children over 4 years of age may apply sunscreen to themselves under the direct supervision of a staff member.

#### E. Control of Communicable Illnesses

1. When children have been diagnosed with a communicable illness such as hepatitis, measles, mumps, meningitis, diphtheria, rubella, salmonella, tuberculosis, giardia or shigella, the center must immediately notify the local health department or the State Department of Public Health and Environment, all staff members, and all parents and guardians of children in care. Children's confidentiality must be maintained.
2. The director must ask parents to report exposure of a child to communicable illness outside of the center, and, at the discretion of the director, the child should be excluded from the center for the period of time prescribed by the child's physician or by the local health department.

### **7.702.63 Personal Hygiene**

#### A. Hand Washing

Children's hand washing must be supervised and must be taught when necessary.

#### B. Diapering

(See also Section 7.702.83, A, 3)

The center must have one or more designated diaper change areas for all children in need of diaper changing. The diaper change area must:

1. Be a minimum of 36 by 18 inches in size and large enough to accommodate the size of the child
2. Be adjacent to or within reach of a hand washing sink
3. Have a place inaccessible to children for storing all diaper change supplies and disinfecting solutions and products
4. Have a sufficient supply of diapers at all times.

### **7.702.64 Physical Care**

#### A. General

1. All children must be under direct supervision of a responsible adult at all times.
2. The time a child arrives and leaves the center each day must be recorded. Attendance verification must be made periodically throughout the day by staff members at the center.
3. The center must provide a rest period for all preschool-age children remaining in the center longer than 4 hours. A rest period and rest equipment must also be provided for older children who require a rest time.

4. The center must provide mats or cots and a designated rest period for all preschool age children. Drop-in child care centers must provide mats or cots for at least fifty percent (50%) of the licensed capacity of the center. Children must not be forced to sleep. Children who do not sleep after a reasonable period of time must be provided with appropriate quiet toys and equipment to play with, such as puzzles or books.
5. The center must ensure that children are dressed appropriately for the weather before going outside.

#### B. Infant and Toddler Nurseries

1. The staff must have daily contact with adults who transport the infants and toddlers to and from the center.
2. Children must not be confined for prolonged periods of time to cribs, playpens, swings, high chairs, infant seats, or other equipment that confines movement. They must have an opportunity each day for freedom of movement, such as creeping, crawling, or walking in a safe, clean, open, uncluttered area.
3. Throughout the day, each child must have frequent, individual, personal contact and attention from an adult, such as being held, rocked, taken on walks inside and outside the center, talked to, and sung to.
4. There must be no attempt to toilet train children under the age of 18 months.
5. Staff must investigate whenever children cry.
6. Children must be allowed to form and observe their own pattern of sleep and waking periods. Special provision must be made so that children requiring a morning nap time have a separate area for their nap apart from space used for play.
7. Infant monitors may be used in separate sleeping rooms for infants under the following conditions:
  - a. The sound monitoring equipment is able to pick up the sounds of all sleeping infants. Additional equipment must be provided as necessary to provide adequate coverage.
  - b. The receiver of the sound monitoring equipment is actively monitored by staff at all times.
  - c. Sleeping infants are physically monitored and periodically checked by a staff member.
  - d. Sound monitoring equipment is regularly checked to assure that it is working correctly.

### **7.702.65 Food and Nutrition**

#### A. Meals & Snacks

1. Meals and nutritious snacks must be served at suitable intervals. Children who are at the center for more than 4 hours, day or evening, must be offered a meal that meets at least one-third of the child's daily nutritional needs.
2. The size of servings must be suitable for the child's age and appetite, and sufficient time must be allowed so that meals are unhurried.

3. In centers that do not regularly provide a meal, if a child brings a meal from home that does not appear to meet one-third of the child's daily nutritional needs, the center must have foods available to supplement that meal.
4. Staff members must sit with the children and encourage them to try a variety of food served. During meals, children should be encouraged to engage in conversation and to express their independence.
5. All food prepared by the center must be from sources approved by the local health department or the State Department of Public Health and Environment. All food must be prepared, served, and stored in such a manner as to be clean, wholesome, free from spoilage, and safe for human consumption. Home-canned vegetables, fruits, and meats cannot be served.
6. Meal menus must be planned at least 1 week in advance, dated, and posted in a place visible to parents. After use, menus must be filed and retained for 3 months. Records must be available for periodic review and evaluation.

#### B. Feeding the Infant

1. An individualized diet and feeding schedule must be provided according to a written plan submitted by the parent or by the child's physician with the knowledge and consent of the parent. A change of diet and schedule must be noted on each child's daily activity schedule and posted in an area clearly visible to the nursery staff.
2. Commercially prepared formula must be mixed according to the manufacturer's direction.
3. All infants under 6 months of age must be held for bottle feeding. Bottles must not be propped. Older infants must not be allowed to hold their own bottles when lying flat. Bottles must not be allowed in a crib with the infant.
4. Older infants must be provided with suitable solid foods that encourage freedom in self-feeding and must be fed in safe chairs such as high chairs or baby-feeding tables.
5. When the infant nursery provides food other than formula, food must be varied and include food from cereal, vegetable, fruit, and protein sources. When the center does not provide solid food, it must supply any additional foods and/or monitor the infant's total nutritional intake.
6. There must be a sufficient supply of bottles provided for the entire day; or if nursing bottles are to be reused, they must be washed, rinsed, and sanitized after each use.
7. Bottles of formula or breast milk must never be warmed in a microwave oven.
8. A staff member may not mix cereal with formula and feed it to an infant from a bottle or infant feeder unless there are written instructions from the child's health care provider.

#### C. Feeding the Toddler

1. Staff members must either feed toddlers or supervise them when they are eating, and children must be encouraged to try a variety of food served.
2. Toddlers must be sitting when drinking from a bottle. Bottles must not be allowed during nap time after the first 30 days in care.

3. Commercially prepared formula must be mixed according to the manufacturer's direction and each bottle marked with the child's name.
4. There must be a sufficient supply of bottles provided for the entire day; or if nursing bottles are to be reused, they must be washed, rinsed, and sanitized after each use.

#### **7.702.66 Discipline**

- A. Children must not be subjected to physical or emotional harm or humiliation.
- B. The director must not use, or permit a staff person or child to use, corporal or other harsh punishment, including but not limited to pinching, shaking, spanking, punching, biting, kicking, rough handling, hair pulling, or any humiliating or frightening method of discipline.
- C. Discipline must not be associated with food, rest, or toileting. No child should be punished for toileting accidents. Food must not be denied to or forced upon a child as a disciplinary measure.
- D. Separation, when used as discipline, must be brief and appropriate for the child's age. The child must be in a safe, lighted, well-ventilated area and be within sight and hearing of an adult. The child must not be isolated in a locked, closed room or closet.
- E. Verbal abuse and derogatory remarks about the child are not permitted.

#### **7.702.67 Overnight Care**

- A. All of the provisions required in Section 7.702 of these rules for child care centers apply to centers offering overnight care of children (care that extends through a large portion of the night). In addition, centers must observe the following provisions:
- B. A nutritious evening meal must be made available to children.
- C. Quiet activities must immediately precede the children's bedtime.
- D. Children's faces and hands must be washed, and children must be changed into comfortable clothing for sleeping.
- E. Each child must be provided with a comfortable separate bed, crib, or cot suitable for the child's age or a 2-inch sleeping mat or mattress. Each child must also be provided with sheets and a clean, washable covering. If mats or mattresses are used, the room temperature at floor level must be 68 to 72 degrees. Pads and mattresses must be fitted with a clean, washable, removable covering. Permission of parents or guardians must be obtained for each child who uses a sleeping mat or mattress placed on the floor.
- F. All children must be directly supervised at all times.
- G. The staff-child ratio for sleeping children is 1 adult when 6 or fewer children are in attendance and 2 adults when 7 to 12 children are in attendance, plus 1 adult for each additional 6 or fewer children.

#### **7.702.68 Activities**

##### **A. Activity Schedules**

1. The center must carry out a planned program suitable to the needs of the children. This program must be described in writing and be available for review when requested by the

department or by parents or guardians of children in care.

2. The program must include outdoor play each day except when the severity of weather, including temperature extremes, makes it a health hazard or when a child must remain indoors due to health reasons.
3. If the center takes children on routine short excursions, such activities and locations must be posted at the center.
4. If a child participates in activities away from the facility, the center must obtain the parent or guardian's written permission for the child to participate in the activity at a specific location and day. Staff ratios found at Section 7.702.55 must be maintained.
5. Television viewing, including videos, should not be permitted without the approval of a child's parents, who must be advised of the center's policy regarding television and video viewing.

#### B. Special Activities Staff

1. If the center engages in special activities away from the child care facility, the staff member responsible for the activity must possess evidence of appropriate experience, training, and/or certification in the program specialty. Verification of experience and/or certification must be in the staff member's personnel file at the center. This staff member must be present whenever the activity is being carried out unless otherwise indicated in these regulations.
2. The qualified supervising staff member of special activities has the following duties:
  - a. Direct training of other staff members working in the activity.
  - b. Assign duties to staff members.
  - c. Assure that all staff members supervising the activity are actively participating in the supervision of children.
  - d. Assure that all necessary equipment is complete, in good repair, and safe to use.
  - e. Assure that environmental hazards are not severe enough to cause danger to participating children.

#### C. Field Trips

1. The center must notify the children's parents or guardians in advance of any field trip. The staff-child ratio found at Section 7.702.55 must be maintained at all times.
2. Children must be actively supervised at all times.
3. An accurate itinerary must remain at the center.
4. The staff must have with them on a field trip the following information about each child: name, address, and phone number of the child's physician or other appropriate health care professional and the written authorization from the parent or guardian for emergency medical care.
5. A list of all children and staff on a field trip must be kept at the center.



#### D. Swimming

1. If the center uses a public pool for which the center is not responsible, the center need not provide a lifeguard if a qualified lifeguard is provided by the pool. Staff-child ratios must be maintained, and the lifeguard must not be counted in the staff to child ratio.
2. If the public or private pool does not provide a qualified lifeguard, staff members meeting qualifications as stated at Section 7.702.68, D, 3, a, must be provided by the center.
  - a. There must be at least 1 staff member at the pool for each 10 or fewer children.
  - b. Swimming area rules and emergency procedures must be posted at the swimming area and explained to the children.
  - c. Swimming is prohibited when fewer than the required qualified staff members are present.
3. If the center uses a swimming area at a lake or pond, swimming area rules and emergency procedures must be posted at the swimming area and explained to the children.
  - a. A swimming supervisor must be present who, as a minimum, holds a current American Red Cross lifeguard training certificate or equivalent certification from a group such as the YMCA or Boy Scouts.
  - b. An additional staff member who holds at least an American Red Cross lifeguard training certificate or equivalent must be present at the swimming area for each 30 additional children in the water.
  - c. At least 1 staff member must be at the swimming area for each 10 or fewer children present.
  - d. Swimming is prohibited when fewer than the required qualified staff members are present.
  - e. Swimming areas must be clearly designated.
4. The swimming pool or swimming area must meet the standards of the Colorado Department of Public Health and Environment or its local unit.
5. Before children are permitted to swim in water deeper than shoulder height, their swimming skills must be tested by staff members who hold an American Red Cross lifeguard training certificate or equivalent.
6. Child care staff must directly supervise and monitor all children while at the swimming area. Supervision must include monitoring children for exhaustion, distress, sunburn, heatstroke, and threat of drowning.
7. The following equipment must be available for use at the pool side or the lake shore where swimming is permitted:
  - a. A buoy or a lemon line; and
  - b. Reach pole; and
  - c. Backboard.

8. If swimming is permitted in a lake or a pond, a rescue boat equipped with a reach pole and a lemon line or a buoy must be available at all times.
9. If a center has shoreline activities such as wading, fishing, ecology, or nature studies, the center must have a written policy that defines qualifications of persons accompanying the group and safety guidelines to be followed. Staff members must be acquainted with the policy.
10. If the center has a permanent wading pool, children in care can use it only in the presence of an adult who holds a current American Red Cross basic lifeguarding certificate or equivalent and is responsible for providing lifesaving protection for the children. The required staff-child ratio must be maintained at all times.

#### E. Trampolines

1. The trampoline supervisor must have formal training and experience in use of the trampoline and knowledge of safety and spotting techniques.
2. Trampolines must be equipped with pads along the sides and kept in good repair.
3. Use of the trampoline is prohibited when there is no trampoline supervisor present.
4. Trampolines must be secured from unauthorized use.
5. Only 1 child is allowed on a trampoline at any one time, regardless of the size of the trampoline.
6. Staff spotters must be posted on 4 sides of each trampoline at all times. Spotters must not stand, sit, or lie on the trampoline, but must stand in a position of readiness, watching the jumper at all times.
7. Children must dismount the trampoline by sitting on the edge and sliding off. They must not be allowed to jump off the trampoline.

### **7.702.69 Transportation**

#### A. Transportation Provided by the Center

1. The center is responsible for any children it transports.
2. The center must obtain written permission from parents or guardians for any transportation of their child during child care hours.
3. The number of staff members who accompany children when being transported in the vehicle must meet the child care staff ratio found at Section 7.702.55. The driver of the vehicle is considered a staff member.
4. Children must not be permitted to ride in the front seat of a vehicle unless they are 4 years old or over, more than 40 pounds, and are secured in a child restraint system that conforms to all applicable Federal Motor Vehicle Safety Standards. Children must remain seated while the vehicle is in motion.
5. Children must be loaded and unloaded out of the path of moving vehicles.
6. Children must not be permitted to stand or sit on the floor of a moving vehicle, and their

arms, legs, and heads must remain inside the vehicle at all times.

7. Children must not be left unattended in the vehicle.
8. Transportation arrangements for school-age children must be by agreement between the center and the children's parents, i.e., whether the child can walk, ride a bicycle, or travel in a car. The center must monitor the children to be sure they arrive at the center when expected and follow up on their whereabouts if they are late. Written permission from parents or guardians for their children to attend community functions after school hours must include agreements regarding transportation.
9. Prior to a field trip or other excursion, the center must obtain information on liability insurance from parents and staff who transport children in their own cars and verify that all drivers have valid driver's licenses.

#### B. Requirements for Vehicles

1. Any vehicle used for the transportation of children to and from the center or during center activities must meet the following requirements:
  - a. The vehicle must be enclosed and have door locks.
  - b. The seats of the vehicle must be constructed and installed according to the vehicle manufacturer's specifications.
  - c. The vehicle must be kept in satisfactory condition to assure the safety of occupants. Vehicle tires, brakes, and lights must meet safety standards set by the Colorado Department of Revenue, Motor Vehicle Division.
  - d. Seating must be comfortable with a seat of at least 10 inches wide for each child.
2. In passenger vehicles, which include automobiles, station wagons, and vans with a manufacturer's established capacity of 16 or fewer passengers and less than 10,000 pounds, the following is required:
  - a. Each child must be restrained in an individual seat belt.
  - b. Two or more children must never be restrained in 1 seat belt.
  - c. Lap belts must be secured low and tight across the upper thighs and under the belly.
  - d. Children must be instructed and encouraged to keep the seat belt properly fastened and adjusted.
3. In vehicles with a manufacturer's established capacity of 16 or more passengers, seat belts for passengers are not required.

#### C. Requirements for Drivers of Vehicles

1. All drivers of vehicles transporting children must comply with applicable laws of the Colorado Department of Revenue, Motor Vehicle Division, and ordinances of the municipality in which the center operates.
2. All drivers of vehicles owned or leased by the center in which children are transported must have a current department- approved first aid and safety certificate that includes CPR for

all ages of children.

3. In each vehicle used to transport children, drivers must have access to a first aid kit.
4. The driver must ensure that all doors are secured at all times when the vehicle is moving.
5. The driver must make a good faith effort to ensure that each child is properly belted throughout the trip.

D. Transporting Infants and Toddlers

1. Children must be properly fastened into a child restraint system that conforms to all applicable Federal Motor Vehicle Safety Standards pursuant to Colorado law.<sup>2</sup>

There must be at least 1 adult, in addition to the driver, for each 5 or fewer infants/toddlers being transported. Each adult must have a current department-approved first aid and safety certificate that includes CPR for all ages of children.<sup>3</sup>

An adult must accompany each child to and from the vehicle.<sup>4</sup>

Infants and toddlers must not be transported in the front seat of a vehicle .

## **7.702.7 CHILD CARE EQUIPMENT AND MATERIALS**

### **7.702.71 General Requirements**

- A. Indoor and outdoor play equipment and materials must be appropriate for children's ages, size, and activities.
- B. Indoor and outdoor materials and equipment must be sufficiently varied and appropriate for the developmental needs of the children and the number attending.
- C. Indoor and outdoor equipment, materials, and furnishings must be sturdy, safe, and free of hazards.
- D. Durable furniture such as tables and chairs must be child-sized or appropriately adapted for children's use.
- E. Children must wear helmets when riding scooters, bicycling, skateboarding, or rollerblading.
- F. In infant nurseries, an adequate number of high chairs or other suitable pieces of equipment that meet federal Consumer Product Safety Commission standards must be provided for infant feeding.
- G. The infant nursery must have an adult rocking chair.
- H. Each infant nursery must have a piece of sturdy equipment that is easily mobile and will hold a minimum of 5 infants for use in emergency exiting.

### **7.702.72 Play-Equipment and Materials**

- A. Equipment and materials must be provided for both indoor and outdoor play.
- B. Outdoor play equipment must meet the following requirements:
  1. Swings must have seats made of a flexible material.

2. Moving equipment must be located toward the edge or corner of a play area or be designed in such a way as to discourage children from running into the path of the moving equipment.
  3. Metal equipment must be placed in the shade when possible and must be arranged so that children playing on one piece of equipment will not interfere with children playing on or running to another piece of equipment.
  4. The maximum height of any piece of playground equipment is 6 feet if accessible to children 2½ to 6 years of age, and 3 feet if accessible to children under 2½ years of age.
  5. All pieces of playground equipment must be designed to guard against entrapment and strangulation.
  6. All pieces of permanently installed playground equipment must be surrounded by a resilient surface of a depth of at least 4 inches. By January 1, 2003, for equipment over 3 feet, resilient material must be a depth of at least 6 inches. Rubber mats manufactured for such use consistent with the guidelines of the Consumer Product Safety Commission may be used in place of resilient material for both equipment heights.
  7. Sand used as a resilient surface must be raked regularly to retain its resiliency and to retain a depth of 6 inches.
  8. The use of any materials under permanently installed playground equipment other than wood chips, wood mulch, engineered wood fiber, pea gravel, synthetic pea gravel, shredded rubber tires, and fine loose sand must be approved by the Department.
- C. The center must have enough play materials and equipment so that at any one time each child for which the center is licensed can be individually involved. Separate play rooms or separate interest centers must be provided for each category of equipment required for the program. A variety of material and equipment from the following categories must be available.
1. Art Supplies
  2. Blocks and Accessories
  3. Books and Posters
  4. Dramatic Play Area
  5. Large Muscle Equipment
  6. Manipulative Toys
  7. Musical Equipment
  8. Science Materials
- D. If the center serves school-age children, it must have some age-appropriate materials and equipment from each of the following categories:
1. Arts and Crafts
  2. Games
  3. Sports

4. Science

5. Library

- E. An appropriate supply of play materials must be readily accessible to children and must be arranged in an orderly manner so that children can select, remove, and replace the play materials either independently or with minimum assistance.
- F. Toys and toy parts accessible to children under 3 years of age must be large enough that they cannot be swallowed or inhaled.
- G. Toys made of brittle, easily breakable plastic are not permitted for children under 5.
- H. In the infant nursery, some play equipment from the following list must be provided: mobiles, rubber washable toys, rattles, blocks, balls, record player, radio, tape player.
- I. In the toddler nursery, some play materials easily accessible to children must be provided from each of the following categories:
  - 1. Gross Motor Development
  - 2. Fine Motor Development
  - 3. Language Development
  - 4. Social Interaction
- J. Drop-in child care centers must provide access to indoor large muscle equipment, including, but not limited to, an indoor climbing structure with resilient surface underneath, an open area for indoor large muscle games, and must provide large muscle activities at least two times during each six (6) hour period of time.

#### **7.702.73 Rest Time Equipment**

- A. A firm cot or 2-inch mat with a sheet and blanket or other suitable covering must be provided for each preschool child remaining in the center more than 4 hours.
- B. Cots or pads must be spaced at least 2 feet apart on all sides during rest time. Children must have a safe area in which to rest.
- C. When the room provided for rest is used for other program activities, the cots, pads, and linens must be stored in an area that is not included in the required square footage assigned for play space.
- D. In rooms used for napping, the light must be dim at nap time to promote an atmosphere conducive to sleep.
- E. In the infant nursery, individual cribs must be provided that allow sufficient space for the infant's length, size, and movement. Each crib must be sturdy, meet federal Consumer Product Safety Commission standards, and have a firm, comfortable mattress with safe, department-approved plastic sheeting or other type of waterproof material.
- F. In the toddler nursery, a crib, sleeping cot, or 2-inch mat must be provided for each child, and there must be a minimum of 2 feet between each crib or cot. Aisles between cots or cribs must be kept free of all obstructions while cribs are occupied. No child under the age of 2 years should use a cot for sleeping without written permission of the parent or guardian.

1. Individual cribs must provide each toddler with sufficient space for the toddler's length, size, and movement, and must meet federal Consumer Product Safety Commission standards. Each crib must be fitted with a firm, comfortable mattress and heavy plastic sheeting or other type of waterproof material. If individual cribs are used, they must be separated by a sturdy divider from the area used for activities.
  2. Sleeping cots and mats must be of firm construction and in good repair.
- G. In the infant nursery, soft bedding materials that could pose a suffocation hazard are not permitted in cribs or playpens.
- H. Infants who fall asleep in a swing or infant seat must be placed in their cribs for the remainder of their nap.
- I. Infants must be placed on their backs for sleeping.
- J. In the toddler nursery, a sheet and a blanket or suitable covering must be provided for each child to be used only by that child.

## **7.702.8 BUILDINGS AND FACILITIES**

### **7.702.81 Building Site**

#### **A. General**

1. Centers can be located in a private residence only when that portion of the residence to which children have access is used exclusively for the care of children during the hours the center is in operation or is separate from the living quarters of the family.
2. No other business can operate in the rooms used by the center during the hours of child care.
3. Rooms licensed for specific ages of children cannot be used for other ages of children without the prior written approval of the licensing authority.

#### **B. Infant Nursery**

1. The infant nursery must be located on the grade level.
2. If the infant nursery is in the same building as a facility caring for children of other ages, the infant nursery must be physically separated in different rooms.

#### **C. Toddler Nursery**

1. The toddler nursery must be located on grade level.
2. If the toddler nursery is combined with a large child care center or an infant nursery, toddler facilities, both indoor and outdoor, must be completely separate from facilities for other age groups, except as allowed by Section 7.702.83, B, 8 and 9. If the facility wishes to provide opportunities for a toddler to have occasional contact with siblings, plans must be approved by the department licensing representative.
3. A toddler nursery located in a drop-in child care center licensed for five (5) or fewer toddlers may be separated from the rest of the center by a five (5) foot wall.

### **7.702.82 Building Plans and Construction**

- A. The center must comply with applicable state and local building code and zoning regulations.
- B. Prior to construction, architectural plans for new buildings or for extensive remodeling of existing buildings must be submitted for review and approval by the department, the local fire department, and the local building department as to appropriateness, adequacy, and suitability for child care functions.

### **7.702.83 Space Requirements**

#### **A. Indoor Area Requirements**

1. There must be open, indoor play space of at least 30 square feet of floor space per child, including space for movable furniture and equipment. Indoor space must be exclusive of kitchen, toilet rooms, office, staff rooms, hallways and stairways, closets, laundry, furnace rooms, and space occupied by permanent built-in cabinets and permanent storage shelves inaccessible to children.

Child care centers in operation prior to January 1, 1966, and which continue operation under the same governing body, must provide open indoor play space of at least 25 square feet of floor space per child, including space for readily movable furniture and equipment, and with the exclusions noted in the preceding paragraph.

2. Adequate storage space must be provided for indoor and outdoor equipment and supplies. Space for reserve supplies must be in addition to the designated space allotment for children's play activities.
3. There must be at least 1 diaper change area for each 20 or fewer children in need of diaper changing. Diaper change areas must be located and arranged so as to provide privacy for older children in need of diaper changing. See also Section 7.702.63, B.

4. Number of Children Allowed in One Room

Number of Children Allowed in One Room  
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Toddler centers licensed prior to 7/1/89 are exempt from the room size requirement.

5. Square Footage Requirement per Child

Square Footage Requirement per Child  
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6. In the infant nursery, the minimum indoor space per infant for sleep and activities is 50 square feet. This space is exclusive of kitchen, toilet rooms, office, staff rooms, hallways and stairways, closets, laundry, furnace rooms, and space occupied by permanent built-in cabinets and storage shelves.
  - a. If a separate sleep room is provided, it must have enough square footage that all babies and cribs are easily accessible to staff members. The activity room must contain at least 35 square feet per child.
  - b. If a combination sleep/activity room is used, the sleep area must be separated by a sturdy divider from the area used for activities, and cribs must be arranged so that all babies and cribs are easily accessible to staff members.

#### **B. Outdoor Area Requirements**



1. The center must provide an outdoor play area that is adjacent to or safely accessible to the indoor facilities. When the area is not adjacent, staff members must accompany children to and from the play area. Drop-in child care centers are not required to provide an outdoor play area.
2. The outdoor play area must provide a minimum of 75 square feet of space per child for a group of children using the total play area at any one time. The total play area must accommodate at least 33 percent of the licensed capacity of the center or a minimum of 1500 square feet, whichever is greater.
3. The play area must be fenced or have natural barriers, such as hedges or stationary walls at least 4 feet high, to restrict children from unsafe areas.
4. The play area must be designed so that all parts are visible and easily supervised.
5. The playground area must have at least 2 different types of surfaces. Each type of surface must cover at least 10 percent of the playground area.
6. A shaded area in the fenced play area of at least 150 square feet must be provided by means of trees or other cover to guard children against the hazards of excessive sun and heat.
7. In the infant nursery, the outdoor play area must be a minimum of 400 square feet.
8. In the infant nursery, the outdoor area can be used by other age groups at the center, but it must not be used by any other group of children while infants are using it.
9. In the toddler nursery, the outdoor play area can be shared by infants, but infants and toddlers must not be allowed to use the play area at the same time.

#### **7.702.84 Food Preparation Area**

- A. See the "Rules and Regulations Governing the Sanitation of Child Care Centers in the State of Colorado."
- B. Infant and Toddler Nurseries
  1. A table, counter, or shelf, separate from the diaper changing area, must be available for preparing infants' and toddlers' food.
  2. The nursery must prepare formula or food in the center's kitchen, or the nursery must have a second sink or a covered commercial container with a spigot for preparation of formula and food.

#### **7.702.85 Toilet Facilities**

- A. Toilet facilities for the staff and other adults must be in separate compartments or separated by a partition from children's facilities, except in centers licensed for 30 or fewer children and in centers with programs of 4 hours or less.
- B. Toilet rooms for children must be separate from rooms used for other purposes and must be located on the same floor as the inside play area.
- C. A minimum of one (1) lavatory and one (1) flush toilet must be provided for each 15 or fewer children. Drop-in child care centers must provide a minimum of one 1 lavatory and one 1 flush toilet for each 20 or fewer children.

- D. The same toilet facilities must not be used simultaneously by school-age children of both sexes, and toilets for school-age children must be separated by partitions to provide privacy.
- E. Toilet facilities are not required for children under 2 years of age.
- F. Toilet facilities must be provided for children 2 years of age and older.
- G. Toilet rooms for children must be located within the toddler nursery, except that drop-in child care centers need not provide a toilet in the toddler nursery if the facility is licensed for ten (10) or fewer toddlers. A diaper change table and hand washing sink is required in every toddler nursery.

#### **7.702.86 Office Facilities**

- A. Office space separate from areas used by children, other than for isolation purposes, must be provided for staff to perform administrative duties.
- B. The office must have sufficient space for maintenance and safe storage of children's and staff records and the center's business records.

### **7.702.9 FIRE AND OTHER SAFETY REQUIREMENTS**

#### **7.702.91 General Requirements**

- A. Buildings must be kept in good repair and maintained in a safe condition.
- B. Major cleaning is prohibited in rooms occupied by children.
- C. Volatile substances such as gasoline, kerosene, fuel oil, and oil-based paints, firearms, explosives, and other hazardous items must not be stored in any area of the building used for child care. Plastic bags and sharp tools and instruments must be stored in areas inaccessible to children.
- D. Combustibles such as cleaning rags, mops, and cleaning compounds must be stored in well-ventilated areas, separated from flammable materials, and stored in areas inaccessible to children.
- E. All heating units, gas or electric, must be installed and maintained with safety devices to prevent fire, explosions, and other hazards. No open-flame gas or oil stoves, unscreened fireplaces, hot plates, or unvented heaters can be used for heating purposes. All heating elements, including hot water pipes, must be insulated or installed in such a way that children cannot come in contact with them.
- F. Nothing flammable or combustible can be stored within 3 feet of a furnace or hot water heater.
- G. In rooms used by children, all electrical outlets that are accessible to children must have protective covers, or safety outlets must be installed.
- H. Except in part-day preschools, permanently located battery-powered lights must be provided in locations readily accessible to staff in the event of electric power failure. Batteries must be checked regularly.
- I. Closets, attics, basements, cellars, furnace rooms, and exit routes must be kept free from accumulation of extraneous materials such as discarded furniture, furnishings, newspapers, and magazines.
- J. Smoking is prohibited during business hours in all areas where child care is provided and when

transporting children.

- K. Children under 2 years of age must be excluded from the kitchen. When children age 2 and over prepare food at the center, they may use only equipment and appliances that do not present a safety hazard. Staff-child ratios must be maintained.
- L. First aid supplies must be maintained and made accessible to staff throughout the center and stored in areas inaccessible to children.
- M. All outdoor areas available to children's activities must be maintained in a safe condition by removal of debris, dilapidated structures, broken or worn play equipment. The center must identify hazardous, high-risk areas. These areas must be made inaccessible to children.
- N. Playground surfaces must be checked on a daily basis for the presence of dangerous or other foreign materials. Playground equipment must be checked for safety on a monthly basis.
- O. Window blind cords must be secured out of children's reach to prevent strangulation.

#### **7.702.92 Fire Safety**

- A. Every building and structure must have sufficient exits to permit the prompt escape of occupants in case of fire or other emergency. Additional safeguards must be provided for life safety in case any single safeguard is ineffective due to some human or mechanical failure.
- B. Every building or structure must be constructed, arranged, equipped, maintained, and operated as to avoid undue danger to the lives and safety of its occupants from fire, smoke, fumes, or resulting panic during the period of time reasonably necessary for escape from the building or structure in case of fire or other emergency.
- C. In every building or structure, exits must be arranged and maintained so as to provide free and unobstructed egress from all parts of the building or structure at all times when it is occupied. No lock or fastening to prevent free escape from the inside of any building can be installed. Only panic hardware or single-action hardware is permitted on a door or on a pair of doors. All door hardware must be within the reach of children.
- D. No child of less than first grade school level can be cared for in areas above or below the main floor of exit unless allowed by the Uniform Building Code and approved by the local fire department.
- E. Exit from each room must be directly to the exterior of the building or to a common hallway leading to the exterior.
- F. Each center must have at least 2 approved, alternate means of egress from each floor of the building or to a common hallway leading to the exterior. They must be at different locations.
- G. All stairways, interior and exterior, that are used by children must be provided with handrails within reach of the children.
- H. If the center has a security lock on outside exit doors, the center must obtain written permission from the local fire department; and there must be a written sign attached to the door instructing center staff that the security lock is not to be utilized when children are present at the center.
- I. Every exit must be clearly visible, or the route to reach it must be conspicuously indicated. Each path of escape must be clearly marked.
- J. Every building and structure must have an automatic or department- approved manually operated fire

alarm system to warn occupants of the existence of fire or to facilitate the orderly conduct of fire exit drills.

### **7.702.93 Emergency Drills**

- A. Each staff member of the center must be trained in fire safety.
- B. Fire exit drills must be held often enough that all occupants are familiar with the drill procedure and their conduct during a drill is a matter of established routine. Fire drills must be consistent with local fire department procedures. A record of fire drills held over the past 12 months, including date and time of drill, number of adults and children participating, and the amount of time taken to evacuate, must be maintained by the center.
- C. Drills must be held at unexpected times and under varying conditions to simulate the conditions of an actual fire.
- D. Drills must emphasize orderly evacuation under proper discipline rather than speed. No running or horseplay should be permitted.
- E. Drills must include suitable procedures for ensuring that all persons in the building, or all persons subject to the drill, actually participate.
- F. Fire alarm equipment must be used regularly in the conduct of fire exit drills.
- G. If appropriate to the location of the center, tornado drills must be held often enough that all occupants are familiar with the drill procedure and their conduct during a drill is a matter of established routine. A record of tornado drills held over the past 12 months must be maintained by the center.

### **7.702.100 RECORDS AND REPORTS**

#### **7.702.101 Children's Records**

The center must maintain and update annually a record on each child that includes:

- A. The child's full name, birth date, current address, and date of enrollment.
- B. Names and home and employment addresses and telephone numbers of parents or guardians.
- C. Any special instructions as to how the parents or guardians can be reached during the hours the child is at the center.
- D. Names, addresses, and telephone numbers of persons authorized to take the child from the center.
- E. Names, addresses, and telephone numbers of persons who can assume responsibility for the child in the event of an emergency if parents or guardians cannot be reached immediately.
- F. Name, address, and telephone number of the child's physician, dentist, and hospital of choice.
- G. Health information, including medical report, chronic medical problems, and immunization history.
- H. A dated written authorization for emergency medical care signed and updated annually by the parent or guardian. The authorization must be notarized if required by the local hospital, clinic, or emergency health care facility.
- I. Written authorization from a parent or guardian for the child to participate in field trips or excursions,

whether walking or riding.

- J. Injury and illness record.
- K. Reports of serious injuries and accidents occurring during care that result in the hospitalization or death of a child .
- L. Significant observations of the child's development.
- M. A record of parent conferences, including dates of conferences and names of center staff and parents or guardians involved.

#### **7.702.102 Staff Records**

- A. The center office must maintain a record for each staff member that includes the following:
  - 1. Name, address, telephone number, and birth date of the individual.
  - 2. Verification of education, work experience, employment, training, and completion of first aid and CPR courses.
  - 3. Immunization record and health examination reports.
  - 4. Date of employment.
  - 5. Names, addresses, and telephone numbers of persons to be notified in the event of an emergency.
  - 6. Information received from the State Department's automated system and the Colorado Bureau of Investigation (may be retained in a confidential file).
- B. Each staff member's personnel file must contain all required information within 30 working days of the first day of employment.

#### **7.702.103 Administrative Records and Reports**

- A. The following records must be on file at the center:
  - 1. Records of enrollment, daily attendance for each child, and daily record of the time the child arrives at and departs from the center.
  - 2. Current health department inspection report issued within the past 24 months.
  - 3. Current fire department inspection report issued within the past 24 months.
  - 4. A list of current staff members, substitutes, and staffing patterns.
  - 5. Copies of menus.
  - 6. A record of visitors to the center.
- B. Each center must immediately report in writing to the Colorado Department of Human Services any accident or illness occurring at the center that resulted in medical treatment by a physician or other health care professional, hospitalization, or death. This report must be made within 48 hours after the accident or illness occurred.

C. A report about a fatality must include:

1. The child's name, birth date, address, and telephone number.
2. The names of the child's parents or guardians and their address and telephone number if different from that of the child.
3. Date of the fatality.
4. Brief description of the incident or illness leading to the fatality.
5. Names and addresses of witnesses or persons who were with the child at the time of death.
6. Name and address of police department or authority to whom the report was made.

D. The center must submit to the department within 48 hours a written report about any child who has been lost from the center and for whom the local authorities have been contacted. Such report must indicate:

1. The name, birth date, address, and telephone number of the child.
2. The names of the parents or guardians and their address and telephone number if different from those of the child.
3. The date when the child was lost.
4. The location, time, and circumstances when the child was last seen.
5. Actions taken to locate the child.
6. The name of the staff person supervising the child.

E. The center must report to the Colorado Department of Public Health and Environment or its local unit any communicable illness, including but not limited to measles, mumps, diphtheria, rubella, tuberculosis, shigella, hepatitis, meningitis, salmonella, or giardia, contracted by a staff member or a child at the center.

#### **7.702.104 Confidentiality and Retention**

- A. The confidentiality of all personnel and children's records must be maintained. See Section 7.701.7 in the General Rules for Child Care Facilities.
- B. Personnel and children's records must be available, upon request, to authorized personnel of the department.
- C. If records for organizations having more than one center are kept in a central file, duplicate identifying and emergency information for both staff and children must also be kept on file at the center attended by the child and where the staff member is assigned.
- D. The records of children and personnel must be maintained by the center for at least 3 years.

**7.703 - 7.704 - None**

#### **7.705 RULES REGULATING RESIDENTIAL CHILD CARE FACILITIES**

#### **7.705.1 DEFINITIONS [Rev. eff. 7/2/06]**

A "residential child care facility (RCCF)" shall provide 24-hour residential group care and treatment for five or more children, between the ages of 3 and 16 years old and for children from 16-18 years old and for those persons to 21 years old who are placed by court order prior to their eighteenth birthday. A residential child care facility shall offer opportunities for a variety of services that can be used selectively in accordance with an individual plan for each child. A residential child care facility is operated under private, public or nonprofit sponsorship.

#### **7.705.11 Governing Body [Rev. eff. 11/1/98]**

- A. The governing body is the individual, partnership, corporation or association in whom the ultimate authority and legal responsibility is vested for the conduct of the residential child care facility.
- B. When the governing body does not include a board of directors, there shall be an advisory committee of at least two other individuals who act in an advisory capacity to the governing body. The names of the advisory committee members shall be disclosed to the department. The advisory committee shall meet at regularly-stated intervals.
- C. The minutes of the advisory committee or the board of directors shall be maintained. The minutes shall be available to the department upon request, except that the minutes containing confidential personnel information need not be shared with the department.
- D. The functions of the governing body shall include:
  - 1. The appointment of an administrator who shall be responsible, according to established performance criteria, to the governing body, and shall delegate to him/her the executive authority and responsibility for the administration of the child care facility according to its defined purpose.
  - 2. The formulation and regularly-planned review of policies and procedures to be followed by the facility.
  - 3. The provision of necessary facilities, adequate financing, qualified personnel, services, and program functions for the welfare and safety of children in accordance with these standards.

#### **7.705.12 Fiscal Management [Rev. eff. 7/2/06]**

- A. Each RCCF shall develop an annual budget reflecting anticipated income by source and expenses by purpose, plus an accompanying balance sheet, which demonstrates that the RCCF has assured resources to carry out its defined purpose. The budget shall be approved by the governing body. The first year's budget shall be submitted with the original license application.
- B. A RCCF shall demonstrate that it is financially sound and manages its financial affairs prudently. All funds disbursed by the facility shall be expended in accordance with the program objectives as specified by the governing body.
- C. An RCCF must have a double entry accounting system and all financial transactions must be posted to this system. Financial statements, prepared from information provided by this system, shall be presented in conformity with U.S. Generally Accepted Accounting Principles (GAAP). Books and records of the RCCF shall be subject, at any time the RCCF business office is open, to inspection, audit or copying by designated Federal, State or county personnel, or such independent auditors or accountants as may be designated by these personnel.

- D. Each private or non-profit RCCF whose total annual expenditures are \$100,000 or more shall provide for an annual audit by an independent Certified Public Accountant in accordance with appropriate generally accepted auditing standards. RCCF's with less than \$100,000 total annual expenditure may submit an audit as described above or may submit compiled or reviewed financial statements, prepared in accordance with generally accepted accounting principles.
1. Every RCCF shall submit cost reports as prescribed by the State on the required supplementary information form and the administrative expenses for foster care as defined by the State Department.
  2. The cost reports submitted shall contain an affidavit signed by the RCCF's Executive Director and an officer of its board attesting to the authenticity of the information. Submission of falsified information shall be grounds for suspension of the RCCF license.
  3. The audit and cost report shall be submitted to the Department within six (6) months of the RCCF's fiscal year end.

**7.705.13 Insurance [Rev. eff. 11/1/98]**

- A. Every facility shall carry public liability insurance. The applicant or licensee shall submit the amount of the insurance and the name and the address of the insurance agency providing the insurance for the facility. Information about the insurance should be maintained at the facility.
- B. Facilities operating their own transportation vehicles shall carry insurance in compliance with the minimum limits required by the Colorado Revised Statutes, Title 10, Article 4.
- C. The facility shall carry workman's compensation and unemployment insurance as required by law.

**7.705.2 CHILD CARE SERVICES**

**7.705.21 Case Management Services Provided by the Residential Child Care Facility [Rev. eff. 7/2/06]**

- A. A staff member qualified as stated at Section 7.705.46, A, shall be assigned the responsibility for case management for each child.
- B. Each individual assigned the responsibility of providing case management services for a child shall:
  1. Participate actively in the admission procedure, treatment planning, discharge and after care planning.
  2. Assure that appropriate information concerning the child and her/his background is shared with other staff members who deal with the child regularly and maintain communication with parents, guardians, or referring agency, or the agency responsible for discharge planning and follow-up care of the child.
  3. Assure that an individual child's plan is developed for the child and required plan review and necessary modifications are made pursuant to Section 7.714.4, D.
  4. Assure that necessary progress reports for court and placing agency requirements are completed and submitted in a timely fashion.
  5. Attend Administrative Reviews in person or by conference call.
  6. Assure that the individual child's plan developed for each child is implemented, including



treatment by specialists, and documented in the child's file.

- C. RCCF providers who are serving children enrolled in the Children's Habilitation Residential Program (CHRP) waiver shall be in compliance with rules contained in the Department of Health Care Policy and Financing's Medical Assistance Manual at Section 8.508 (10 CCR 2505-10).

#### **7.705.22 Recreation and Leisure Activities [Rev. eff. 7/2/06]**

- A. A residential facility shall have a written plan for ensuring that a range of indoor and outdoor recreational and leisure opportunities is provided for children in care. Such opportunities shall be based on the individual interests, with personal and treatment needs being considered.
- B. Responsibility shall be assigned for supervision and coordination of the total recreation program, including training and supervision of staff and volunteers to assure maximum safety for each participant.
- C. Outdoor and indoor recreational areas and equipment shall be provided in sufficient variety and quantity to meet needs of children and to offer some choice of activities.
- D. If the facility takes residents on out of state trips, the facility shall develop a written plan for each trip, which includes goals for participants for the trip, selection criteria of participants, necessary skills for staff members, necessary equipment to meet participants' needs on the trip, supervision plan, letter of information to parents and/or guardians, and approval of the guardian.
- E. The facility shall obtain the written permission of the guardian for each out of state trip or shall obtain an overall written permission of the guardian for any out of state trip in which the resident will participate.
- F. Some facilities may participate in special activities, which are either comprehensively integrated and salient to the total treatment program or which supplement and enhance the treatment process. When the facility participates in any special activities, such as swimming, boating, horseback riding, use of the trampoline, white water rafting, backpacking, camping, and winter sports, the following regulations must be complied with:
  - 1. The child's participation in a special activity shall be included in the individual child's plan.
  - 2. The staff member leading the activity shall be qualified as required for that activity.
  - 3. Each special activity shall be under the supervision of a staff member who shall possess evidence of appropriate experience, training and/or certification in the program specialty. Said staff member shall be present at the site of the activity whenever the activity is being carried out and shall be responsible for health and safety precautions.
  - 4. The qualified supervising staff member of special activities shall have the following duties:
    - a. Direct training of other staff members working in the activity.
    - b. Assign duties to staff members.
    - c. Assure that all necessary equipment is complete, in good repair, and safe to use.
    - d. Assure that environmental hazards are not severe enough to cause danger to participants.
      - 1) When the residents of the facility participate in a special activity, each facility

shall have a plan for action in case of natural disasters relevant to the terrain and activity, lost participants, injuries, and illnesses. These plans shall be in writing and shall accompany the participants and staff, and also be on file at the facility office. The staff shall have received training regarding the implementation of these plans prior to the departure of the participants.

- 2) There shall be a first aid kit which contains equipment relevant to the type of injuries which might be sustained in a specific activity and which is located at the site of the activity. There shall be a person holding at least an American Red Cross First Aid/CPR/AED Certificate for schools and communities or equivalent at the site of the activity when the activity is in progress.
- 3) As part of the orientation to the activity, the program staff shall explain to the child any risk factor involved in a special activity. The child shall then have the opportunity to decline his/her participation in that specific activity. In the case of an activity with extreme risks, the parent or guardian shall be advised and have the opportunity to refuse the child's participation.

G. If the facility participates in swimming, the following regulations must be met:

1. When residents are engaged in a swimming activity, there shall be at the pool or swimming area a swimming supervisor who, at a minimum, holds a current American Red Cross life guard training certificate or equivalent for each thirty participants in the water, at least one staff member for each ten participants in the water, and additional staff to meet the special needs of the children. If the facility is offering swimming instruction, the swimming supervisor must also hold an American Red Cross Water Safety Instructor Certificate or equivalent.
2. If the facility has its own pool, the swimming area shall meet the standards of the Colorado Department of Public Health and Environment or its local unit, and be off limits when appropriate numbers of staff members are not present. Safety rules and emergency procedures shall be posted at the pool.
3. If the facility uses a pool for which it is not responsible, the facility need not provide a lifeguard if there is a qualified lifeguard provided by the pool. If the pool does not provide a qualified lifeguard, staff members meeting qualifications stated at Section 7.705.22, G, 1, must be provided by the facility. There shall be at least one staff member at the pool for each ten participants in the water.
4. If participants are permitted to swim in a lake, the swimming areas shall be clearly designated.
5. Regulations governing the activity shall be explained to the participants prior to their participation.
6. Before participants are permitted to swim in deep water, swimming skills shall be tested by properly trained staff members.
7. There shall be a system known to children and lookout staff for checking the swimmers when they are in the water.
8. The following equipment shall be made available at the pool side or the lake shore in which

swimming is permitted:

- a. A rescue tube
  - b. A reach pole
  - c. A backboard
9. Where the size of the body of water makes it impossible to reach victims by reach pole, rescue tube or rescue device, a rescue boat must be available at all times.
  10. In the case of a back-country trip, there shall be a minimum of one staff member who holds a current American Red Cross lifeguard training certificate or equivalent who is responsible for all shoreline, wading, or swimming activities.
- H. If the facility participates in boating/canoeing/sailing, the following regulations shall be met:
1. The boating supervisor shall hold, as a minimum, a current American Red Cross lifeguard training certificate or equivalent and a basic small craft certificate for the type of craft which is to be supervised, or the boating supervisor shall have at least forty hours of experience in the craft to be supervised.
  2. Other staff members shall have at least twenty hours of previous experience in the craft to be utilized.
  3. Whenever participants are on the water, they shall be wearing a United States Coast Guard approved personal flotation device appropriate to the weight of the child.
  4. There shall be a minimum of two lookout staff members at the shoreline and/or on the water at any time when participants are on the water in boating, canoeing or sailing activities. Hazards such as the size of the lake, the skill of the participants, the conditions of the water, and the temperature of the water shall be taken into account by the supervisor of the activity when determining the number of lookout staff necessary with the participants, but there shall never be fewer staff with the participants than those required at Section 7.705.45.
  5. The swimming ability of each participant in the boating program shall be known. The boating supervisor shall determine if a staff member must be in the boat with the child.
  6. There shall be a staff member in any boat that holds one or more six- or seven-year old children.
  7. At no time shall the occupancy of the craft exceed the capacity established for the craft by the United States Coast Guard standards.
  8. There shall be a warning device such as a loud whistle, airhorn or other audible signal device, which can readily be heard by persons in the boats which shall indicate need for them to return to the shore.
  9. Where the size and depth of the body of water indicates, there shall be a rescue boat in close proximity to where boating activities take place. This rescue boat shall be in good repair and shall contain a rescue tube and a reach pole or extra oar or paddle.
  10. Water craft shall not enter a swimming area when swimmers are in the water.

11. Tubing shall be permitted only in quiet waters. Each inflatable tube shall have a minimum of two air chambers.
- I. If the facility participates in horseback riding, the following rules shall be met:
1. The horseback riding supervisor shall have completed at least one of the following:
    - a. Certificate from nationally recognized organization or riding school.
    - b. Written verification of successful experience in formal horseback riding instruction.
    - c. Wrangler of a private stable.
  2. The horseback riding supervisor shall train a sufficient number of riding staff members in the supervision of children in the horseback riding program for the anticipated size of the program.
  3. Riding staff members shall be trained in the supervision of children in the horseback riding program and emergency procedures. Riding staff shall be trained in health, safety, and care of animals.
  4. There shall be a trained riding staff member assigned for every ten (10) riders for each trail excursion and a minimum of two trained riding staff members shall accompany each excursion, one of which holds a current American Red Cross First Aid/CPR/AED Certificate for schools and communities or equivalent.
  5. If the horseback ride is more than one hour from emergency medical services, at least one staff member shall be trained in wilderness first aid training.
  6. There must be supervision by the horseback riding supervisor or a trained riding staff member whenever the resident participates in horseback riding.
  7. The riding supervisor shall determine the participant's riding experience and level of skill and take these into account in assigning horses and determining the type of riding activity. Participants shall be given instruction in basic safety, which shall include at least the following; riding rules in the ring and on the trail and how to approach, mount and dismount.
  8. No person is allowed in the riding area unless the horseback supervisor or a trained riding staff member is present.
  9. Participants shall be appropriately dressed for riding, which shall include shoes or boots, snug clothing, and long pants. Bare feet and loose clothing are prohibited. The riding supervisor must evaluate the footgear of each child and make the stirrups safe for each child's shoe or boot.
  10. Protective headgear/helmets are mandatory for ring riding and trail rides.
  11. The equipment shall be in good condition, properly sized and adjusted for each rider.
  12. If the facility owns horses, the following shall be met:
    - a. The horse barn or stable, ring and commonly-used trail(s) shall be in good repair and free of dangerous obstructions.

- b. Horses shall be cared for with evidence of an adequate feeding schedule and a means to care for sick horses.
- c. Barns, stables, corrals or other structures used to house horses and/or other animals shall be located at least 50 feet from any sleeping, eating or food preparation area.
- d. Manure shall be removed frequently enough to keep fly, mosquito, and rodent populations at a minimum.
- e. Horses shall not be permitted in the other activity areas.

J. If the facility participates in trampoline, the following regulations shall be met:

- 1. The trampoline supervisor shall have documented formal training and experience in use of trampoline and knowledge of safety and spotting techniques.
- 2. The facility shall have and follow a written policy which states what type of jumps children can take on the trampoline and permits or denies the dual use of the trampoline.
- 3. Trampolines shall be equipped with pads along the sides and a safety line. Trampoline and equipment shall be kept in good repair.
- 4. Trampolines shall be secured from unauthorized use.
- 5. For beginners, there shall be only one participant on the trampoline at a time. Any participant shall dismount the trampoline by sitting on the edge and sliding off. No participant shall jump off the trampoline.
- 6. Horseplay is prohibited.
- 7. Spotters shall be trained by a staff member of the facility who knows spotting techniques.
- 8. Spotters shall be posted on all four sides of each trampoline at any time trampoline is in use. Spotters shall not stand, sit, or lie on trampoline, but shall stand in a position of readiness, watching the jumper at all times.
- 9. No child shall be on the trampoline unless a trampoline supervisor is present.

K. If the facility participates in white water rafting on Class III and IV waters, as defined by the International Scale of River Difficulty, the following regulations shall be met:

- 1. If a facility operates white water rafting, the facility must be licensed by the Division of Parks and Outdoor Recreation as a river outfitter.
- 2. If a facility provides a white water rafting experience by purchase from a river outfitter, the license of the river outfitter must be valid.
- 3. Food storage shall be adequate to keep food dry and large enough to store food for the number of participants and the length of the trip.
- 4. Waterproof dunnage bags shall be provided for passengers and shall be secured to the raft.
- 5. Each passenger on the raft shall wear a United States Coast Guard approved personal flotation device.

6. Anytime a participant is to be near the water, the participant shall wear an approved United States Coast Guard personal flotation device.
  7. A child shall be at least twelve (12) years old and fifty (50) pounds to ride a paddle raft in a Class III river. A child shall be at least fourteen (14) years of age to ride a paddle raft in a Class IV river.
  8. A child shall be at least ten (10) years old and fifty (50) pounds to ride an oar raft in a Class III river. A child shall be at least fourteen (14) years old to ride an oar raft in a Class IV river.
- L. If the facility participates in hiking or backpacking activities, the following regulations shall be complied with:
1. The hiking or backpacking supervisor must be at least 21 years old, shall hold a current American Red Cross First Aid/CPR/AED Certificate for schools and communities or equivalent, and shall have verifiable experience leading a group in backpacking at the elevation, terrain and climate where the hike is to take place. The supervisor must have knowledge about contingency planning, use of equipment, search and rescue, map and compass, frostbite, dehydration, hypothermia, and altitude sicknesses.
  2. The staff members involved in hiking or backpacking shall:
    - a. Be trained by the supervisor;
    - b. Have knowledge of symptoms of hypothermia, dehydration, frostbite and altitude sickness and correct treatment procedures; and,
    - c. Continually observe and monitor children on the trail for early diagnosis and treatment.
  3. The hiking or backpacking supervisor shall consider the hiker's age, physical condition and experience, as well as the season, weather trends, evacuation and communication, water quality and quantity in selecting the area for hiking or backpacking.
  4. Before participation in a hiking or backpacking activity, the participant shall be instructed at least on:
    - a. The fundamental safety procedures on the trail;
    - b. Procedures for a hiker if he/she becomes lost;
    - c. Proper health and sanitation procedures on the trail, including the need for drinking fluids and eating appropriate foods while on the trail;
    - d. Rules governing land to be hiked over;
    - e. Potential high-risk areas which may be found on the trail;
    - f. Fire danger precautions, flash floods, lightning dangers; and,
    - g. Procedures when encountering wild animals.
  5. Each backpacker shall be equipped with protective clothing against natural elements such as rain, snow, wind, cold, sun, and insects.

6. First aid supplies, put together by a person knowledgeable in First Aid supplies needed for hiking and backpacking activities and possible accidents and/or injuries, shall be present on each hike or backpacking trip. The contents of each kit shall be adequate for the number of participants, the terrain, and the length of the hike.
7. An itinerary of the hiking or backpacking trip and a list of all people on the hike or backpacking trip must be kept at the facility.
8. The facility must have written safety procedures for hiking and backpacking, including the written protocol for evacuating a child that becomes sick or injured while participating on the trip. Staff and children must be trained on the safety procedures and protocol.

M. If the facility participates in camping, the following rules shall be complied with:

1. There shall be a day-to-day itinerary prepared prior to departure. The residential child care facility headquarters shall keep a copy of the itinerary. The itinerary shall be followed as closely as possible. The residential child care facility shall be notified of any itinerary change when possible.
2. An itinerary shall be filed or an arrangement shall be made with national or state forest service office if such land is to be used by the facility. The director shall familiarize the staff and campers with rules governing the use of such property. If the participants will travel on private land, an agreement shall be made with the individual responsible for that land.
3. Sources of emergency care and methods of communication with such facilities as hospitals, police, and forest service offices shall be identified for each point on the itinerary.
4. The statement which has been signed by the parent or guardian, indicating that the facility staff may obtain emergency medical care, shall be in the possession of staff members accompanying the participants or shall be readily accessible.
5. Adequate shelter, such as tents, shall be available for each child.
6. Reasonable insulation shall be provided from cold/dampness by means of such things as a ground cloth or insulate pad.
7. If the campsite is not provided with privies or other type toilets, there shall be separate designated areas for each gender for toilet use.
8. Hand washing facilities shall be positioned in close proximity to the toilet areas.

N. Winter Sports

If the facility participates in Nordic skiing (cross-country), the following rules shall be complied with:

1. The skiing supervisor must be at least 21 years old and shall have some verified experience leading a group in skiing at the elevation and terrain where the skiing is to take place. The supervisor must have knowledge about contingency planning, use of equipment, search and rescue, avalanche training, frostbite, hypothermia, and altitude sicknesses.
2. Each skier shall be equipped with protective clothing against natural elements such as cold, sun, wind, and snow.
3. Before participation, the participant shall be instructed about, at least, the fundamental trail

safety procedures for a skier if he/she becomes lost, and potential high-risk areas which may be found on the trail.

O. If the facility participates in other winter recreational activities, the following rules shall be complied with:

1. The supervisor of the activity shall have some verified experience leading a group in the activity.
2. Appropriate equipment and clothing shall be provided for the activity.
3. Appropriate safety precautions shall be observed.

P. Other Special Activities

If the facility participates in special activities other than those for which regulations are found in this section, the facility shall follow a written policy which includes at least the following:

1. The qualifications of the supervisor of the activity.
2. The qualifications of any other staff members necessary for proper supervision of the activity.
3. The number of necessary staff members needed to supervise the activity.
4. Conditions under which a person may participate in the activity, such as age of or skill of the child.
5. Any special equipment necessary, its supply, and condition.

### **7.705.3 PERSONAL CARE OF THE CHILD**

#### **7.705.31 Medical and Health Services [Rev. eff. 11/1/98]**

Administration of any medication at the facility shall be done only by a person licensed and authorized by law or staff member having passed a Colorado Department of Public Health and Environment approved competency evaluation for medication administration, verification of which is maintained in the staff member's personnel file.

#### **7.705.32 Food and Nutrition [Rev. eff. 11/1/98]**

- A. Menus shall be planned at least one week at a time, shall be dated, posted and filed for at least one month.
- B. If menus are not prepared by a qualified nutritionist or dietitian, there shall be review and approval by a qualified nutritionist or dietitian at least quarterly.
- C. Water shall be readily accessible to children by means of an approved water fountain or single-service cups.

### **7.705.4 HUMAN RESOURCES**

#### **7.704.41 Personnel Policy, Orientation and Training [Rev. eff. 11/1/98]**

- A. The facility shall have a written statement of personnel policies which include:



1. Job descriptions for all positions required. The descriptions shall describe duties of the job, qualifications for performance and supervision to be provided.
2. Salary range and provision for increments.
3. Hours of work, holidays, vacations, sick leave, and other leaves.
4. Conditions of employment, tenure, and promotion.
5. Employment benefits, including retirement plan, social security, hospitalization, and other insurances.
6. Employee evaluation procedure.
7. Grievance procedures which may be used by staff.
8. Termination procedures.

B. A copy of the personnel policy shall be given to each staff member at the time of his employment.

**7.705.42 Administrative Staff [Rev. eff. 7/2/06]**

A. Administrator

The administrator of a residential child care facility shall be qualified as follows:

1. The administrator shall have received a bachelor's degree from a regionally accredited college or university and have three years of verified experience in the human services field, one of which was in a supervisory or administrative position; or,
2. The administrator shall have received a master's degree from a regionally accredited college or university and have two years of verified experience in the human services field, one of which was in a supervisory or administrative position.
3. The administrator shall assume the following duties:
  - a. Overall direction and responsibility for the children, program, facility, and fiscal management.
  - b. Overall direction and responsibility for supervision of adequate staff.
  - c. The selection and training of a capable staff member who can assume responsibility for management of the facility in the administrator's absence.
  - d. The establishment of relationships and contact maintenance with allied agencies, services, and resources within the community.

B. Assistant or Acting Administrator

1. In each child care facility, there shall be a specifically designated staff member, age 21 or over, capable of acting as a substitute for the administrator during his/her absence. The duties and responsibilities of the substitute administrator shall be clearly defined in order to avoid confusion and conflict among other staff and children.
2. If the administrator is regularly absent from the facility more than 50 percent of his/her

working hours, an assistant administrator shall be appointed who meets the same qualifications as the administrator found at Section 7.705.42, A.

C. Administrative Coverage

1. When there is a change in administrator, or when he/she has left the facility permanently without a replacement, the State Department of Human Services shall be notified immediately in writing or when a possible change in administrator is anticipated, the facility shall notify the State Department prior to the change.
2. The administrator or the staff member to whom the administrator has delegated responsibility shall be available at all times.

**7.705.43 Medical and Health Staff [Rev. eff. 11/1/98]**

A residential facility shall have a primary physician, licensed to practice medicine, available to establish and maintain the health and medical plan and procedures of the facility.

- A. If the physician is not a full-time employee, the description of the physician's consultative services or other duties to be performed shall be set forth clearly in a written agreement with the facility.
- B. All medical staff, whether employed by the facility, or whether their services are purchased or volunteered, shall be licensed and responsible to the primary physician for the medical aspects of their job.

**7.705.44 Child Care Staff [Rev. eff. 11/1/98]**

- A. Each child care worker shall be at least 21 years of age and have completed two years of college education. A high school diploma or equivalent and one year's experience in the human services field may be substituted for the required college.
- B. Child care staff aides shall be at least 18 years old and shall work directly under the supervision of a child care staff member in activities specified by the child care staff member or with the approval of the director.
- C. Relief staff shall have the same qualifications as regularly assigned child care staff.

**7.705.45 Child Care Staff-to-Child Ratios [Rev. eff. 7/2/06]**

- A. The facility shall know the intended whereabouts of each child in care at all times, and children shall be under the direct supervision of child care staff at all times.
- B. There shall be a minimum of one (1) adult qualified as a child care worker on duty and one (1) adult on call who can be summoned at all times when there is one child or more at the facility.
- C. At night there shall be at least one awake staff person within each physically separate building, and within hearing of children, and a second person who can be summoned in case of emergency.
- D. The ratio of child care staff to children in care shall be dependent on the needs of the children, but the ratio of such staff shall not be less than the following schedule except when transporting children in vehicles (see Section 7.705.56):

Child Care Staff-to-Child Ratios  
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- E. For children who are physically and/or mentally disabled, excluding emotionally disturbed children,

the ratio of staff to children shall be at least:  
[Child Care Staff-to-Child Ratios for Children Who Are Physically and/or Mentally Disabled  
12CCR2509\\_8\\_08302006\\_table15.jpg](#)

**7.705.46 Case Management Staff and Other Professional Staff [Rev. eff. 7/2/06]**

- A. Case management shall be provided by:
1. A qualified professional having a master's degree in social work, psychology, or child development from a regionally accredited college or university. This professional shall have two years of treatment-oriented experience, or
  2. A designated member of the staff, who shall have a bachelor's degree from a regionally accredited college or university with a major in behavioral science, human services or related fields, and three years experience in working with children, and for whom there is an effective arrangement for consultation from a qualified professional as described above.
  3. The qualified professional, as specified in Section 7.705.46, A, 1, may be a full-time or part-time employee of the facility, a staff member of a recognized agency, or an individual with which the facility has a contract to provide the necessary services and/or consultation.
  4. The ratio of case management staff to children shall be dependent on the type of facility and the needs of the children therein, but there shall be at least one full-time case management staff member for every twenty (20) children, or a part-time staff member assigned for a fraction thereof.
- B. The case management staff shall be responsible for providing case management services as stated at Section 7.705.21.
- C. Psychiatrists used by the child care facility shall be qualified and licensed to practice and shall provide, as needed, diagnosis, treatment, and consultation services.
- D. Psychologists providing testing and diagnostic services shall have a license in psychology.
- E. Other professionals providing specific therapy shall be licensed professionals as designated by Colorado state law.

**7.705.47 Volunteers and Students [Rev. eff. 11/1/98]**

- A. If volunteers or students are used by a facility, the administration shall define specifically the services to be given by that individual.
- B. Volunteers and students who are assigned to work directly with the children shall:
1. Be subject to reference checks similar to those performed for employment applicants.
  2. Be in good general health. The facility has the right to contact the individual's physician.
- C. Volunteers and students shall be:
1. Directly supervised by a paid staff member.
  2. Oriented and trained in the philosophy of the facility, confidential nature of their work, and the specific job which they are to do, prior to assignment.

#### **7.705.48 Food Services and Maintenance Staff Members [Rev. eff. 7/2/06]**

- A. All food services and maintenance staff members shall comply with the general requirements for all personnel as specified in Section 7.714.92.
- B. Food service staff of the facility shall meet requirements of the state or local health requirements for food handlers.
- C. There shall be one food service staff member who has basic knowledge and understanding of nutrition, food purchasing, menu planning and food preparation. If the staff member is not qualified as a dietitian or nutritionist, there shall be readily available consultation from a specialist in the field.
- D. Maintenance staff shall be in sufficient numbers to maintain an adequate physical plant.

#### **7.705.5 BUILDING AND FACILITIES**

##### **7.705.51 Building Plans [Rev. eff. 11/1/98]**

Prior to construction, architectural plans for new buildings or for extensive remodeling of existing building shall be submitted for review and approval by the State Department of Public Health and Environment or its local unit, the local fire department, and local building department. Plans shall be submitted and reviewed by the State Department of Human Services as to appropriateness, general adequacy, and suitability for child care.

##### **7.705.52 Living Spaces and Equipment Necessary in Residential Child Care [Rev. eff. 11/1/98]**

- A. There shall be separate sleeping rooms for boys and girls. In sleeping rooms that accommodate two to four children, 60 square feet of floor space per child shall be provided. There shall be no more than four children in any bedroom. Each bedroom for single occupancy shall have a minimum of 80 square feet of floor space. Closet space of 4 square feet per child and drawer space for storage of personal items sufficient for the occupants in each sleeping room shall be provided.
  - 1. Pre-existing licensed facilities with sleeping rooms which accommodate more than four children per room shall have permanent or partial partitions to provide separation and privacy between every four beds. Exceptions to space requirements in preexisting licensed facilities shall be approved by the State Department of Human Services.
  - 2. Sleeping rooms above or below the floor of exit travel shall not be used for sleeping purposes for children who are non-ambulatory.
- B. Each child shall be provided suitable sleeping facilities consisting of individual beds or bunks complete with mattresses in good repair and constructed so as to facilitate cleaning while in use by residents and upon each change of occupancy. Single beds shall be spaced not closer than 36 inches laterally, or end-to-end. Triple-deck bunks are prohibited. Beds being used by children shall have a mattress cover, clean sheets, pillows, pillowcases and blankets.
- C. Each room of occupancy shall be well-lighted and adequately ventilated by exterior windows or by an approved air-conditioning system. If a mechanical ventilation system is provided, it shall meet requirements of local building codes and fire regulations.
- D. When child care staff live in or sleep at the facility, there shall be at least one room adequately furnished and a private bath facility reserved for child care staff. Arrangements where child care staff share sleeping rooms with children who have special needs shall be approved by the State Department of Human Services.

- E. Staff rooms shall be located on the same floor or in the general area of children's sleeping rooms so that the child care worker can supervise children and be readily accessible when needed.
- F. There shall be a minimum of 25 square feet of space for each child for informal individual or group activities. The area shall be adequately and appropriately furnished to accommodate social and recreational activities associated with such living areas.
- G. There shall be a designated space distinct from children's living areas to serve as an administrative office for such activity as secretarial work and bookkeeping.
- H. There shall be a designated space to allow private discussions and counseling sessions.
- I. Each residential facility shall have a telephone. Each separate living unit within a residential facility shall have 24-hour telephone service or an intercom system connected with an outside telephone service. Emergency telephone numbers, including fire, police, physician, poison control, health agency, and ambulance shall be conspicuously posted adjacent to the telephone.

**7.705.53 Outdoor Space and Equipment [Rev. eff. 10/1/03]**

- A. The grounds of the facility shall be maintained in a manner that is free from any hazard to health or safety.
  - 1. Garbage and rubbish which is stored outside shall be stored securely in noncombustible, covered containers and shall be removed at least once every week or more frequently, if necessary.
  - 2. Garbage and rubbish containers and incinerators, shall be located separate from play areas.
  - 3. Fences shall be in good repair.
  - 4. Areas determined to be unsafe, including steep grades, cliffs, open pits, swimming pools, high-voltage boosters., or high- speed roads, shall be fenced off or have natural barriers to protect children.
  - 5. Playground equipment shall be so located, installed, and maintained as to ensure the safety of children.
- B. A residential facility shall have access to outdoor recreational space and suitable recreational equipment.
- C. When a swimming pool is provided, it shall meet the requirements of the Colorado Department of Public Health and Environment or its local unit. Safety precautions shall include protective fencing, winter coverage which shall exclude plastic or inflatable-type domes, and a nonskid surface area of at least four (4) feet adjoining pool sides. The use of the pool shall be in accordance with Section 7.705.22, G.

**7.705.54 Dining, Kitchen, Laundry, Bathroom Facilities [Rev. eff. 10/1/03]**

- A. The dining area, whether located in the living unit or in a separate central dining facility, shall meet the following requirements:
  - 1. It shall be well-lighted, properly heated, and ventilated.
  - 2. It shall be large enough to accommodate the children and staff.

3. Floors shall be constructed and maintained with a non- slipping surface.
  4. Tables and chairs shall be of sturdy construction, scaled or adjusted to the proper height and size so that children can be comfortably served.
  5. Table service and settings shall be of the type, size, and design appropriate to the ages of children served.
  6. Dining and recreation areas may be combined if regulations for dining areas are consistently met.
- B. The kitchen shall be designed and equipped to meet the requirements of efficiency, fire safety, and comfortable working conditions for the staff. There shall be provision for CO<sub>2</sub> or a dry powder fire extinguisher(s) in kitchen. If a restaurant-type range is used, a hood with a filter must be installed.
- C. When an institution has a central laundry facility, it shall be located in an area separate from areas occupied by children. Noncommercial types of laundry facilities with ample space for sorting, drying, and ironing shall be made available to children old enough and capable of handling their personal laundry. These facilities shall be in an area supervised by a responsible adult.
- D. There shall be a ratio of at least one toilet, lavatory, bathtub or shower for every six (6) children, and readily accessible. Toilet and bath facilities for boys and girls and staff shall be separate. Toilets and bath facilities shall have doors or partitions. Urinals may be substituted for up to one-third of the required number of toilets in facilities which accept boys. Toilets and bath facilities shall be accessible from a common hallway and be on the same floor with sleeping rooms.

#### **7.705.55 Building Safety [Rev. eff. 7/2/06]**

##### **A. Maintenance**

1. Buildings shall be kept in good repair and maintained in a safe condition. Good housekeeping shall be observed in all areas at all times.
2. All areas available for children's activities shall be maintained in safe condition, including elimination of debris and hazardous items of all kinds, and removal of broken play and recreational equipment and any other devices which are in poor repair.
3. Closets, attics, basements, cellars, furnace rooms; and exit routes shall be kept free from accumulation of extraneous materials such as discarded furniture, furnishings, newspapers, or magazines. Combustibles such as cleaning rags, mops, and cleaning compounds shall be stored in well- ventilated areas. Solutions, cleaning compounds, and other hazardous substances will be properly labeled and stored in areas inaccessible to children.
4. Storage of gasoline, kerosene, fuel oil, and other flammable material shall meet requirements of safety and fire codes.
5. Storage shall not be permitted around water heaters and furnaces.

##### **B. Exits**

1. Every building or structure, new or old, shall be provided with exits sufficient to permit the prompt escape of occupants in case of fire or other emergency. Additional safeguards shall be provided for life safety in case any single safeguard is ineffective due to some

human or mechanical failure.

2. Each facility shall have at least two approved, alternate, remotely-located means of egress from each floor of the building to safe and open space at ground level.
3. Egress from each dwelling unit, sleeping room, and dormitory shall be directly available without passage through another dwelling or rooming unit to the outside or to a common hallway leading to the outside.
4. In residential child care facilities approved as a therapeutic residential child care facility or psychiatric residential treatment facility, time-delay panic hardware utilizing 30- to 90-second delays before release may be installed on the two approved exit doors on each floor of the facility, provided that such time-delay panic hardware is approved by the fire department having jurisdiction over the facility.

The two approved exit doors on each floor must release and open automatically after the 30- to 90-second delay without constant pressure being applied to the doors and must remain open for at least 15 seconds. The two approved exit doors on each floor can neither automatically reset themselves nor be reset from a central control panel for a period of at least 15 seconds after release. Magnetic locks in conjunction with time-delay panic hardware that meets these criteria are allowed.

5. In every building or structure, exits shall be so arranged and maintained as to provide free and unobstructed egress from all parts of the building or structure at all times when it is occupied. No lock or fastening to prevent free escape from the inside of any building shall be installed unless specifically authorized pursuant to Section 7.705.55, B, 4, or 7.705.7.
6. Every exit shall be clearly visible or the route to reach it shall be conspicuously indicated in such a manner that every occupant of every building or structure who is physically and mentally capable will readily know the direction of escape from any point. Each path of escape shall be so arranged or marked that the way to a place of safety outside is unmistakable.
7. In every building or structure adequate and reliable illumination shall be provided for all exit facilities.
8. Every building or structure shall be so constructed, arranged, equipped, maintained, and operated as to avoid undue danger to the lives and safety of its occupants from fire, smoke, fumes, or resulting panic during the period of time reasonably necessary for escape from the building or structure in case of fire or other emergency.
9. Compliance with this rule shall not be construed as eliminating or reducing the necessity for other provisions for safety of persons using a structure under normal occupancy conditions, nor shall any provision of this rule be construed as requiring or permitting any condition that may be hazardous under normal occupancy conditions.
10. The local fire department shall determine the adequacy of exits and other measures for life safety in accordance with the requirements of the Uniform Building Code and the National Fire Protection Codes. In cases of practical difficulty or unnecessary hardship, the local fire department may grant exceptions from the Uniform Building Code or the National Fire Protection Codes, but only when it is clearly evident that reasonable safety is thereby secured.

#### C. Electrical Equipment

Electrical wiring systems in all buildings shall conform to the requirements of the state electrical board. Electrical appliances shall be examined frequently for worn or otherwise defective wiring.

#### D. General Safety Practices

1. A residential facility shall immediately notify the responsible agency or department of a fire or other disaster which might endanger children or require their removal for reasons of health and safety. The Department of Human Services shall be immediately notified of a fire or other disaster.
2. Security guards patrolling the grounds and structures of a residential facility, whether employed by the facility or by a security service under contract to the facility, shall not be permitted to be in possession of any firearm or chemical weapon on the grounds or within the structures of the facility.
3. Porches, elevated walkways, and elevated play areas within a residential facility shall have barriers to prevent falls.
4. Power-driven equipment used by a residential facility shall be kept in safe and good repair. Such equipment shall be used by children only under the direct supervision of a staff member and according to State law.
5. Smoking shall not be permitted within the facility or on the grounds.
6. Staff and children shall be trained to report fires and other emergencies appropriately. Children and staff shall be trained in fire prevention.
7. In every building or structure, fire alarm facilities shall be provided to warn occupants of the existence of fire so that they may escape or to facilitate the orderly conduct of fire exit drills.
8. Responsibility for the planning and conduct of fire drills shall be assigned to competent persons qualified to exercise leadership.
9. A residential facility shall maintain an active safety program, including investigation of all accidents and recommendations for prevention.

### 7.705.6 RECORDS AND REPORTS

#### 7.705.61 Confidentiality [Rev. eff. 11/1/98]

- A. A residential child care facility may make available information in the case record to the child, his parent(s), or guardian and their respective legal counsel if the information being released does not contain material which violates the right of privacy of another individual and/or material that must be withheld from release according to other laws or by order of the court. If in the professional judgment of the administration of the facility, it is felt that information contained in the record would be damaging to a child that information may be withheld except under court order. Facilities which have on-grounds educational programs shall comply with federal and state laws governing educational records.
- B. It is acceptable to use material from case records for teaching or research purposes, development of the governing body's understanding and knowledge of the facility's services, or similar educational purposes, when names are deleted and other identifying information is disguised or deleted.



- C. It is necessary to obtain an employee's permission or court order for the release of information from a personnel file.

#### **7.705.62 Necessary Records and Their Retention [Rev. eff. 7/2/06]**

- A. A permanent register shall be maintained which contains:
  - 1. Identifying information, such as name, sex, birth date, race, on each child who has been in care at the facility, including a child admitted in an emergency.
  - 2. Admission date and referring agency.
  - 3. Discharge date and to whom discharged.
- B. Records for personnel shall be retained for at least three years.
- C. The following records shall be on file at the facility or administrative office:
  - 1. Governing structure, including the charter, articles of incorporation, by-laws, or other legal basis for existence.
  - 2. Current health department inspection report.
  - 3. Current fire department inspection report.
  - 4. A list of current staff and substitutes and staffing pattern.
  - 5. Insurance coverage.
  - 6. Annual financial audit or financial statements.

#### **7.705.63 Personnel Records [Rev. eff. 7/2/06]**

Personnel record for each employee shall include name, address, birth date, names and telephone numbers of persons to be notified in event of an emergency; date of employment, and date and reason for separation; official documents verifying education, training, and work experience; pre-employment references; and, the indication of awareness of agency policies.

#### **7.705.7 LOCKED QUIET ROOM**

##### **7.705.71 Definition and Statement of Purpose and Policy [Rev. eff. 11/1/98]**

- A. A "locked quiet room" is a single room in an open treatment unit of a residential child care facility in which a child, six years old or older, may be confined. The child is to be confined in the locked quiet room only during periods of crisis or emergency for the child, when the child is a danger to him/herself and/or others, the child is beyond control, all other reasonable means to control or calm the child have failed, and the child's welfare or the welfare of those around the child demand that the child be confined. Confinement is not to be used for punishment and shall not exceed two hours per incident.
- B. Each licensed residential child care facility which operates a locked quiet room shall have a written statement of purpose and policy which describes at least: the philosophy and use of the room, the intake process, the evaluation of child while in the room, emergency procedure while a child is in confinement and method for resident's grievance regarding the use of the room.

#### **7.705.72 Facility Staff Requirements for Locked Quiet Rooms [Rev. eff. 7/2/06]**

- A. There shall be a quiet room supervisor who is a full-time facility staff member, is a Colorado Licensed Clinical Social Worker (LCSW), a Colorado Licensed Professional Counselor (LPC), a Licensed Marriage and Family Therapist (LMFT), a Colorado licensed psychologist or a board-eligible psychiatrist licensed to practice medicine in Colorado, and is designated and trained to be responsible for the use of the quiet room. If the quiet room supervisor is not a psychiatrist or a licensed psychologist, there shall be such a person contracted to provide consultation with the quiet room supervisor and staff.
- B. The residential child care facility which operates a locked quiet room shall appoint a neutral fact-finder pursuant to the statute. This neutral fact-finder shall not be the quiet room supervisor, as designated in Section 7.705.72, A, or the person who placed the child in the locked quiet room. The fact-finder shall determine if the situation resulting in the confinement of a child in a locked quiet room merits such a decision. The fact-finder may be a staff member of the facility or a professional contracted by the facility in one of the following positions: administrator, assistant administrator, social worker, psychologist, psychiatrist, nurse, lawyer.
- C. The facility shall designate in its statement of purpose and policy for the operation of the locked quiet room which staff members shall be able to place a child within the locked quiet room. Staff members shall be from one or more of the following positions: administrator, assistant administrator, child care staff, social worker, teacher, psychologist, psychiatrist, or nurse. Designated staff members must be trained and supervised in the use of the locked quiet room.
- D. Persons specified to place a child in the locked quiet room shall have ongoing training and supervision which shall include at least the following regarding the use of the locked quiet room: the purpose and policy, legal ramifications of placing a child in the locked quiet room, the role of the neutral fact-finder, dynamics of behavior of children when in confinement, safe methods of getting the child to the quiet room, methods of searching a child when placing a child in the locked quiet room, safety of the child and staff, emergency procedures including first aid and fire protection, and the protection of keys for the locked quiet room.

#### **7.705.73 Placement of Child in the Locked Quiet Room [Rev. eff. 7/2/06]**

- A. At the time of admission of the child to the facility which has a locked quiet room, the person or agency holding legal custody of the child shall be informed of the use of the locked quiet room and shall be asked to sign a permission for the child to be placed in the locked quiet room if it is deemed necessary pursuant to the agency policy. If this permission is unsigned, the child may not be placed in a locked quiet room.
- B. The facility shall have written individual child's plans for each child in residence. Prior to the placement of the child in the locked quiet room, the conditions for use of the locked quiet room shall be detailed and justified in the written plan, and the child shall be oriented to the room, the purpose of its use and type of behavior which might result in its use.
- C. A child who is placed in the locked quiet room must be in a period of crisis, such as when the child is violent or potentially destructive to such a degree that he/she is in imminent danger to him/herself and/or others as stated in Section 7.705.71.
- D. Staff members designated in the agency policy may not place a child in the room for more than 20 minutes without having written approval from his/her superior, the quiet room supervisor, or the facility administrator.
- E. At the time of placement of the child in the locked quiet room, the neutral fact-finder shall be notified in person or by telephone. Leaving a message is not notification, and if the neutral fact finder

cannot be contacted in person or by telephone, the child may not be placed in a locked quiet room.

- F. There must be notification of another staff member, who is currently on duty, that a child has been placed in the locked quiet room and a record made of the episode which led to the child being placed in the locked quiet room.
- G. The light outside the entrance of the quiet room shall be lighted when a child is locked inside the room (see Section 7.705.76, N) and a staff member must be directly outside the locked quiet room at all times when a child is locked inside the room.

#### **7.705.74 Charting [Rev. eff. 7/2/06]**

The following items shall be recorded:

- A. Written report which states the child's name, time of day child was placed in the locked room, staff member who placed child in the locked room, staff member who was notified, and describes the following: the precipitating incident and the child's behavior before placement in the room, actions taken by staff members of a less restrictive nature to try to control, calm or contain the child.
- B. During confinement, the following shall be recorded if applicable:
  - 1. An indication that the child was checked frequently, but at least once every 15 minutes, with the following notations: time, one-line description of what the child was doing, initials of the person supervising.
  - 2. When child was last given access to restroom facilities.
  - 3. When child had opportunity for exercise.
  - 4. When and what type of medications were given and by whom.
  - 5. When child's last staff contact occurred.
- C. Description of the resolution between staff member and the child at the termination of the use of the room and the behavior of the child as a result of being in the locked quiet room.
- D. The observable physical condition of the child when entering the locked quiet room and any change in the observable physical condition of the child when leaving the locked quiet room.
- E. An indication of review by the neutral fact-finder as to the appropriateness of confinement of the child in the locked quiet room.
- F. Verification that notification was made to the county department or the Division of Youth Corrections (DYC) the next business day of the confinement and the appropriateness of the confinement.

#### **7.705.75 Review of Use of Locked Quiet Room [Rev. eff. 7/2/06]**

- A. The record of use of the locked quiet room shall be reviewed daily by the quiet room supervisor and weekly by the facility administrator. If one child is placed in the locked room more than three times in 72 hours or a maximum of 5 hours in 72 hours, the entire plan for the child shall be reviewed and a person who meets the requirements of consultant to the quiet room supervisor and staff, as required at Section 7.705.72, A, shall authorize any further use of the locked quiet room or other treatment for the child.

- B. If the same staff member places a child in the locked quiet room repeatedly, this shall be investigated by the quiet room supervisor.

**7.705.76 Physical Requirements for a Locked Quiet Room [Rev. eff. 11/1/98]**

- A. The locked quiet room shall be located in reasonable proximity to the living unit or other areas of activity. An adult staff member shall stay within a 12-foot radius of the locked quiet room when a child is locked inside the room.
- B. The quiet room shall be a minimum of 80 square feet in size.
- C. The locked quiet room shall be kept in a clean and sanitary condition.
- D. All switches for light, heat, and ventilation, as well as other electrical outlets, shall be outside the room. All switches shall be available only to the staff.
- E. There shall be no features by which a resident might injure himself within the locked room such as utility pipes, cleaning equipment and materials, or mirrors.
- F. Exterior windows are not recommended, but if there are window panes they shall be of shatter-resistant material and have psychiatric screening.
- G. There shall be an observation window on the door from which all parts of the room are visible for purposes of supervision. The window shall be made of shatter-resistant materials.
- H. There shall be an approved ventilating system.
- I. There shall be an approved system which detects products of combustion and is wired into a non-switch electrical outlet and is out of the reach of children.
- J. The locked quiet room shall be constructed of one-hour fire resistive material. The door shall be of one-hour fire resistive material.
- K. The locked quiet room shall have a lighted, soothing environment. The child shall not be subjected to glaring lights. All lights shall be recessed into the ceiling and shall be covered with a shatter-resistant guard which is flush with the ceiling.
- L. There shall be no more than one locked door between the child and the staff member.
- M. If the locked quiet room is soundproof, there must be an intercom system which is activated when a child is in the room.
- N. There shall be a light over the entrance of the locked quiet room which is lighted any time a child is locked in the quiet room.

**7.705.77 Approvals Necessary to Operate Locked Quiet Room [Rev. eff. 7/2/06]**

- A. The written approval of the local fire department and the State Department of Human Services must be received prior to the initial use of the locked quiet room.
- B. The records of the use of the locked quiet room, the policy for operation of the room, the children's records, staff records and the room shall be open to staff members of the department for inspection at any time.
- C. There shall be an inspection by the fire department at least annually. The licensee shall retain a copy

of the inspection report in the facility file. The licensee shall request such an inspection.

- D. If it is found, at the time of inspection of the locked quiet room, that the facility does not meet all the regulations for operation of the room, the department staff member shall give written notice of specific deficiencies which shall be corrected. The residential child care facility shall cease confining any child in the locked room until corrections are completed and authorization is given by the department.

## **7.705.8 SPECIAL RULES AND REGULATIONS FOR SHELTER CARE**

### **7.705.81 Definition and Policy Statement [Rev. eff. 11/1/98]**

- A. Any residential child care facility may provide shelter or 24-hour emergency care for children in need of short-term placement resulting from such circumstances as child abuse or running away from home. Some facilities accept only children for emergency care and are known as shelter care facilities.
- B. The acceptance of children for emergency care must be stated in the written purpose of the facility and the admission policy.
- C. Residential child care facilities shall make every effort to assure that shelter care placements do not exceed sixty days. Exceptional circumstances shall be documented in the case file. No child shall remain in a shelter care facility for longer than ninety days. Review of placement will be required as appropriate.
- D. These regulations are specifically for shelter care facilities. The following regulations are in addition to corresponding regulations in Sections 7.705.1 through 7.705.6. However, if there is a conflict between those rules and regulations and these special rules and regulations, these special rules and regulations shall apply for shelter care facilities.

### **7.705.82 Admission to Shelter Care and Orientation [Rev. eff. 11/1/98]**

- A. At the time of emergency shelter care placement of a child, the facility shall obtain at least the following information : name, birth date, if available, physical description of the child, date and time of the admission, name and authority of person bringing child to the facility, and reason for placement.

On the next working day following emergency shelter care placement of the child, the facility shall obtain from the county department of social services or the parent of guardian a signed, written authorization to obtain medical care for the child. The county department is authorized to give this authorization pursuant to this staff manual.

- B. The facility shall ensure that each newly admitted child is checked by facility staff or physician for signs of illness, symptoms of abuse, and the presence of vermin.

The facility shall have a medical plan, including staff training, which includes the screening of the child for child abuse and signs of illness requiring immediate medical attention.

- C. If a child remains in shelter care for longer than thirty days, a medical examination must be completed in compliance with Section 7.705.31, B.
- D. The facility shall provide orientation for the new child. Orientation shall include:
  - 1. Tour of the facility.

2. Introduction to staff.
3. Description of rules, regulations, and discipline policies of the facility.
4. Discussion of tasks and behaviors the child is expected to perform.
5. Discussion regarding personal possessions the child is permitted to bring and obtain while in shelter care.

**7.705.83 Education and Treatment [Rev. eff. 11/1/98]**

- A. The facility shall ensure that each child is provided with an educational program in accordance with state and local laws. Any educational program provided by a shelter care facility shall comply with all applicable state and local laws.
- B. Daily routine schedules shall be established by the facility which ensures a stable, orderly, supportive environment for children in care.
- C. Case plans shall be developed for each child who stays in shelter care longer than two weeks. The plan will include, at least, issues regarding personal and group living skills. The child shall be involved in the establishment of short-term goals.
- D. A permanent placement plan shall be made for the child within thirty days of admitting a child into care. The comprehensive assessment as found at Section 7.705.23, B, should serve as a basis for the plan.

**7.705.84 Personnel [Rev. eff. 11/1/98]**

- A. A shelter care facility shall maintain the staff ratio described at Section 7.705.46.
- B. A shelter care facility must have awake staff during the children's sleeping hours.
- C. A shelter care facility shall make adequate provisions to ensure the immediate availability of additional staff in the event of an emergency or crisis.
- D. Training programs for staff in shelter care facilities shall reflect special emphasis on the following areas:
  1. Passive physical restraint techniques.
  2. Crisis intervention.
  3. Crisis and emergency procedures.

**7.705.85 Records [Rev. eff. 11/1/98]**

- A. A record for a child accepted for emergency care or in a shelter care facility shall include:
  1. Information obtained at admission pursuant to Section 7.705.82.
  2. Statement from the physician about the child's physical examination pursuant to Section 7.705.31, B.
  3. Assessment and permanent placement plan.

4. Record of medication given to the child while in care.
5. Date of discharge, to whom the child was discharged, and physical description of child at time of discharge.

#### **7.705.9 THERAPEUTIC RESIDENTIAL CHILD CARE FACILITIES (TRCCF) [Eff. 7/1/06]**

Each Residential Child Care Facility wishing to provide care as a TRCCF must comply with rules for Residential Child Care Facilities. The following rules shall be in addition to those in Section 7.705.1 through 7.705.77; however, if there is a conflict between the RCCF rules and the TRCCF rules, these TRCCF rules shall apply.

##### **7.705.91 Definitions [Eff. 7/7/06]**

- A. A "Therapeutic Residential Child Care Facility (TRCCF)" is a Residential Child Care Facility which provides fee-for-service therapeutic 24-hour care for:
  1. Five (5) or more children from three (3) to eighteen (18) years of age; and,
  2. Those children in the custody of a county department of social/human services eighteen (18) to twenty-one (21) years of age who are placed into a TRCCF by court order prior to their 18th birthday and are in need of mental health treatment in a structured environment.
  3. Youth in the custody of the Division of Youth Corrections (DYC) may be placed in a TRCCF by court order past their eighteenth (18th) birthday but before their twenty-first (21st) birthday.
- B. "Medical necessity" means that a covered service shall be deemed a medical necessity or medically necessary if, in a manner consistent with accepted standards of medical practice, it:
  1. Is found to be an equally effective treatment among other less conservative or more costly treatment options; and,
  2. Meets at least one of the following criteria:
    - a. The service will, or is reasonably expected to prevent or diagnose the onset of an illness, condition, primary disability or secondary disability.
    - b. The service will or is reasonably expected to cure, correct, reduce or ameliorate the physical, mental, cognitive or developmental effects of an illness, injury or disability.
    - c. The service will or is reasonably expected to reduce or ameliorate the pain or suffering caused by an illness, injury or disability.
    - d. The service will or is reasonably expected to assist the individual to achieve or maintain maximum functional capacity in performing activities of daily living.
- C. The "Colorado Client Assessment Record (CCAR)" means the evaluation of a child in the custody of a county department of human/social services or Division of Corrections that determines the child's mental health diagnosis and needs for therapy.
- D. The "licensed professional person" means the person responsible for determining medical necessity of the therapy services provided to child(ren) in care on a monthly basis.
- E. "Multidisciplinary team" means a group comprised of at least one licensed professional person and

other staff responsible for the treatment of the child, and may include a staff member from the referral agency.

- F. "Referral agency" means the Division of Youth Corrections, county department of human/social services who has custody of a child, or a mental health agency (behavioral health care organization or community mental health center) that refers the child to the TRCCF for the purpose of placement through the Child Mental Health Treatment Act.

#### **7.705.92 Personnel [Eff. 7/7/06]**

The director of a TRCCF shall meet the qualifications for an administrator of a Residential Child Care Facility as stated in Section 7.705.42. In addition, a staff member who shall be known as the licensed professional person shall be qualified as a physician licensed pursuant to Article 36 of Title 12, C.R.S., a psychologist licensed pursuant to part 3 of Article 43 of Title 12, C.R.S., a clinical social worker licensed pursuant to Part 4 of Article 43 of Title 12, C.R.S., a marriage and family therapist licensed pursuant to Part 5 of Article 43 of Title 12, C.R.S., a professional counselor licensed pursuant to Part 6 of Article 43 of Title 12, C.R.S., or a social worker licensed pursuant to Part 4 of Article 43 of Title 12, C.R.S., that is supervised by a licensed clinical social worker or a mental health professional provisionally licensed pursuant to Part 2 of Article 43 of Title 12, and shall provide therapy services to children in care.

#### **7.705.93 Admission Criteria [Eff. 7/7/06]**

A. To be eligible for admission into a TRCCF, the child shall be:

1. Between the ages of three (3) and eighteen (18) or up to twenty-one (21) years of age if under the continuing jurisdiction of the court prior to the child's 18th birthday and in the custody of a county department of social/human services on or before the child's 18th birthday; or between the ages of ten (10) and twenty-one (21) years of age and in the custody of the Division of Youth Corrections; and,
2. Diagnosed with a psychiatric disorder; and,
3. Assessed using a current valid Colorado Client Assessment Record (CCAR) that supports medical necessity prior to or within fourteen (14) calendar days of admission or another valid instrument if placed by an entity other than a county department or the Division of Youth Corrections; and,
4. Determined in an initial assessment to be capable of benefiting from the TRCCF services as determined by a licensed professional person.

B. The referral agency shall use the CCAR to make an initial assessment; and,

C. After placement, a licensed professional person employed by the TRCCF shall make an independent assessment that the child meets criteria for admission into a TRCCF and is in need of therapy services.

D. A child shall be discharged from the TRCCF when:

1. The child has attained treatment goals; or,
2. The child is no longer able to benefit from the service or is no longer progressing toward therapeutic goals, is no longer progressing toward therapeutic goals, or is referred elsewhere for treatment; or,
3. The child's DYC commitment ends.



#### **7.705.94 Plan of Care [Eff. 7/17/06]**

- A. The multidisciplinary team shall develop and implement a comprehensive, individualized written plan of care that is signed and dated.
- B. The multidisciplinary team shall develop an initial plan that addresses the immediate and/or emergency needs of the child within 72 hours of admission.
- C. The multidisciplinary team shall develop a comprehensive plan of care within fourteen (14) calendar days after admission. The plan shall be signed and dated by the child, the referral agency, and the licensed professional person, and shall:
  - 1. Address all areas listed at Section 7.714.4, C, 2, together with clinical and other needs including the child's presenting problems, physical health, emotional status, behavior, support system in the community, available resources, and discharge plan.
  - 2. Include specific goals and measurable objectives, expected dates of achievement, specific discharge and transitional/after-care and follow-up services criteria to be met for termination of treatment.
  - 3. Specify the type, frequency, and duration of clinical therapy services, rehabilitation services, medication management, emergency services, initial assessment, documented treatment modifications, and other services determined to be necessary to meet the child's specific goals.
  - 4. Specify that all TRCCF services are necessary to meet the needs of the child and to treat the child's current diagnosis.
  - 5. Identify the provision of, or the referral for, services other than TRCCF services and shall document any court ordered treatment including identifying the agency responsible for providing the court ordered treatment.
  - 6. Be provided in all situations except emergency situations.
- D. The TRCCF shall ensure that the child and the legal guardian participate in the formulation, review, and revision of the plan of care. If the child or legal guardian is unable to participate or when his or her participation is clinically contraindicated, the TRCCF shall document the reasons in the child's record. Any decision to not involve the family or guardian shall be approved by the referral agency. In addition, other persons selected by the child, the family or guardian, the referral agency or the multidisciplinary team may be included in the formulation, review, and revision of the plan care.
- E. There shall be monthly review of each plan to evaluate whether the short-term and long-term goals have been achieved and not achieved. The plan shall be revised as appropriate.

#### **7.705.95 Client Eligibility [Eff. 7/7/06]**

- A. Therapeutic services shall be provided based on the child's mental health needs:
  - 1. A "CCAR Level A" means services for a child needing low mental health treatment or an independent living situation. If the child is living in the community, the child shall have the ability to return to the TRCCF at any time the multidisciplinary team and the licensed professional person providing therapy deems necessary.
  - 2. A "CCAR Level B" means services for a child with moderate mental health needs who resides

in the facility.

3. A "CCAR Level C" means services for a child with the most severe mental health needs who resides in the facility.

B. TRCCF services shall be identified in the plan of care and provided as indicated by the child's need for:

1. Individual therapy sessions, which shall be provided as specified for the acuity level of care. Individual therapy sessions shall be conducted by a licensed professional person.
2. Group therapy sessions which shall be provided as specified for the acuity level of care. Group therapy may include a therapeutic intervention provided to two or more children that assists in their ability to function. A licensed professional person shall conduct the group therapy sessions.
3. Family therapy sessions which shall be provided as specified for the acuity level of care. The family therapy sessions shall be provided with a significant other and the child must be present unless contraindicated. Family therapy sessions shall be conducted by a licensed professional person.
4. Therapeutic case management services.
5. Emergency services.
6. Medication administration services.
7. Vocational services.
8. Clinical services to include activities of daily living.
9. Transitional services.

C. The TRCCF shall ensure that a physician is responsible for the component of the treatment plan requiring medication management services.

D. The TRCCF shall facilitate access to necessary medical care and shall be responsible for coordinating mental health treatment with medical treatment provided to the child.

#### **7.705.96 Application and License for the TRCCF [Eff. 7/1/06]**

A. The application for a license to operate a TRCCF shall be made on the original application form for a Residential Child Care Facility license. The applicant shall indicate his/her intention of operating a TRCCF on the original application form in the statement of purpose of the facility. Payment for the prescribed fee shall be enclosed with the application.

B. Each Residential Child Care Facility providing care for five or more children in a TRCCF shall have a license which specifically states that a TRCCF is permitted.

#### **7.706 RULES REGULATING DAY TREATMENT CENTERS**

All day treatment centers must comply with the "General Rules for Child Care Facilities" as well as the "Rules Regulating Day Treatment Centers" .

##### **7.706.1 DEFINITIONS**

- A. A “day treatment center” is a facility which provides less than 24-hour care for groups of five or more children from 5 to 16 years of age and over. The center will provide a structured program of various types of psycho-socio and/or behavioral treatments to prevent or reduce the need for placement of the child out of the home or community. This definition does not preclude the day treatment center from enrolling children 16 years old to 18 years old and those persons to 21 years old who are placed by court order prior to their eighteenth birthday.

This definition shall not include special education programs operated by a public or private school system or programs which are licensed by other regulations of the Colorado Department of Human Services for less than 24-hour care of children, such as day care centers or centers for developmentally disabled children.

- B. “Dangerous behavior” is behavior that poses a clear and present hazard to a child or to other individuals.
- C. “De-escalation” is the use of therapeutic interventions with a child during the escalation phase of a crisis. The interventions are designed to allow children to contain their own behavior so that acute physical behavior does not develop that would lead to the need to use a physical restraint.
- D. An “emergency situation” is one in which a child is an actual danger to him/herself or others or when there is a present danger of extensive property damage.
- E. “Escalation” is an increase in intensity of a child's out-of control behavior.
- F. “Mechanical restraint” means the use of devices intended to involuntarily restrict the movement or normal functioning of a portion of an individual's body. Mechanical restraint does not include the use of protective devices used for the purpose of providing physical support or prevention of accidental injury.
- G. “Physical restraint” (“restraint” ) is the physical intervention by a staff member of the facility in an emergency situation to limit, restrict, or control the dangerous behavior of a child by means of physical holding of the child.
- H. “Reasonable” as used in these rules means appropriate and suitable, or not excessive or extreme.

#### **7.706.11 Governing Body**

- A. The governing body is the individual, partnership, corporation or association in whom the ultimate authority and legal responsibility is vested for the conduct of the day treatment center.
- B. The governing body shall be identified by its legal name. The names and addresses of individuals who hold primary financial control, members of the board of directors and officers of the governing body shall be disclosed fully to the Colorado Department of Human Services. When changes of persons holding any of these positions occur, the department shall be informed of the names and addresses of the new individuals annually.

#### **7.706.12 Statement of Purpose**

Each day treatment center shall formulate a written statement which includes the purpose and objective of the day treatment center, description of the services to be offered by the day treatment center, ages of children and type of children to be accepted by the day treatment center, and the geographic area in which children may reside for acceptance by the day treatment center.

#### **7.706.13 Financial Operation**

- A. An annual budget reflecting anticipated income by source and expenses by purpose, plus an accompanying balance sheet, must demonstrate that the agency has assured resources to carry out its defined purpose through its first year of operation and must be submitted with the original license application.
- B. The center shall maintain a competent accounting system, and the financial records of the center shall be available for inspection by staff members of the department.
- C. Each day treatment center whose total annual expenditures exceed \$100,000 shall provide for an annual audit of all accounts by a certified public accountant who is not an employee of the center nor a member of the governing body. Centers with less than \$100,000 total annual expenditures may submit un-audited financial statements compiled by agency personnel.

#### **7.706.14 Personnel**

- A. Each staff member of the day treatment center shall evidence an interest in and knowledge of children and concern for their proper care and well-being.
- B. Each staff member of the day treatment center shall obtain a physical examination which shall be performed during the six-month period preceding employment by the center. This examination shall have been performed by a physician or a qualified nurse practitioner licensed to practice in the State of Colorado and shall verify that she/he suffers from no illness or communicable disease, including tuberculosis, that would adversely affect children in care. A statement, signed by the physician or nurse practitioner, shall be submitted to the center and retained in the personnel files. Subsequent statements shall be submitted annually and as required in a written plan signed by the physician.
- C. There shall be at least one written reference regarding each staff member of the center verifying the individual's character and suitability to work with children. This reference shall be retained in the staff member's personnel file.
- D. The administrator of the day treatment center shall have received a bachelor's degree from an accredited college and have completed two years of verifiable work experience with children in the field of psychiatry, psychology, social work, child development and child care, education, nursing, or other allied professions.

The director and governing body shall be responsible for assuring that the Rules Regulating Day Treatment Centers are being met.

- E. There shall be at least one treatment leader on the staff of the day treatment center who shall be responsible for the coordination of treatment of each child registered at the day treatment center. The treatment leader shall have at least a master's degree in the behavioral science field such as social work, psychology, psychiatric nursing; or the treatment leader shall be a psychiatrist who is qualified and licensed to practice in the State of Colorado. In addition to education, the treatment leader shall have completed three years of treatment-oriented experience.
  - 1. If properly qualified, the treatment leader and the administrator may be the same individual.
  - 2. The treatment center may contract with a recognized agency for the provision of treatment services. The staff IT Member of the agency who is to fulfill the responsibility of treatment leader must meet the requirements stated in Section 7.706.14, E.
  - 3. There shall be at least one treatment leader employed by the day treatment center for each 25 children enrolled at the day treatment center. The treatment leader(s) shall be employed and actively involved in the services prescribed for each child through supervision or

direct service for the number of hours per day the treatment program operates.

F. There shall be counselors hired by the day treatment center, sufficient in number, to supervise the children and carry out the program of the day treatment center. Each counselor shall have completed a bachelor's degree in behavioral sciences or four years of experience with appropriate-aged children and be at least 21 years of age. The counselors shall work under the supervision of the treatment leader.

1. The ratio of counselors and/or treatment leader(s) to children in care shall be not less than the following schedule:

Ratio of Counselors and/or Treatment Leader(s) to Children

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2. There shall be at least one counselor or treatment leader on duty at the day treatment center at any time children are present. If only one counselor is on duty, there shall be a second staff member on call and immediately available to be summoned in case of emergency.

3. Substitute counselors shall be of the same minimum qualifications as regularly assigned counselors.

G. Para-professionals must be at least 21 years of age and, under direct supervision, may assist the director, teachers, counselors, and treatment leaders with the children.

H. There shall be one staff member on duty at the center at all times who holds a current Red Cross first aid card or equivalent and CPR card.

#### **7.706.15 Child Care Services**

A. Admission of the children to the day treatment center shall be limited to and in keeping with the stated purpose and goals of the center.

1. Intake policies of the center shall be clearly defined in writing and shall be reviewed and modified as necessary.

2. At intake the center shall obtain:

- a. Identifying information necessary for the child's record as required at Section 7.706.18, A.

- b. Psycho-social history of the child.

- c. A statement about the health history of the child which includes at least the immunization record; information and instruction for care of each child who has a chronic or handicapping problem such as seizures, asthma, diabetes, allergies, heart or respiratory illness or drug addiction; date of last physical examination. If child has not had a physical examination within the past 12 months, such examination shall be completed within 30 days of admission to the program. Subsequent examinations shall be obtained as required by a physician or nurse practitioner licensed to practice in Colorado.

- d. The center shall obtain written permission for the following from the person or agency having custody:

- 1) Permission to treat the child.

- 2) Permission to obtain emergency medical care in the event that the child has an accident or illness requiring medical attention when parent or guardian is unavailable.
  - 3) Permission to provide transportation to and from the center or for center-sponsored activities if necessary.
  - 4) Permission for the use of physical restraint.
- B. For each child in the day treatment program, long range and short term goals shall be established and a case plan written which includes anticipated behavioral changes of the child and projected length of participation in the day treatment program. Goals and case plans shall be evaluated at least monthly. The discharge plans shall become part of the case plan and shall describe the child's behavior at the time of discharge from the day treatment program. The treatment leader shall be responsible for establishment and signing the case plans.
1. Persons to be involved in the process of case planning and periodic evaluation shall include a staff member of the agency having referred the child, the parent or guardian, as appropriate, and staff members of other agencies serving the child.
  2. A monthly progress report shall include a description of the child's behavior, summary of the treatment activities, and revision of the case plan. The report shall be forwarded to the referring agency and reviewed with parent or guardian monthly for the first six months that the child is in the center and quarterly thereafter.
  3. The center shall maintain open communication with parents, guardians and/or referring agency and include each party in the treatment plan and reviews, as may be appropriate for each family and student.
- C. Treatment shall be provided to each child enrolled in the center pursuant to his/her case plan. Treatment sessions with members of the child's family shall be included, as deemed necessary and as part of the case plan. Each child and/or his/her family shall participate in at least two weekly sessions of individual therapy, group therapy or family therapy. All services shall be documented in the child's file.
- D. If the child is attending a school operated by the day treatment program, a plan shall be established with appropriate school personnel of the school most recently or currently attended and with the child's parent(s) or guardian(s) for the education of the child based upon his/her particular needs and special ability.
- E. Each day treatment center shall establish a schedule or a plan of activities which shall indicate the plan for educational and treatment services, as well as other services such as recreation and employment as appropriate for children in care.
- F. Outdoor and indoor recreational equipment and material shall be provided in sufficient variety and quantity so the center may adequately sponsor and supervise necessary recreational activities. Games, toys, equipment, and arts and crafts material shall be selected according to age, number of children, and with consideration of the needs of children to engage in both active and quiet play. All equipment and materials shall be of quality to assure safety, and shall be of a type which allows for imaginative play and creativeness.
1. The center shall establish a written policy related to the participation of children in potentially dangerous recreational activities which include the use of such equipment as trampolines, trail bikes, snowmobiles, boats, bodybuilding equipment and such activities as archery, riflery, horseback riding and backpacking (see Rules Regulating Children's

Camps).

2. A staff member shall be assigned the responsibility for supervision and coordination of the total recreational program including training and supervision of staff and volunteers.
- G. As appropriate to the child's age and ability and as indicated in the case plan, the child shall be offered guidance and help in obtaining paid or voluntary work assignments. If employment services are part of the program of the day treatment center, one center staff member shall be assigned the responsibility of coordinating such work arrangement and shall know the employer of the child, the specific type of work and conditions of employment.
- H. Each child shall receive assistance or supervision needed to help him/her establish good habits of personal care, grooming and hygiene.
- I. Only prescribed medicines labeled with the child's name, name and strength of the medicine, directions for use, date filled, prescription number and name of practitioner shall be given with the written consent from the child's parent or guardian. Medicines must be in the original container. A record of medication administered which includes the child's name, the date and time the medication was administered, the name and dosage of the medication, and the name or initials of the staff person who administered it shall be maintained in the child's file. There shall be one staff member on duty at all times designated to administer and record all medication. The responsible staff person must have completed State approved medication administration training and have documentation on file. All medicines and drugs shall be kept in a locked storage area inaccessible to children.
- J. Children who are in the day treatment center for more than four hours, day or evening, shall receive a meal.
1. If the facility provides the meal, menus shall be kept for at least a two week period, and there shall be a documented review periodically by a qualified nutritional consultant. Children shall not be given foods which are contrary to their religious beliefs or which are known to cause an allergic reaction or health hazard.
  2. Drinking water shall be freely available to children.
- K. Any vehicle used for transportation of children and the vehicle driver shall meet the following regulations:
1. Vehicles shall be licensed in accordance with Colorado state law, and drivers shall comply with applicable laws of the Colorado State Department of Revenue, Motor Vehicle Division, and ordinances of the municipality in which the day treatment center is located.
  2. The drivers shall hold a valid Standard First Aid Certificate or equivalent and CPR card.
  3. Only enclosed vehicles shall be used to transport children except an enclosed pickup truck shall not be permitted. All seats must be forward-facing and shall be securely fastened to the vehicle body. A seat belt or booster seat for children under 40 pounds shall be provided for each seat. Only the number of passengers that can be comfortably seated on passenger seats shall be permitted in the vehicle. Each occupant shall be sitting when the vehicle is moving. Passengers shall not sit on the floor.
  4. Each vehicle shall be equipped with a first aid kit, an operable fire extinguisher and seat belts in the front seats.
  5. The day treatment center shall carry public liability insurance on vehicles used for

transportation of children in the day treatment program.

6. The staff ratio required at the day treatment center shall be maintained in any vehicle when transporting children from the day treatment center. The driver may be considered in the staff ratio.
7. The center shall receive written permission from parents or guardians for transportation of a child to and from a center or for center-sponsored excursions.

#### **7.706.16 Behavior Management**

- A. Each day treatment center will have written documentation of policies and procedures that describe the treatment model, philosophy or principles upon which the behavior management system is based and who shall be responsible for disciplinary measures
- B. The behavior management system must be explained to parents/guardians and to children taking into account the child's developmental and cognitive level.
- C. The behavior management system must include, at a minimum:
  1. Positive constructive or educational components including but not limited to diversion, withholding of privileges, talk with the child about the situation, positive reinforcement, skill training, and skill development.
  2. Clear rules and expectations with predictable, consistent consequences or interventions that will be used by staff members to reinforce positive behaviors and to address disruptive, off-task or unsafe behaviors in the program.
  3. A continuum of de-escalation and redirecting techniques to deal with disruptive, escalating or unsafe behaviors.
  4. A review process for addressing chronic behavior problems or serious acute problems in which a child is not responding to the behavior management program as being implemented.
- D. The program will have a monitoring process of the behavior management system to assure both consistency in implementation and for continuous quality improvement as needed to address changing client needs and behaviors.
- E. Physical restraints will be considered an extreme level of intervention at the day treatment level. The occurrence of restraints for a particular child will require a review as described in Section C, 4 above. The goal of these reviews will be to eliminate restraints for the child by reassessing the identified problem, adjusting the treatment plan, utilizing additional resources or other such interventions including the evaluation of whether day treatment is a level of care at which this child can successfully function at this time.
- F. The behavior management system will include, but not be limited to, any of the following:
  1. No child shall be punched, shaken, pinched, bitten, roughly handled or struck by an inanimate object by staff members of the day treatment center.
  2. Authority to discipline shall not be delegated to other children.
  3. Separation when used as discipline shall be brief and appropriate to the child's age and circumstances, and the child shall be within hearing and visual observation of an adult in a safe, lighted, well-ventilated room. No child shall be secluded in a locked room or



closet.

4. No child shall be punished for toileting accidents.
  5. Verbal abuse or derogatory remarks about the child, his family, his race, religion or cultural background shall not be used or permitted.
  6. No child shall be force-fed.
  7. Meals may be provided individually, but deprivation of meals shall not be used as punishment.
  8. No child shall be subjected to physical harm or humiliation.
  9. Locked seclusion, including securing a door by a person or persons or any other physical means that for all intents and purposes has the same effect as locking a door.
- G. Disregard of any of the foregoing disciplinary rules or any disciplinary measure resulting in physical injury or abuse of any child shall be grounds for the denial, revocation, suspension, or making probationary of the license.

#### **7.706.17 Physical Restraint**

- A. Physical restraint is an age appropriate physical intervention by a trained staff member of a facility in an emergency situation to limit, restrict, or control the dangerous behavior of a child by means of physical holding of the child. Physical holding of a child is the only method of physical restraint allowed. The use of a mechanical restraint, including, but not limited to, the use of handcuffs, shackles, straight jackets, posey vests, ankle, wrist, and chest restraints is prohibited. A physical restraint is to be used only during periods of crisis or emergency for the child, when the child is displaying acute physical behavior and is thus a danger to him/herself and/or others, and when all other means to control and de-escalate the crisis or emergency have failed. The restraint shall not impede or inhibit the child's ability to breathe in any manner, including placing excess pressure on the chest or back area or on the child's mouth. The restraint shall last only as long as is necessary to calm the child, and for the child to show that he/she has regained control by giving verbal agreement to not be a threat to self or others.
- B. If a program chooses to use physical restraint with the children placed at the facility, the facility shall restrain children only in accordance with the following rules:
1. Prior to the use of restraint, the facility must have tried all positive and constructive methods of dealing with a child, including but not limited to, implementation of a structured and consistent behavior management system, physical structuring of the environment, talking with the child, praise for appropriate behavior, skill training and development, assisting a child with the expression of feelings, and de-escalation of the situation.
  2. Restraint may be used in an emergency situation only when positive, constructive, non-physical de-escalation and structuring of the environment have not been effective in controlling the child's behavior.
  3. Physical restraint must never be used as a punitive form of discipline, as a form of treatment or therapy, or as a threat to control or gain compliance of a child's behavior.
  4. A child must be released from a physical restraint within fifteen minutes after the initiation of the restraint, except when precluded for safety reasons.
- C. Each program choosing to use physical restraint to control a child whose behavior is out of control and

a danger to him/herself” or others must have a written physical restraint policy that is adopted and implemented by the program. The written policy must include at a minimum the following information:

1. Documentation of the type/philosophy/model of the behavior management system utilized by the program.
2. Documentation of the type/philosophy/model of the nationally recognized de-escalation and physical restraint techniques to be used including, but not limited to, Therapeutic Crisis Intervention, Crisis Prevention Intervention, or other training approved by state regulatory agencies.
3. Which staff members will be approved by the program to use physical restraint as an intervention with children in the program.
4. The type of nationally recognized training and/or certification staff members approved to use physical restraint techniques will be required to have prior to utilizing the intervention with a child.
5. The type and number of hours of ongoing training each staff member will be required to participate and display proficiency in regarding de-escalation and physical restraint techniques.
6. What preventive/de-escalation techniques and positive behavioral intervention must be attempted by staff prior to the use of physical restraint as an intervention with a child displaying acute physical behavior.
7. How the facility continually observes and evaluates the use of physical restraint as an intervention with the children in the program.
8. The type of written documentation the facility maintains of each physical restraint intervention that describes the details of the incident, the lower level interventions attempted and the staffs decision making process and involvement.
9. The type of written documentation the facility maintains that describes the debriefing with the child and staff following the restraint to address other options that may have been successful in de-escalating the child.
10. Evaluation by an objective, internal professional of the documentation of each physical restraint intervention to determine appropriateness and effectiveness of preventive/de-escalation techniques used and effectiveness and appropriateness of the restraint itself with individual clients.
11. The requirement that staff not restrain children in areas of the program that may pose a threat to the health and safety of the child including, but not limited to, soft, pliable surfaces, concrete, asphalt or areas including broken glass.
12. Notification of the parent/legal guardian and child in advance of the program's physical restraint policy and methodology.
13. Verbal notification to the parent/legal guardian of each use of physical restraint, no later than the end of the school day that the intervention occurred with a written report completed within 36 hours of the restraint and given to the parent/guardian.
14. How the program monitors the physical well-being of the child during and after the restraint,

including but not limited to breathing, pulse, color, and signs of choking or respiratory distress.

15. Emergency procedures, including first aid, that will be used if a child or staff member is seriously injured during a restraint.
16. The requirement of staff to report to the county department of human/social services or local law enforcement any injury, bruising, or death that occurs as a result of the restraint pursuant to Colorado state law.
17. The internal review process of the facility to assess carefully any injuries, bruising, or death.

D. All staff in the facility that will be involved in physical restraint must complete the following:

1. A nationally recognized 6 to 12-hour original de-escalation/restraint training program that includes a competency test as a part of the training program. Successful completion of the competency test is mandatory prior to any staff member being approved to use physical restraint as an intervention.
2. Periodic observation of each staff member performing a restraint by a supervisor of the facility who has been trained in restraint.
3. If a supervisor of the facility determines a staff member did not correctly perform a physical restraint, the staff member must be immediately retrained or be restricted from performing further restraints until retraining can occur.
4. Regular training at least every six months for each staff member involved in restraint to review and refresh skills involved in positive behavior intervention, de-escalation, and physical restraint.

E. Authorization for Physical Restraint

1. At the time of admission, the person or agency holding legal custody of the child shall be notified and must give written consent for the child to be restrained in conjunction with program policy. No child shall be restrained without the specific written permission of the person or agency holding legal custody of the child.
2. At the time of admission to the program, each child shall be told, in a language or communication understandable to him/her, of the purpose of restraint, the restraint model/method used and the type of acute physical behaviors which might result in the child being restrained for their own safety and the safety of others.

F. Each physical restraint incident shall be recorded. The following information must be included:

1. The name of the child, date and time of day, staff members involved, their position at the facility and their involvement in the physical restraint, and how long the restraint lasted.
2. The precipitating incident(s) and the child's behavior before the restraint occurred.
3. What specific actions were attempted and/or taken to de-escalate the situation and control, calm, or contain the child and the effect of these de-escalating actions upon the child.
4. A description of the restraint including the child's physical, emotional and behavioral condition during the restraint.

5. A description of the debriefing and evaluation with the child and with the staff.
6. The child's physical condition prior to and following the restraint.
7. The child's emotional/behavioral condition prior to and following the restraint.

G. Review of Use of Restraint:

1. Records of each physical restraint shall be reviewed by a supervisor of the facility within 48 hours of each restraint.
2. According to the policies and procedures of the facility, the entire child's plan must be reviewed if it appears that the child is being physically restrained an excessive number of times, frequently in a short period of time, or frequently by the same staff member.
3. If any particular de-escalation technique appears to be causing an escalation in the behavior of a child or a group of children, the use of the technique shall be evaluated for its effectiveness. De-escalation techniques that are not effective or are counter-productive must be terminated at the earliest opportunity.
4. If either the child or a staff member was seriously injured or died during a restraint, a thorough review of the restraint and injuries must be instituted immediately. Based on the findings of the review, the staff members involved in the restraint must be retrained or corrective personnel action must be taken.
5. If a staff member appears to be involved in a larger number of physical restraints than other staff members and is not a part of a specially trained team, or is unsuccessful at using de-escalation effectively, the facility must conduct a thorough review of the staff member's interactions with children, prior restraint training, and need for further training or corrective personnel action as required by program's policies.

**7.706.18 Records**

- A. A record of admission shall be completed for each child prior to, or at the time of, admission to the day treatment program and shall include:
1. Necessary identifying information including the child's name, address, telephone number, birth date, sex; name, address, telephone number of parent(s) or guardian(s); name and relationship of person with whom child is living, if different from parent(s) or guardian(s); address and telephone number at the location person(s) responsible for child can be reached when child is participating in the treatment program; name, address and telephone number of individual to contact in emergency if parent(s) or guardian(s) is unavailable; name, address and telephone number of referring agency and referring worker; physical description of the child, description of child's behavior and personal habits, health and immunization record; name and address of individual who may call for the child if the child is not to leave the center on his own; name, address and telephone number of child's physician or the clinic where medical care is obtained.
  2. A current medical statement, records of medication provided to the child and records of all injuries occurring while in care at the center.
  3. Written permissions as required at Section 7.706.15, A, 2, d.
  4. A case plan, a summary of the periodic evaluations of the child's progress and resultant changes in the case plan. The evaluation summary shall include the date and the

individuals who participated, as well as a description of the child's progress toward the objectives outlined in the case plan.

5. A summary of the discharge of the child from the center which includes at least the date of the discharge and reason for child's discharge from program.
- B. A daily attendance chart indicating the names of children who attended each session each day shall be maintained.
- C. Personnel record for each staff member which includes the following shall be maintained: name, address, telephone number, birth date, education and training, work experience, employment reference, statements of physician or nurse practitioner; names, addresses and telephone numbers of persons to be notified in event of an emergency; date of employment; copy of first aid card or equivalent and CPR training, and medication administration training, if appropriate.
- D. Administrative records which shall be on file at the center include: current health department inspection report, current fire department inspection report, a list of current staff members and substitutes, and a staffing pattern.

#### **7.706.19 Physical Requirements for a Safe and Adequate Center**

- A. The day treatment center shall declare to the Colorado Department of Human Services the address of each building which will be used by the day treatment center, the anticipated hours of use of the building by the day treatment center, and the type of use of each building by the day treatment center.
- B. The licensing representative shall inspect and approve the entire premises of each facility to be used or in use by the day treatment center, including, but not limited to, the building, the grounds surrounding the building, the basement or attic, if accessible, any other buildings on the grounds, such as garage, storage areas and carports.
- C. Each facility used by the day treatment center shall be equipped with adequate heat, light and ventilation for safe and comfortable occupancy.
- D. All heating units shall be installed and maintained with safety devices to prevent fire, explosions, and other hazards. No open-flame gas or oil stoves, hot plates or un-vented heaters shall be used or heating purposes.
- E. Closets, attics, basements, cellars, furnace rooms and exit routes shall be kept free from accumulation of extraneous material such as discarded furniture, furnishings, newspapers or magazines. Combustibles, such as cleaning rags, mops, cleaning compounds, shall be labeled and stored in well-ventilated areas. Storage of gasoline, kerosene, fuel oil and other flammable materials shall meet requirements of the safety and fire code.
- F. In each facility there shall be at least two approved, alternate, widely-separated means of egress from each floor of the building to safe and open space at the ground level.
- G. No lock or fastening to prevent free escape from the inside of the room or building used by children shall be permitted. Exit hardware shall be of the single-action type.
- H. Exit doors shall be obvious and marked by exit signs.
- I. The route to each exit shall be conspicuously indicated in such a manner that each occupant of a building or structure who is physically and mentally capable will readily know the direction of the escape from any point. Each path of escape shall be so arranged or marked in such a manner

that the way to a place of safety outside is unmistakable. Exitways and pathways to exitways shall be unobstructed at all times.

- J. Any accessible areas beneath stairways which will be used as exitways by children shall be enclosed with one-hour fire resistant material.
- K. In each building used by the treatment center, fire alarm facilities shall be provided to warn occupants of the existence of a fire so that they may escape, or to facilitate the orderly conduct of fire exit drills which shall be held on a regular basis.
- L. Responsibility for the planning and conduct of fire drills shall be assigned to a staff member qualified to exercise such leadership and shall be held with sufficient frequency to familiarize all occupants with the drill procedure and conduct of the drill.
- M. Each facility shall have a telephone, and near the telephone shall be located the numbers of an emergency medical facility, the local fire and police departments, and other emergency numbers including poison control, if available.
- N. When smoking within the facility is permitted, smoking areas shall be designated.
- O. If weapons are on the property of the facility, they shall be rendered totally inoperable and shall be locked up to prevent unauthorized use. Ammunition, projectiles such as arrows or other items which can be used to make the weapon operable, shall be; locked separately. Weapons shall not be transported in any vehicle in which children are riding unless the weapons are made inoperable and inaccessible.
- P. When a swimming pool is provided, it shall meet the requirements of the Colorado Department of Public Health and Environment or local unit. Safety precautions shall include protective fencing, nonskid surface of at least four feet adjoining pool sides, and winter coverage which shall exclude plastic or inflatable-type domes. A lifeguard, who holds an advanced life saving certificate, shall be in attendance at all times when the pool is in use.
- Q. The Colorado Department of Human Services will establish the number of children who may be served at any one time in the building(s) used by the day treatment center for school, recreation or therapy, established on the basis of one child per twenty square feet of space within the rooms which are to be used. Areas within the building which are to be used for bedroom, kitchen, office, hallways, or bathroom cannot be counted as space available for use by the children at the day treatment center.
- R. Within the buildings to be used by children in the day treatment program, there must be one toilet and one lavatory for every thirty children in attendance.
- S. Arrangement must be made for personal belongings of each child while in attendance at the center.

#### **7.707 RULES REGULATING FAMILY CHILD CARE HOMES**

All family child care homes must comply with the "General Rules for Child Care Facilities" as well as the "Rules Regulating Family Child Care Homes."

Rules in bold type apply only to infant/toddler homes or large homes as indicated The rules in bold type either replace other rules appearing in that section or are in addition to other rules in the section.

##### **7.707.1 POLICY OF THE COLORADO DEPARTMENT OF HUMAN SERVICES**

It is the policy of the Colorado Department of Human Services ("the Department" ) to promote and

encourage child care in environments that contribute to the safety, health, protection and well-being of children. To verify compliance with standards intended to ensure such an environment, the Department requires thorough and ongoing appraisals of child care facilities, persons working in the child care profession, and the nature of care provided.

## **7.707.2 DEFINITIONS**

The capacity for a family child care home (generally referred to within these rules as “the home” ) is determined by the amount of indoor and outdoor space designated to child care, as well as the following factors.

- A. A “family child care home” is a type of family care home that provides less than 24-hour care for 2 or more children on a regular basis in a place of residence. Children in care are from different family households and are not related to the caregiver.
1. Care may be provided for 6 children from birth to 13 years of age with no more than 2 children under 2 years of age. This does not prohibit the care of children ages 13 to 18.
  2. Care also may be provided for no more than 2 additional children of school age attending full-day school. School-age children are children enrolled in a kindergarten program a year before they enter the first grade and children 6 years of age and older
  3. Residents of the home under 12 years of age who are on the premises and all children on the premises for supervision are counted against the approved capacity, except where specifically indicated otherwise
  4. A family child care licensee may be approved to care for 3 children under 2 years of age with no more than 2 children under 12 months, including the caregiver's own children, under the following conditions.
    - a. The licensee has complied with all of the following requirements prior to approval of the license:
      - The licensee has held a full license to operate a family child care home for at least 2 years immediately prior to the issuance of the license that would authorize the care of 3 children under 2 years of age
      - The licensee has completed 40 clock hours of approved training, which includes the required hours of training and first aid obtained when originally licensed (see Section 7.707.42. C, for content).
      - The licensee has had no substantiated complaints about care provided to children in the home in the past 2 years.
    - b. No care of additional children of school age during non-school hours may be authorized.
    - c. Licensees issued a 3 children under 2 years of age license are approved for both the 3 under 2 and the regular license capacities and may switch between the 2 capacities without notifying the Department as long as they are in compliance with all licensing rules.
- B. An infant/toddler home is a type of family care home that provides less than 24-hour care only for children who are between birth and 3 years old.

1. The care giver may have no more than 1 child or foster child between 3 and 6 years of age.
2. If there is 1 caregiver, there may be a maximum of 4 children, with no more than 2 children under 12 months, including the caregiver's own children.
3. If there are 2 caregivers caring for children at all times when children are present, there may be a maximum of 6 children between birth and 3 years old, and no more than 3 of those children can be between birth and 1 year old, including the caregiver's own children.
4. An exception to Section 7.707.2, B, 2 and 3, can be made in the case of the care of twins, triplets, and other siblings close in age to each other so that they need not be separated, but the total number of children cannot exceed 4 in an infant/toddler home with 1 caregiver, and 6 in an infant/toddler home with 2 caregivers.

C. A large child care home is a family child care home that provides care for 7 to 12 children.

1. Child care may be provided to children from 24 months to 13 years of age. This does not prohibit the care of children ages 13 to 18.
2. Care may be provided to no more than 2 children under 2 whether or not older siblings are in care.

D. The Experienced Family Child Care Provider

This section establishes a new license type for Experienced Family Child Care Home Providers. The impact of this new license type will be evaluated over a 2- year period ending August 1, 2001. to determine if this license type should be continued beyond that date.

Providers who meet these specific requirements, as well as all other rules required of family child care home providers, may apply to become an "Experienced Family Child Care Home Provider" .

1. To be approved for the experienced provider license, the provider must
  - a. Have been a family child care home provider in Colorado for at least the last six (6) consecutive years;
  - b. Have completed 90 clock hours of training within the preceding six (6) years (excluding pre-licensing training); providers with a minimum of 65 hours of training within the preceding six years may be approved for the license if they complete the additional 25 hours of training within one year of the effective date of these rules: 40 hours of the 90 hours must be in infant/toddler training,
  - c. Have had no substantiated complaints in the preceding two (2) years for violations that could directly threaten the health or safety of children in care;
  - d. Have had no negative licensing action taken against the license in the preceding two (2) years.
  - e. Meet requirements of 35 square feet of inside space and 75 square feet of outside space per child;
  - f. Comply with local zoning restrictions
2. The following chart describes the various options available to the experienced family child care home provider. Providers are free to move from one option to another without notifying



the department, as long as they are in compliance with all licensing rules  
Experienced Child Care Provider License - All Options Include Provider's Own Children Under 10 years of Age  
12CCR2509\_8\_08302006\_table17.jpg  
Experienced Child Care Provider License - Options 5 and 6 Apply Only to Regular License Capacity (7.707.2, A), not the Experienced Provider Capacities  
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### 3. Applying for the Experienced Provider License

- a. At least 60 calendar days prior to the proposed date of operation as an experienced provider, the applicant must submit the following items to the state Department of Human Services a completed and signed experienced provider application form, which:
  - affirms compliance with all the rules for family child care home providers and experienced providers
  - a check or money order in the amount of \$25
  - a detailed emergency evacuation plan to accommodate the highest capacity of children in care
- b. A licensing evaluation will occur after the Department has reviewed the application.
- c. If applying at the time of continuation of a regular child care license, providers must submit the experienced provider application with their continuation documents and a check or money order for \$25 for the application fee. The \$16 continuation fee for the regular license need not be paid.

### 4. Continuing the Experienced Provider License

- a. Annually, prior to their continuation date, experienced providers must submit the following to the department:
  - a completed and signed continuation form
  - a completed compliance form affirming ongoing compliance with the rules for family child care home providers and experienced providers, including a list of training completed during the year to comply with annual training requirements found in this section
  - a \$16 continuation licensing fee
- b. At the time the continuation documents are submitted to the department, the experienced provider must complete a written self-evaluation on the forms prescribed by the department. The self-evaluation form must be maintained by the facility and be available for review upon request by the licensing specialist.
- c. Annually, the experienced provider must complete 12 clock hours of ongoing training, with a minimum of 6 of the hours in the area of child growth and development.
- d. The experienced provider must be able to satisfactorily demonstrate the emergency evacuation plan during any licensing visit.

## 5. Negative Licensing Action Taken Against the Experienced Provider License

- a. Negative licensing action may be taken against the experienced provider license for any of the following reasons:
  - substantiated complaints and licensing violations that could directly threaten the health or safety of children in care
  - character or suitability issues that could jeopardize the health of children or adversely affect the ability of the provider to care for children as defined in the 'General Rules for Child Care Facilities-
  - any violation for which a licensed child care facility could be subject to negative licensing action
- b. The provider would be allowed to reapply for the experienced provider license after 2 years from the date negative licensing action was taken if the provider has no substantiated complaints regarding violations that could directly threaten the health or safety of children in care.
- c. If an experienced provider application is denied, the home will continue with a regular license as long as all continuation requirements have been met.
- d. Should this section be eliminated from rule following a 2-year evaluation ending in 2001, all experienced provider licenses would revert to regular license status.

## 7.707.3 POLICIES AND PROCEDURES

### 7.707.31 Statement of Policies

A written statement of the home's policies must be available to parents and guardians, including such topics as: admission and registration of children, illnesses and administration of medication, holidays, payment of fees, discipline, emergency and security procedures, and meals and snacks.

### 7.707.32 Communication, Emergency, and Security Procedures

- A. The home must have a working unblocked telephone that has the capacity to receive all incoming calls. Telephone numbers of the following must be posted near the telephone: a 911 notice, where 911 is available, or rescue unit if 911 isn't available; a hospital or emergency medical clinic; the local fire, police, and health departments; Rocky Mountain Poison Control; and, the name and telephone number of the provider's substitute. Numbers for the parent(s) or guardian(s) of each child in care, plus alternative emergency numbers, including the number of the child's doctor, must be readily available.
- B. The home must release the child only to the adult(s) for whom written authorization has been given and is maintained in the child's record (see Section 7.707.91). In an emergency, the child may also be released to an adult for whom the child's parent or guardian has given verbal authorization. If the caregiver does not know the adult, identification must be required to assure that the adult is authorized to pick up the child.
- C. For security purposes and to document capacities, a daily sign-in/sign-out sheet must be maintained by all homes operated by an experienced family child care home provider (see Section 7.707.2, D). It must include, for each child in care, the date, the child's name, the time when the child arrived at and left the home, and the parent or guardians signature.

## **7.707.4 PERSONNEL**

### **7.707.41 Requirements for Personnel**

#### **A. General**

1. Caregivers must have demonstrated an interest in and knowledge of children and a concern for their proper care and well-being.
2. Children for whom the caregiver has custody and responsibility must not have been placed in foster care or residential care under circumstances tending to show that the caregiver or other resident of the home was abusive, neglectful, or a danger to the health, safety, or well-being of those children.
3. Licensees and caregivers must be at least 18 years of age.
4. All caregivers and all persons residing in the home must submit to the Department, on the form required by the Department, a health evaluation signed and dated by a licensed physician or other health professional.

Subsequent health evaluations for the caregivers and children residing in the home who are in care must be submitted every 2 years or as required in a written plan signed by a physician or other health professional.

If, in the opinion of a physician or mental health practitioner, a physical, medical, emotional, or psychological condition exists at any time that may jeopardize the health of children or adversely affect the ability of a licensee to care for children, a qualified substitute caregiver must be employed, or child care services must be suspended until the physician or mental health practitioner certifies that the health risk has been eliminated.

#### **B. Infant/Toddler Home**

1. For an infant/toddler home with 1 caregiver, that caregiver must be at least 21 years of age.  
  
For an infant/toddler home with 2 caregivers, 1 caregiver must be at least 21 years of age and the second must be at least 18 years of age.
2. Each caregiver must have parented a child through at least the first year of life or completed 1 year of supervised experience caring for children who are younger than 3 years old. Such experience may have been obtained as a licensed home caregiver, in a family foster home, child care center, or preschool. Each caregiver must be able to verify the required experience.

#### **C. Large Home**

1. The licensee must be the primary caregiver and must reside in the large child care home.
2. The primary caregiver at a large child care home must meet one of the following:
  - a. A minimum of 3 years of documented satisfactory experience in the group care of children or as a licensed home caregiver; or,
  - b. A minimum of 2 years of college education in an accredited college or university, with at least 1 college course in early childhood education, plus 1 year of documented

satisfactory experience in the group care of children; or,

- c. Current certification as a Child Development Associate (CDA) or other department-approved credential; or,
- d. Completion prior to licensing of 40 clock hours of training in child development, child care practices, appropriate discipline, child nutrition, health care practices; and,
  - A minimum of 2 years of experience as a licensed caregiver holding a permanent license immediately before becoming a licensee of a large child care home; or,
  - A minimum of 2 years of full-time experience in the group care of children who are under the age of 6.
- 3. If the home was previously licensed as a regular family child care home, there must have been no substantiated complaints about the care of children in the home in the past 2 years.
- 4. Staff aides must be at least 16 years of age and must meet requirements for first aid and CPR training and for a health evaluation (see Section 7.707.42, B, and 7.707.41, A, 4).
- 5. All caregivers must be at least 16 years of age and must work directly under the supervision of the primary caregiver in charge and responsible for the care of the children.

#### **7.707.42 Training**

(See also Section 7.707.41, C, 2, Large Home)

- A. Any person applying for a license to operate a family child care home must possess basic knowledge of child growth and development, early childhood care and education, child nutrition, appropriate discipline, child abuse recognition and reporting, operation of a family child care business, and safety and health care practices, including universal precautions. Prior to or within 3 months of the issuance of the license, the licensee and primary caregiver must complete a Department approved 12 clock hour course that includes six core Knowledge standards. Those individuals who are director qualified or have a 2 or 4-year degree in early childhood education are exempt from pre-licensing training, except for the 1-1/2 hours of universal precautions training.

Prior to or within 6 months of issuance of the license licensees and caregivers must complete a minimum of 1-1/2 hours of training in universal precautions. This 1-1/2 hours of universal precautions training can be included as part of the pre-licensing training, in which case the total number of hours required is 13-1/2. Universal precautions are safe work practices to prevent exposure to blood and body fluids. Documentation of this training must include hours of training and completion date. This training must be renewed every three (3) years. Renewal of universal precautions training can be part of the first-aid training.

Licensees requesting continuation of a permanent license to operate a home and all caregivers must complete an additional 9 clock hours of training each year. The additional training must be documented on the form designated by the department and submitted to the department every year. This training must relate to one or more of the following general areas—child growth and development, healthy and safe environment, developmentally appropriate practices, guidance, family relationships, cultural and individual diversity, and professionalism. The 9 clock hours of training do not include recertification in first aid and CPR.

- B. Prior to licensing, all caregivers, excluding staff aides, who are in regular and frequent contact with the children in care must have a current department-approved first aid and safety certificate that

includes CPR for all ages of children and have successfully completed the department-required medication administration course.

- C. All caregivers, excluding staff aides, who are in regular contact with the children in care must have current certification for the Department-required medication administration course.
- D. In an infant/toddler home, the licensee must have completed a department- approved course of training, a minimum of 40 clock hours which includes the following subject matter: growth and development of children from birth to 3 years; infant stimulation, nutrition, child guidance, first aid, and home safety; child abuse reporting; and child care practices for children birth to 3 years. This training need not have been taken for college credit.

#### **7.707.43 Required Supervision**

##### **A. General**

The caregiver must supervise and know the location and activity of all children while they are in care.

##### **B. Large Home**

1. The primary caregiver at a large child care home, or an individual who meets the requirements for a primary caregiver of a large home, must be at the home any time that child care is being provided.
2. The primary caregiver, or a substitute who meets all of the requirements for a primary caregiver, and a staff aide who is at least 16 years of age must be on duty at all times when 8 or more children are in attendance (see Section 7.707.41, C, 4).3.

The primary caregiver or the staff aide must provide direct supervision of each child at all times.

#### **7.707.44 Substitutes**

##### **A. General**

Arrangements must be made for a substitute who is at least 18 years old and is capable of providing care and supervision of children and handling emergencies in the absence of the caregiver.

1. Prior to caring for children at the home, the substitute must be given an opportunity to examine these rules and to become familiar with children in care and with the normal routines and practices of the home.
2. Substitutes who work at the home on a regular basis must comply with requirements for first aid and CPR training (Section 7.707.42, B) and a health evaluation (Section 7.707.41, A, 4) as well as a criminal record check and State Department's automated system check as outlined at Sections 7.701.33 and 7.701.32 (General Rules for Child Care Facilities).

##### **B. Infant/Toddler Home**

The substitute for the caregiver(s) must meet the same age requirements as the caregiver (see Section 7.707.41,B).

##### **C. Large Home**

1. Arrangements must be made for a substitute who meets the requirements for a primary caregiver of a large home to provide care and supervision of children in the absence of the primary caregiver.2.

An individual who meets all of the requirements for a staff aide must be available to substitute for the staff aide when necessary.

## **7.707.5 CHILD CARE SERVICES**

### **7.707.51 Admission Procedure**

- A. Admission procedures must be completed prior to the child's attendance at the home and must include:
  1. A pre-admission interview with the child's parent(s) or guardian(s) to determine whether the services offered by the home will meet the needs of the child and the parent(s) or guardian(s).
  2. Explanation of the home's policies, including a plan for payment of fees.
  3. Completion of the registration information required for inclusion in the child's record as required in Section 7.707.91.
- B. The admission of children must be in compliance with this non- discrimination provisions of Title VI of the Civil Rights Act of 1964 and the Americans with Disabilities Act (see General Rules for Child Care Facilities, Section 7.701.14), and a reasonable effort must be made to accommodate children with special needs and to integrate them with other children.

### **7.707.52 Health Care**

#### **A. Statements of Health Status**

1. The parent or guardian of each child admitted to the home must submit a statement of the child's current health status signed and dated by a licensed physician or other health professional who has seen the child within the last 12 months. The statement of health status must be obtained at the time of admission to the home or within 30 calendar days after admission. A new statement of health status must be submitted to the home annually for children under 7 years of age, and every 3 years for children 7 years of age and older as long as the children are in care.
2. The statement must be kept at the home and must include the following:
  - a. Information and instruction on care of each child who has a chronic or disabling condition, physical or emotional, such as seizures, asthma, diabetes, allergies, heart or respiratory illness, and drug reaction.
  - b. Information regarding immunizations the child has had and the dates administered. Immunizations must be recorded on the Certificate of Immunization supplied by the Colorado Department of Public Health and Environment. Colorado law requires that proof of immunization be provided prior to the first day of admission.
3. If the parent or legal guardian of a child wishes an exemption from the requirement for immunizations due to religious or personal beliefs, the child's parent or legal guardian, must complete and sign the current Colorado Department of Public Health and Environment immunization card which states the reason for such an exemption. The

home has the right to refuse to admit any child if a completed current immunization card is not submitted.

## B. Emergency Procedures

1. At the time of admission, the caregiver must obtain telephone numbers of the child's physician and numbers where the parent or guardian and at least one (1) other responsible adult can typically be reached in the event of accident, illness, or other emergency.
2. The caregiver must obtain written authority to arrange for medical care in the event of an emergency.
3. In the event of injury or illness, the affected child must be separated in the room or area provided for such purpose and made as comfortable as possible. First aid care must be provided as required. If additional care, medical attention, or removal from the home is indicated, the child's parent or guardian must be contacted by telephone, if possible, and medical assistance obtained without undue delay, consistent with Section 7.707.92, A.

## C. Medication

### 1. Definitions

- a. "Current written order" means not to exceed 12 months for children two (2) years of age and older, and not to exceed 3 to 6 months for children under 2 years; of age depending on the age and weight of the child based on the physician's decision.
  - b. "Routine medications" means any prescribed oral, topical, or inhaled medication, or unit dose epinephrine, that is administered pursuant to Section 26-6-11 9, C.R.S.
2. Any routine medication, prescription or non-prescription (over-the-counter) may be administered by the caregiver only with a current written order of a physician and with written parental consent
- a. If the routine medication involves; the administration of unit dose epinephrine, the administration must be accompanied by a written protocol by the prescribing health care professional that identifies the factors for determining the need for the administration of the medication, and is limited to emergency situations;
  - b. If the routine medication involves the administration of a nebulized inhaled medication, the administration must be accompanied by a written protocol by the prescribing health care professional that identifies the factors for determining the need for the administration Of the medication;
  - c. Topical preparations including, but not limited to, petroleum jelly, diaper rash ointments, sunscreen, and bug sprays can be administered solely with written parent authorization; no written order by a physician is required as long as the preparations are not applied to open wounds or broken skin.
3. The caregiver can accept such medicines only in the original container. Prescription medicine containers must bear the original pharmacy label that shows the prescription number, name of medication, date filled, physician's name, child's name, and directions fir dosage. When no longer needed, medications must be returned to the parent or guardian or destroyed.
4. Nonprescription medication must be labeled with the child's first and last name. Caregivers

can administer medication only to the child whose name appears on the written order from the physician.

5. All caregivers who administer medication must have daily face-to-face verbal contact with parents of children needing medication and must be currently trained through the Department-approved medication administration course and must administer medication in compliance with the concepts taught in the course.
6. Medication must be stored in a locked cabinet or cupboard so that it is inaccessible to children. If refrigeration is required, it must be stored in a leak-proof container in a designated area of the refrigerator separated from food.
6. A written medication log must be kept for each child. This log is a part of the child's record. The log must contain the child's name, name of the medication, dosage and route, time medication is to be given, special instructions, name and initials of the individual giving the medication, notation if the medication was not given, and the reason.

#### D. Control of Communicable Illness

1. Any resident or caregiver who has a contagious illness must be excluded from contact with children in care.
2. When a child in care has been diagnosed with a communicable illness, including hepatitis, measles, mumps, meningitis, diphtheria, rubella, salmonella, giardia, tuberculosis, and shigella, the caregiver must immediately notify the parents or guardians of all children in care and report to the local county department of health or the Colorado Department of Public Health and Environment. A diagnosed child must be excluded from the home for the period of time prescribed by the child's physician or by the local health department.

### **7.707.53 Personal Hygiene**

#### A. Washing

1. Children's hands must be washed with soap under warm water before meals and snacks and after toileting.
2. Children's hands and faces must be dried with individual paper or cloth towels. Towels and drinking cups must not be shared.
3. When a child is bathed, bath water must be at a safe and comfortable temperature. Children under 5 years of age must not be left unattended while being bathed.
4. When at the home and whenever possible on field trips, at a park or at another location away from the home, all caregivers must wash their hands thoroughly with soap and under warm running water after helping a child with toileting, after their own toileting, after wiping a child's nose, before preparing or serving food, and before administering medication.

#### B. Diapering

1. The home must have a designated diaper change area for all children in need of diaper changing. The diaper change area must
  - a. Have a smooth, durable, nonabsorbent, and easily cleanable surface



- b. Be large enough to accommodate the size of the child
  - c. Be separate from the food preparation area
  - d. Have a place inaccessible to children for storing all diaper change supplies and disinfecting solutions and products.
2. The following procedure must be followed each time a diaper is changed:
- a. The child must be placed on a clean, sanitized, dry changing table or mat.
  - b. Soiled/wet diapers and clothing must be replaced with clean diapers and clothing whenever necessary.
  - c. Children's hands must be cleaned after diapering
  - d. Caregivers must clean and sanitize the diaper change area after diapering.
  - e. Caregivers must wash their hands with soap and warm running water and dry their hands with individual paper or cloth towels after diapering each child.

#### **7.707.54 Physical Care**

- A. Throughout the day, each child must have frequent, individual personal contact and attention from an adult, such as being held, rocked taken on walks inside and outside the home, talked to, and sung to
- B. Children must not be confined to cribs or playpens for prolonged periods of time They must have an opportunity each day for freedom of movement, such as creeping, crawling, or walking in a safe, clean open, uncluttered area
- C. Infants in care who are unable to hold a bottle must be held during bottle feedings.
- D. Infants must be held frequently while in care.
- E. Infants must be provided an environment designed to stimulate their senses
- F. Children leaving the family child care home for school or other activities must be dressed appropriately for the weather.
- G. A child's wet or soiled clothing must be changed promptly and a sufficient supply of clean clothing must be available for this purpose.
- H. Caregivers must investigate whenever children cry.
- I. Toilet training can be carried out only after consultation with the child's parents and then only in a non-disciplinary manner. If potty chairs are used, they must be emptied and disinfected after each use
- J. The home must provide a rest period for all preschool-age children remaining in the home longer than 4 hours. A rest period and rest equipment must also be provided for older children who require a rest time
- K. All preschool-age children must be given the opportunity to lie down for a period of time. Children must not be forced to sleep. Children who do not sleep after a reasonable period of time must be provided with appropriate quiet toys and equipment to play with, such as puzzles or books

- L. For rest periods, the home must provide for each preschool-age child, and for older children as required, a bed, sofa, cot, or suitable mat not less than 2 inches thick with a clean, washable cover. Children must be provided with a suitable warm cover as needed.
- M. For each child under 12 months, daily rest periods in a crib or a playpen with a firm pad and a clean, washable cover must be provided. Soft bedding materials that could pose a suffocation hazard are not permitted in cribs or playpens.
- N. Cribs and playpens must meet federal Consumer Product Safety Commission standards. Space between crib slats must be no wider than 2-3/8 inches. Refer to Section 7.701.26, C, for information on how to obtain the standards.
- O. Children must be allowed to form and observe their own pattern of sleep and waking periods. Provision must be made so that children requiring a nap time have a separate area for their nap apart from space used for play.
- P. Infant monitors may be used in separate sleeping rooms for infants under the following conditions:
  - 1. The sound monitoring equipment is able to pick up the sounds of all sleeping infants. Additional equipment must be provided as necessary to provide adequate coverage.
  - 2. The receiver of the sound monitoring equipment is actively monitored by the caregiver at all times.
  - 3. Sleeping infants are periodically physically monitored and checked by the caregiver.
  - 4. Sound monitoring equipment is regularly checked to assure it is working correctly.

#### **7.707.55 Food and Nutrition**

- A. A nutritious snack or meal must be available during the midmorning and mid-afternoon hours. A noon meal must also be provided and must meet at least one-third of the child's daily nutritional needs. Children in care at these times must be provided with the appropriate snack or meal. Arrangements must be made for feeding children who are in care before 6 a.m. or after 6 p.m.
- B. Food must be wholesome and nutritious and stored in a safe and sanitary manner. Each day, meals and snacks must be nutritionally balanced and must include food from the basic food groups in adequate quantity.
- C. Children must not be given foods that are contrary to the religious beliefs of their families or that are known to cause an allergic reaction or a health hazard. Only pasteurized milk should be served.
- D. Bottles of formula or breast milk must never be warmed in a microwave oven. Infant formula and breast milk cannot be reused. If a child does not finish the bottle or formula or breast milk, the contents must be thrown out.

#### **7.707.56 Discipline**

- A. Discipline must be appropriate and constructive or educational in nature and may include such measures as diversion, separation of the child from problem situations, talking with the child about the situation, praise for appropriate behavior, and gentle physical restraint, such as holding.
- B. Children must not be subjected to physical or emotional harm or humiliation. The caregiver must not use, or permit anyone else to use, corporal or other harsh punishment, including but not limited to pinching, shaking, spanking, punching, biting, kicking, rough handling, hair pulling, or any

humiliating or frightening method of discipline.

- C. Discipline must not be associated with food, rest or toileting. Children must not be punished for toileting accidents. Food may not be denied to or forced upon children as a disciplinary measure.
- D. Meals and snacks can be temporarily postponed or provided individually, but deprivation of meals and snacks must not be used as punishment.
- E. Separation, when used as discipline, must be brief and appropriate for the child's age and circumstances. The child must be in a safe, lighted, well-ventilated room within hearing and vision of an adult. Children must never be isolated in a locked room or closet.
- F. Verbal abuse and derogatory remarks about the child are prohibited.
- G. Authority to discipline must not be delegated to other children, and the home must not sanction one child punishing another child.
- H. At the time of admission, the caregiver will discuss with the parent or guardian the home's techniques and standards of discipline

#### **7.707.57 Overnight Care**

- A. Regular overnight care (care that extends through a large portion of the night) of children is permitted only when licensed to do so
- B. All children in care must be provided with a comfortable cot, crib, bed, or couch suitable for the child's age. 2 sheets, and a suitable warm covering At least 40 square feet of floor space must be available for each Bed. Beds arranged in parallel must be at least 2 feet apart.
- C. Sheets must be changed weekly, between use by different children, or more frequently if needed, and no child should be allowed to sleep in a wet bed
- D. Each child must be provided with comfortable sleep wear, and a complete set of clean sleep wear must be available in the event that a change is necessary
- E. If the caregiver goes to sleep, it must be on the same floor where children under 8 years of age are sleeping.
- F. If children in care over the age of 4 share sleeping rooms with persons who are over age 4, the home must have approval from the parent(s) or guardian(s) of each child involved.

#### **7.707.58 Transportation**

- A. Any child who is less than 4 years old and less than 40 pounds and is transported by vehicle by the licensee must be properly fastened into a child restraint system that conforms to Section 42-4-236, C R S AH other children must use individual seat belts.
- B. When any vehicle is used by the home to transport children in care, the following requirements must be met.
  - 1. Two or more children must never be restrained in 1 seat belt
  - 2. Lap belts must be secured low and tight across the upper thighs and under the belly.
  - 3. Children must be instructed and encouraged to keep the seat pelt properly fastened and

adjusted.

4. The vehicle must be enclosed and have door locks
  5. The seats of the vehicle must be constructed and installed according to the manufacturer's specifications.
  6. The vehicle must be kept in satisfactory condition to assure the safety of occupants. Vehicle tires, brakes, and lights must meet safety standards set by the Colorado Department of Revenue. Motor Vehicle Division
  7. Seating must be comfortable with a seat of at least 10 inches wide for each child.
  8. The vehicle must safely accommodate the total number of children being transported.
- C. The home must require written permission from the parent or guardian for transportation of the child
- D. Transportation arrangements for school-age children must, be by agreement between the home and the child's parents (e.g., whether the child can walk, ride a bicycle, or travel in a car). The home must exercise reasonable precaution to see that the children arrive at the home from school when expected and must follow up on their whereabouts if late. Written permission from a parent or guardian for the child to attend community functions after school hours must include agreements regarding transportation.
- E. Children must not be left unattended in the vehicle.
- F. Children must be loaded and unloaded out of the path of moving vehicles.
- G. If the child care home provides transportation to and from care, the caregiver must monitor the child between the vehicle and the child's home or another home authorized by the child's parent or guardian until the child is safely in the care of another adult.
- H. If transportation is provided between the home and school for school-age children, the required adult-to-child ratio must be maintained for children remaining at the home.
- I. At a large home, there must be at least 1 adult supervisor, in addition to the driver, for 7 to 12 children using the vehicle.
- J. At a large home, at least 1 adult in the vehicle transporting children must have a current Department-approved first aid and safety certificate that includes CPR for all ages of children. A first aid kit must be available in the vehicle.

#### **7.707.6 ACTIVITIES**

- A. Each child in care must be provided with an opportunity for both group and individual play.
- B. Children must be encouraged to relate or to communicate with each other and with adults.
- C. Outdoor activity must be available to all children daily, weather permitting
- D. Outdoor play at the home is allowed only in the fenced yard or under the direct supervision of the caregiver.
- E. Television viewing, including videos, should not be permitted without the approval of a child's parents, who must be advised of the types of programs the children will be permitted to see.

## **7.707.7 EQUIPMENT AND MATERIALS**

### **A. General**

1. Well-maintained materials and equipment must be sufficiently varied and appropriate for the ages and number of children in care.
2. Materials and equipment must be available for both active and quiet play and both indoor and outdoor play, including, at a minimum, items in these categories: art, blocks, books, manipulatives, and large muscle equipment.
3. The home must have enough materials and equipment that at any one time each child in care can be individually involved.
4. Toys and toy parts accessible to children under 3 years of age must be large enough that they cannot be swallowed or inhaled
5. Children must wear helmets when riding a scooter, bicycle, skateboard, or rollerblades.
6. By January 1, 2003, all pieces of permanently installed playground climbing equipment must be surrounded by at least 4 inches of a resilient surface or by rubber mats manufactured for such use consistent with the guidelines of the Consumer Product Safety Commission. Refer to Section 7.701.26, C, for information on how to obtain the guidelines
7. Sand used as a resilient surface must be raked regularly to retain its resiliency and to retain a depth of 4 inches.
8. The use of any materials under permanently installed playground equipment other than wood chips, wood mulch, engineered wood fiber pea gravel, synthetic pea gravel, shredded rubber tires, and fine loose sand must be approved by the Department.

### **B. Large Home**

1. The home must provide equipment that is sturdy, safe, clean, free from hazards, and, when appropriate, accessible to children. A variety of equipment from the following categories must be available.
  - a. art supplies
  - b. blocks and accessories
  - c. books
  - d. dramatic play area
  - e. large Muscle equipment
  - f. manipulative toys
  - g. musical equipment
  - h. science materials

## **7.707.8 BUILDING AND FACILITIES**

### **7.707.81 Facility Requirements**

- A. The entire premises are subject to inspection for licensing purposes, including but not limited to the residence where care is to be provided, the grounds surrounding the residence, the basement, the attic (if accessible), the storage shed, and the garage or carport.
- B. At least 75 square feet of outdoor play space must be available for each child
- C. One room or area in the home that contains a bed, cot or sofa must be designated a sick room where a child can be separated from other children and cared for in the event of injury or illness. A crib or playpen with a pad must be provided for children under 12 months of age. A clean, washable sheet and blanket must be provided for each child
- D. At least 35 square feet of indoor space where children can play and be cared for exclusive of halls and baths, must be provided for each child.
- E. All floors must have carpets, tile, or a smooth finish that can be cleaned easily
- F. Interior walls must be free of holes and constructed of solid material with a smooth finish that can be cleaned easily.
- G. An adequate number of high chairs and other suitable equipment that meets federal Consumer Product Safety Commission standards must be provided to feed children under 2 years of age. Refer to Section 7.701.26, C, for information on how to obtain the standards.
- H. A business of a nature that might be hazardous to the health, safety, or well-being of children cannot be operated on the premises of the home.
- I. The large home must provide sufficient space in the specific room(s) designated for use for child care. Space used by household furniture cannot be used to meet this requirement.
- J. Window blind cords must be secured out of children's reach to prevent strangulation.

### **7.707.82 Fire and Other Safety Requirements**

- A. The family child care home and outdoor play area must be kept safe and free from hazards to health.

#### **1. Indoor Requirements**

- a. Heating devices such as radiators, registers, fireplaces, furnaces, wood-burning stoves, hot water heaters, and steam and hot water pipes accessible to children must be screened or otherwise protected. The screen or other protection must be made of a non-flammable material and must prevent children from coming into contact with the heating device. Nothing flammable or combustible can be stored within 3 feet of a furnace or hot water heater.
- b. All heating units, gas or electric, must be installed and maintained with safety devices to prevent fire, explosions, and other hazards. No open-flame gas or oil stoves, unscreened fireplaces, hot plates, or unvented heaters can be used
- c. The home must be equipped with adequate light, heat, ventilation, and plumbing for safe and comfortable occupancy. The heating facility must be capable of maintaining a draft-free temperature of 68 degrees F. at floor level in all rooms used for child care.

- d. All hazardous items and materials must be inaccessible to children, including matches, plastic bags, cleaning and laundry materials, medicines, perfumes, curling irons, scissors and knives, cosmetics, shaving lotions, hair products, and poisonous plants. Paints, fuels, insecticides, and other hazardous chemicals and products must be stored in a locked area remote from kitchens and hot water heaters and heating units.
- e. Any weapons such as firearms, air rifles, bows, hunting knives and hunting sling shots must be unstrung/unloaded at all times when children are in the home and must be locked and inaccessible to children. Trigger locks are acceptable. Antique and other guns used for decoration must be inoperable and have the firing pin removed. An unstrung Bow need not be stored in a locked container. Ammunition and arrows must be stored in separate locked containers. Weapons must not be transported in any vehicle in which children are riding unless the weapons are made inoperable and inaccessible.
- f. Water from any source other than a regular municipal water supply must be tested annually and be in compliance with water quality requirements of the Colorado Department of Public Health and Environment.
- g. In rooms used for child care, all electrical outlets that are accessible to children must have protective covers, or safety outlets must be installed: and all exposed light bulbs must have protective covers.
- h. All stairways must be free from hazards, and those with more than four steps must be equipped with banisters or handrails within reach of children. The slats on all railings must be no wider than five inches apart.
- i. All garbage, refuse, and other wastes must be stored in a manner that is inaccessible to children and disposed of in a manner that does not constitute a health hazard or nuisance.
- j. All rooms must be kept in a clean and sanitary condition and be free of any evidence of vermin or rodent infestation.
- k. Dishes, cookware, and utensils must be washed, rinsed, and stored in a safe and sanitary manner.
- l. First aid supplies must be maintained and stored in an area inaccessible to children.
- m. Mobile homes used as family child care homes must have at least 2 exits, be skirted, and properly installed and stabilized.
- n. Any animal that poses a potential threat to a child's safety or health must be confined in a place away from the child care area. Dogs and cats must be vaccinated against rabies as required by state law and local ordinance. Children must not be permitted to mistreat animals.
- o. Children's use of walkers with wheels is prohibited in homes that have stairs.

## 2. Outdoor Requirements

- a. Outdoor play space, including areas under decks must be free from safety hazards such as lawn mowers, tools, propane, natural gas lines, gasoline, building scraps, and scrap metal. This area must be enclosed by a fence or contain a

natural Barrier at least 42 inches high if care is given for children between 12 months and 5 years old Outdoor play space is not required if care is given only for children who are 12 months or younger.

- b. All play equipment must be designed to guard against entrapment and strangulation. Swing sets and other large outdoor play equipment must be correctly assembled, well maintained, and securely stabilized or anchored . All swings for children 3 and older purchased after July 1, 1999, must have seats made of flexible material.
- c. In outdoor play areas, window wells accessible to children must have covers that are in good condition and that safely and adequately protect children from falling into the window well.
- d. All walkways must be cleared of snow and ice at least once a day.
- e. There must be a protective fence around any permanent wading or swimming pool, even an above-ground pool located on the property of the home Children in care are permitted to use the pool only in the presence of an adult who holds a current American Red Cross basic lifeguarding certificate or equivalent and is responsible for providing lifesaving protection for the children. Children playing in or near standing water, including fountains, buckets, and horse troughs, must be directly supervised at all times.
- f. All hot tubs must have bolted and securely locked covers.
- g. The use of a trampoline by children in care is prohibited. If there is a trampoline on the property of the home, it must be stored in a way that makes it totally inaccessible to children
- h. Decks that are more than 12 inches high must have a protective railing or other barrier with slats no wider than 5 inches apart

## B. Fire Safety Requirements

1. Fire hazards, such as defective electrical or gas appliances and electric cords, dangerous or defective heating or cooking equipment, exposed wiring and flammable material stored in such a manner as to create a risk of fire must be corrected or eliminated.
2. A smoke detector in working condition must be installed on each level of the home where child care occurs.

## 2. Outdoor Requirements

- a. Outdoor play space, including areas under decks, must be free from safety hazards such as lawn mowers, tools, propane, natural gas lines, gasoline, building scraps, and scrap metal. This area must be enclosed by a fence or contain a natural barrier at least 4 feet high if care is given for children between 12 months and 5 years old. Outdoor play space is not required if care is given only for children who are 12 months or younger.
- b. All play equipment must be designed to guard against entrapment and strangulation. Swing sets and other large outdoor play equipment must be correctly assembled, well maintained, and securely stabilized or anchored. All swings for children 3 and older purchased after July 1, 1999, must have seats made of flexible



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- f. All hot tubs must have bolted and securely locked covers.
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- h. Decks that are more than 12 inches high must have a protective railing or other barrier with slats no wider than 5 inches apart.

#### B. Fire Safety Requirements

1. Fire hazards, such as defective electrical or gas appliances and electric cords, dangerous or defective heating or cooking equipment, exposed wiring, and flammable material stored in such a manner as to create a risk of fire must be corrected or eliminated.
2. A smoke detector in working condition must be installed on each level of the home where child care occurs.
3. Flammable material must not be stored near a furnace, hot water heater, or other heating device.
4. A written emergency evacuation plan for quickly and safely evacuating all children from the home must be posted in clear view at the home. Emergency evacuation drills must be held at unexpected times and under varying conditions to simulate the conditions of an actual fire, and often enough that all occupants are familiar with the procedure.
5. Smoking is prohibited during business hours in all areas where child care is provided and when transporting children.
6. The home must contain at least one U.L.-approved fire extinguisher, highly visible, easily accessible, and in working condition, weighing not less than 5 pounds, that has a rating of 2A 10 BC.
7. Although exterior doors can be locked, they must be maintained so as to permit easy exit; interior doors must be designed to prevent children from becoming trapped.
8. No locks or fastening devices can be used that would prevent emergency evacuation.
9. A basement to be used for child care must be equipped with more than one exit; the second

exit may be a window large enough for the caregiver, substitute, and all children to escape, with window access \* permanently secured and in place.

10. Windows having a lower sill height of 30 inches or less satisfy the requirement for permanent window access.

## **7.707.9 RECORDS AND REPORTS**

### **7.707.91 Children's Records**

- A. An admission record must be completed for each child prior to or at the time of the child's admission and updated annually, unless otherwise specified in these rules. The admission record must include:
  1. The child's full name, date of birth, current address, and date of enrollment.
  2. Names and home and employment addresses and telephone numbers of parents or guardians.
  3. Names and telephone numbers of persons other than parents or guardians who are authorized to take the child from the family child care home.
  4. Names, addresses, and telephone numbers of persons who can assume responsibility for the child in the event of an emergency if the parents or guardians cannot be reached immediately.
  5. Names, addresses, and telephone numbers of the child's physician, dentist, hospital of choice, and insurance information, if applicable.
  6. Health information including immunization history.
  7. A dated, written authorization for emergency medical care signed and submitted annually by the parent or guardian. The authorization must be notarized if required by local health care facility.
  8. A written record of any serious accident, illness, or injury occurring during care must be retained in each child's record, with a copy provided to the parent or guardian.
  9. Written authorization from a parent or guardian regarding participation in field trips (if applicable).
- B. All forms contained in the admission record must be current and accessible to caregivers and to representatives of the Department.
- C. The complete file for each child in care must be retained by the home for at least 3 years after the child leaves the home. It must be available without restriction to the licensing agency and to the child's parents or guardian.
- D. Except for the licensing authority and the child's parents or guardians, children's reports and records and facts learned about children and their families must be kept confidential.

### **7.707.92 Administrative Records and Reports**

- A. Licensees must report in writing to the Department any accident or injury occurring at the family child care home that resulted in medical treatment by a physician or other health care professional,

hospitalization, or death. This report must be submitted within 48 hours of the occurrence. Licensees must also call the Department immediately to give notice of a death.

- B. Licensees must report to the local department of health or the Colorado Department of Public Health and Environment whenever there is evidence that a child, a caregiver, or any resident of the family child care home has been exposed to a communicable illness, including but not limited to measles, mumps, diphtheria, rubella, tuberculosis, shigella, hepatitis, meningitis, salmonella, and giardia.
- C. A report about a fatality must include:
  - 1. The child's name, birth date, address, and telephone number.
  - 2. The names of the child's parents or guardians and their address and telephone number if different from that of the child.
  - 3. Date of the fatality.
  - 4. Brief description of the incident or illness leading to the fatality.
  - 5. Names and addresses of witnesses or persons who were with the child at the time of death.
  - 6. Name and address of police department or authority to whom the report was made.
- D. The home must submit to the department within 48 hours a written report about any child who has been lost from the home and for whom the local authorities have been contacted. Such report must indicate:
  - 1. The name, birth date, address, and telephone number of the child
  - 2. The names of the parents or guardians and their address and telephone number if different from those of the child.
  - 3. The date when the child was lost.
  - 4. The location, time, and circumstances when the child was last seen
  - 5. Actions taken to locate the child.
  - 6. The name of the caregiver supervising the child.
- E. The home must have a written plan for action in case of natural disaster, including, but not limited to, floods, tornadoes, and severe weather if typical in the locality of the home. The plan must include at least:
  - 1. Prompt notification of parents or guardians.
  - 2. When local authorities are notified.
  - 3. Emergency transportation.
  - 4. Specific procedures for responding to the crisis.

## **7.708 RULES REGULATING FAMILY FOSTER CARE HOMES**

All family foster care homes must comply with the "Rules Regulating Family Foster Care Homes" and the "General Rules for Child Care Facilities".

#### **7.708.1 TYPES OF FAMILY FOSTER CARE HOMES**

- A. "Family foster care homes" are defined at Section 26-6-102, C.R.S., as a foster care home in which foster children are received for regular twenty-four hour care.
- B. "Family foster care homes" are also defined in the this manual at Section 7.701.21 as follows: A family foster care home is a facility providing care and training for a foster child or children not related to the caretaker for regular twenty-four hour care, or a certified kinship care home. The number and age of foster children for which a license may be issued is determined by the following factors:
1. No foster child shall be placed in a foster home if that placement will result in more than four foster children in that home, or a total of eight children (foster and non-foster), or more than two children under two years of age, except in those instances in which the placement of a sibling group in a foster home would exceed the limits. If the placement of a sibling group results in exceeding the above limits, no other foster children can be placed in the home.
  2. A family foster care home may serve a maximum of one foster child enrolled in Children's Habilitation Residential Program (CHRP) and 2 other foster children or 2 foster children enrolled in CHRP and no other foster children. Emergency placements will not exceed maximum established limits. Facilities that exceed established capacity at the time the rule takes effect will be grandfathered in; however, with attrition, capacity must comply with the rule.
- Family Foster Care Home (County Or CPA) Maximum Capacity  
12CCR2509\_8\_08302006\_table19'County Or CP.jpg
3. Family foster care providers who are serving foster children enrolled in the Children's Habilitation Residential Program (CHRP) waiver shall be in compliance with rules contained within the Department of Health Care Policy and Financing's Medical Assistance Manual at Section 8.508 (10 CCR 2505-10).
  4. Family foster care may be provided to children from birth to 18 years of age and to those persons to 21 years of age who are placed by court order prior to their eighteenth birthday.
  5. When a certified family foster care home only provides temporary emergency care for foster children, the home may be certified for up to six foster children with no more than two foster children, including the caretaker's own children, under two years of age. There can be no more than a total of six foster children in the home except in sibling placements. The number of additional foster children under six years of age to be cared for shall be specified on the certificate and in the home study. Such a family foster care home shall be designated as a receiving home. The designation shall appear on the certificate.
    - a. No foster child shall remain in that family foster care home at the receiving home rate longer than 90 consecutive days, in accordance with the requirements of Section 7.417.4.
    - b. The number of foster children to be cared for at the receiving home rate and any foster children to be cared for at the regular foster home rate shall be included on the certificate.

- c. Each receiving home parent shall have two years experience as a foster parent, although the certifying agency may take into account other relevant education and experience.
  - d. Each receiving home parent shall complete 32 hours of on-going training every year as identified in his/her training development plan. This training shall include the following competencies.
    - 1) Issues regarding emergency and crisis placement of children with unknown histories; and,
    - 2) Dynamics of victimization issues, with emphasis on appropriate age and developmental levels; and,
    - 3) Cultural, spiritual, and religious awareness, consideration for, sensitivity to, and tolerance of each child individually.
  - e. Because receiving homes are likely to have quick turn-over of the children in care, supervision and monitoring of the receiving home shall be carried out according to the following:
    - 1) One face-to-face contact shall be made with the receiving home parent(s) at least every week when children are in placement in the home, with a minimum of two visits per month occurring in the receiving home.
    - 2) Documentation of such contact shall be in the provider file, as well as in each file of all foster children in the home.
    - 3) The purpose of the contact is to address any questions the receiving home parent has about the children in care, to observe child care when appropriate and to provide support to the receiving home parent.
  - f. A receiving home shall have a comprehensive annual evaluation, which includes a review of any critical incidents, any allegations of institutional abuse, and the skills, needs, and competencies of the receiving home parent(s).
6. A family foster care home may not be operated without a license or a certificate as required by law and Section 7.701.4 of these rules, and the number of foster children cared for in such facility may not exceed the number authorized by such license or certificate.
- C. "Child specific foster care" is care where the foster child has a prior relationship to the foster parent(s).
- D. "Kinship foster care" is the full time nurturing and protection of foster children by kin. Kin are relatives or persons ascribed by the family as having a family-like relationship. These relationships take into account cultural values and continuity of significant relationships. Certified kinship care is considered a form of out-of-home placement and a type of family foster care home.
- E. "Whole family placement" , also known as "shared family care" , is a situation in which adult parent(s) and foster child(ren) are placed together in the home of a family trained to mentor and support the biological parents as they develop skills and supports necessary to care for their foster child(ren) and move toward living independently.

#### **7.708.11 Definitions**

- A. "Certifying authority" means licensed child placement agencies and county departments of social/human services that have the authority to certify family foster care homes, including kinship care homes.
- B. "County designee" is the representative of a county department designated by the county executive director to make certain key decisions regarding foster children.
- C. "Dangerous behavior" is behavior that poses a clear and present safety hazard to a foster child or to others.
- D. "De-escalation" is the use of therapeutic interventions with a foster child during the escalation phase of a crisis. The interventions are designed to allow foster children to contain their own behavior so that acute physical behavior does not develop which would lead to the need for use of a physical restraint.
- E. An "emergency situation" is one in which a foster child is in actual danger to him/herself or others, or when there is a present danger of extensive property damage.
- F. "Escalation" is an increase in intensity of a foster child's out-of control behavior.
- G. The "Family Service Plan" is a case services plan completed by a county caseworker jointly with the foster child, parents, and foster parents within 60 calendar days of placement for each foster child receiving services from a county department of social/human services.
- H. "Mechanical restraint" means the use of devices intended to involuntarily restrict the movement or normal functioning of a portion of an individual's body. Mechanical restraint does not include the use of protective devices used for the purpose of providing physical support or prevention or accidental injury.
- I. "Physical restraint" is the physical intervention by a foster parent(s) in an emergency situation to limit, restrict, or control the dangerous behavior of a foster child by means of physical holding of the foster child. Physical restraint does not include the holding of a foster child for less than five minutes for protection of the foster child.
- J. "Reasonable" , as used in these rules, means appropriate and suitable, not excessive or extreme.
- K. "Religion" , where used in these rules, includes traditional religious beliefs and spiritual beliefs such as those of Native Americans.
- L. "Therapeutic services" means a program of foster care that incorporates treatment for the special physical, psychological, or emotional needs of a child placed with specially trained foster parents.

## **7.708.2 REQUIREMENTS FOR CERTIFICATION OF FAMILY FOSTER CARE HOMES**

### **7.708.21 Character, Suitability, and Qualifications of Family Foster Parents**

- A. A certificate shall be denied in accordance with Section 7.500.312, D,
- B. Each foster parent in the family foster care home shall demonstrate an interest in, and a knowledge of, foster children and a concern for their proper care and well-being.
- C. A certificate may be denied or revoked if the foster parent(s)' own children have been placed in foster care or a residential treatment facility under circumstances which demonstrated that the foster parent or another resident of the home was abusive, neglectful, or a danger to the health, safety, or well-being of those foster children.

- D. The family foster care home parents shall be able to provide for a foster child's proper physical, mental and character development.
- E. Applicants shall demonstrate stability in family relationships within the home where family foster care is to be provided.
- F. The licensing or certifying authority must receive at least three written statements which describe the applicant's character, interpersonal relations, and ability to provide care for foster children from references provided by the applicant, at least two from a source/person who are not related to the applicant and who have known the applicant one year or longer (references need not be residents of Colorado). Licensing or certifying representatives may contact others who may have knowledge or information regarding the applicant's character or suitability.
- G. The foster home parent shall possess basic knowledge of child care and good nutrition, and shall cooperate with the licensing or certifying agency in programs designed to increase such knowledge.
- H. Licenses or certificates shall not be granted to applicants who are less than twenty one years of age on the date of application for such license or who lack adequate physical stamina to care for children.
- I. The financial resources of foster parents shall be adequate to assure that the home where the care is provided is maintained in safe repair and in conformity with standards and that the requirements of these regulations can be fulfilled.
- J. A license or certificate shall not be granted for a family foster care home unless the applicant has demonstrated the ability to manage a household so that the licensing or certifying authority may determine that the applicant is able to acquire food, materials and other equipment as may be required for child care and to maintain records pertaining to foster children, including records required by statute or regulations.
- K. Each foster parent shall have a health assessment within one year prior to certification or within 30 calendar days after certification and thereafter as required, in writing, by a licensed health care professional. The reports of the medical examinations shall be dated and signed by the examining physician or nurse practitioner and shall be provided to the certifying authority. Reports shall include a statement of the evaluation of the person's physical ability to care for foster children.

If, in the opinion of the licensed health care professional or the assessment worker, an emotional or psychological condition exists which would have a negative impact on the care of foster children, the issuance of a license shall be conditioned upon the satisfactory report of a licensed mental health practitioner.

- L. Children of the foster home parents and any other persons not placed by the agency and living in the family foster care home shall obtain a medical statement from a licensed health care professional verifying that each such person suffers from no illness or communicable disease which would adversely affect foster children in care. This statement shall be obtained annually or as required in writing by an approved health care professional. A licensed health care professional is defined as a physician, nurse practitioner, or a physician's assistant. This statement shall have been signed within the twelve month period preceding the original license or full certificate granted to the home.

#### **7.708.22 Physical Requirements for a Safe and Adequate Family Foster Care Home**

- A. Licensing or certifying representatives are authorized but not required to consult the state or county

department of health regarding sanitary standards and to consult local fire departments regarding questions of fire safety. A license or certificate may be denied or revoked in the event an applicant or licensee refuses to permit an investigation by these authorities if requested by a licensing or certifying representative, or if such authority advises, that a license or certificate not be issued.

B. The following shall be required of all family foster care homes:

1. There shall be an outdoor play space free from hazards of not less than 75 square feet per child in care who is between 12 months and five years of age. This area shall be fenced or otherwise protected. If the area is not fenced, outdoor play shall be supervised by the foster care provider or designee and a specific plan for how safety is to be assured shall be documented in the case file.
2. The presence of firearms and ammunition is strongly discouraged in any home in which foster children are 'cared for. Any weapons such as firearms, air rifles, bows, hunting knives or hunting sling shots shall be unstrung and unloaded at all times when foster children are in the home and shall be stored in locked containers out of the reach of foster children. Ammunition and arrows shall be stored in separate locked containers. Firearms which are solely ornamental are excepted from the storage requirement. Weapons shall not be transported in any vehicle in which foster children are riding unless the weapons are made inoperable and inaccessible. Law enforcement professionals are exempted from the requirements of this section if conditions of their employment require them to carry weapons.
3. At least 35 square feet of usable indoor space exclusive of halls, baths and sleeping area shall be available for each child. However, when a sibling group is placed together in a single foster home, a variance from the minimum space standards is permitted.' All floor space shall have carpets, tile or smooth finish which may be easily cleaned, interior walls shall be constructed of solid material and be free from holes. Unfinished basements must be inaccessible to foster children when safety hazards are present.
4. Exterior doors shall be maintained in such a manner which would permit easy exit. Interior doors shall be designed to prevent children from being trapped.
5. A basement which will be used regularly in the care of children in any manner shall be equipped with more than one exit; such exit may be an accessible window. See Section 7.708.31. G, for additional requirements for nighttime care.
6. The home shall be equipped with refrigeration, and provisions shall be made for the washing, rinsing and storing of dishes in a safe and sanitary manner.
7. Toys and outdoor play equipment meeting the requirements of Section 7.708.31, F. 2. a. shall be available.
8. A comfortable bed, cot or crib in a clean, well-ventilated room, which not customarily used for other purposes such as a kitchen, dining room hall or bathroom, shall be available for all children in the home, including birth or adoptive children or foster children. There shall be a minimum of 40 square feet of floor space for each foster child's bed, and the be should be placed at least two feet apart when arranged in parallel.
9. No family foster care home shall be used for a rental income business an adult foster care facility. A business of a nature which might hazardous to the health, safety, morals or welfare of foster children shall not be operated on the premises of the foster home.
10. Mobile homes used as foster homes shall have at least two exits, be skirted and properly



installed and stabilized.

11. Safety issues related to swimming pools shall be assessed by the certification worker, addressed by the county or state health department as necessary, and documented in the case file.

12. If there is a trampoline on the foster home property, safety issues regarding its use must be agreed upon with, the foster parents a addressed in writing in the case file.

C. A certificate shall be denied, suspended, revoked or made probationary for failure to repair or otherwise comply with any of the preceding requirements when a defect or noncompliance with such requirement has been noted by the licensing or certifying representative and brought to the attention of the licensee or applicant in writing.

#### **7.708.23 Foster Home Site**

A. The family foster care home must be located in an area that is accessible to health resources, public and private utilities, adequate and safe water supplies, sewage disposal, and fire and police protection.

B. The family foster care home must comply with local zoning department requirements.

C. The entire premises of the family foster care home are subject to inspection for licensing or certification purposes, including, but not limited to, the residence where care is to be provided, the grounds surrounding the family foster care home, the basement, the attic (if accessible), any storage buildings, and a garage or carport, if applicable.

D. The family foster care home, including indoor and outdoor space, shall be maintained in a clean and safe condition free from hazards to health and safety.

#### **7.708.24 Foster Home Maintenance**

A. The family foster care home shall be kept in good repair and maintained in a safe, clean, and sanitary condition.

B. All areas of the family foster care home available to foster children's activities including equipment, materials and furnishings shall be of sturdy, safe construction, easy to clean, and free of hazards, such as sharp points or corners, splinters, protruding nails, broken play and recreational equipment, or paint that contains lead or other poisonous materials and might be dangerous to the life or health of foster children.

C. All areas of the family foster care home shall be kept free from accumulation of significant amounts of non-essential materials such as furnishings, newspapers, or magazines that could pose a fire or health hazard.

D. Provision shall be made for collection, storage, and disposal of trash to prevent infestation by rodents.

#### **7.708.25 Fire Safety**

A. Fire hazards, such as defective electrical appliances and electric cords, dangerous or defective heating equipment or flammable material stored in such a manner as to create a risk of fire shall be corrected or eliminated.

B. The family foster care home shall contain at least one U.L.-approved fire extinguisher, highly visible, easily accessible, and in working condition, weighing not less than five pounds, that has a rating

of 2A, 10BC. This requirement may be waived if more extensive fire-control measures are required by a local fire department.

- C. A smoke detector, in working condition, must be installed on each level of the family foster care home and near sleeping areas.
- D. No gas space heaters, open-flame gas or oil stoves, hot plates, or un-vented heaters shall be used in the family foster care home for heating purposes. No electric space heaters shall be used in the family foster care home for permanent heating purposes.
- E. Flammables aerosol paints, insecticides, chemicals, and other dangerous materials shall be locked or stored so they are inaccessible to foster children and must be stored in areas separate from sleeping or living areas. Flammables shall be stored in an approved container.
- F. Heating devices such as radiators, registers, fireplaces, wood-burning stoves, and steam and hot water pipes that pose a fire or burn hazard to foster children shall be screened or otherwise protected.
- G. Flammable material must not be stored near a furnace, hot water heater, or other heating device.
- H. There shall be no candles or other burnable objects permitted in foster children's sleeping areas. Foster children shall not be permitted to smoke in sleeping or storage areas.
- I. Exit doors shall be clearly identified to all foster children. No lock or fastening to prevent free escape from the inside of any room used by the foster children shall be permitted.
- J. Exit routes shall be kept free of discarded furniture, furnishings, laundry, and stacks of newspapers or magazines that could interfere with the prompt evacuation of the family foster care home.

#### **7.708.26 General Comfort and Safety**

- A. All hazardous chemicals, tools, and other equipment, including matches, plastic bags, paints, gasoline, medicines, insecticides, and cleaning and laundry materials, shall be stored out of reach of young foster children. Products which could cause poisoning or contamination shall not be stored in areas where food is stored or prepared.
- B. Water from any source other than a regular municipal water supply shall be tested annually for compliance with water quality requirements. (Sterilized containers for free laboratory tests of drinking water may be secured from the county health department or by writing to the Colorado Department of Public Health and Environment, 4210 East 11th Avenue, Denver, Colorado 80220.)
- C. The family foster care home shall be equipped with adequate light, heat, ventilation, and plumbing for safe and comfortable occupancy.
- D. The family foster care home must be equipped with hot and cold running water.
- E. All stairways containing more than four steps shall be equipped with a handrail.
- F. The family foster care home shall have immediate access to a working telephone, and emergency numbers shall either be posted near the telephone or be immediately available, including those related to medical care, fire, law enforcement, and poison control where available. Numbers for the agency or person having legal custody of each foster child shall also be readily available.

#### **7.708.3 REQUIREMENT FOR THE ONGOING OPERATION OF FAMILY FOSTER CARE HOMES**

### **7.708.31 Care of Foster Children**

- A. Foster parents shall provide supervision and care appropriate to each child's age, level of development and ability to accept independence and responsibility.
- B. Within 24 hours of arrival at the family foster care home, a foster child shall be given an orientation to the home, consistent with the foster child's age and ability to participate, which includes at least the following:
  - 1. Tour of the home and instruction on fire alarm and fire evacuation procedures, escape routes and exits.
  - 2. The rules/regulations of the home.
  - 3. Procedures affecting the foster child's behavior, including limiting or restricting a foster child's rights where allowed, the type of discipline used in the family foster care home, and consequences for certain behaviors.
  - 4. The complete foster children's rights and foster children's grievance procedures as developed by the family foster care home or by the certifying authority.
- C. At any time when foster parents are unable for any reason (including, but not limited to, illness or temporary absence from the home) to provide supervision and care, they shall arrange for a qualified substitute who is familiar with these rules and with the foster children in care to provide temporary supervision and care to the foster children in the child(ren)'s identified family foster care home. If in care for up to 6 hours, it is preferable that the provider of substitute care be at least sixteen years old. Exceptions based on age and maturity can be made with concurrence of the foster parent and the certifying authority, but in no case should the provider of substitute care be less than 14 years of age. If care is provided for more than 6 hours including overnight and respite care, the substitute care provider must be at least 18 years of age, trained in first aid and CPR, and must have completed the following background checks:
  - 1. Colorado Bureau of Investigation (CBI)
  - 2. State Department's automated system

Waivers to these requirements may be requested by filing an appeal and receiving approval from the Colorado Department of Human Services' designated appeal panel. Waivers must be documented in the provider and foster child's record.
- D. Respite care for a foster child(ren) in a certified foster home, other than the foster child(ren)'s identified foster home, that exceeds the license capacity of the foster home, shall occur for short term temporary relief of the foster parent(s) for not more than seven (7) consecutive days per month not to exceed 28 days in a calendar year. During the time when respite care for a foster child(ren) is occurring, the respite home may not exceed six (6) foster children or a maximum of eight (8) total children with no more than two (2) children under two years of age. The respite home must be in compliance with all other applicable rules for family foster care homes.
- E. Care shall include the requirements of the following sections, numbered F through I.
- F. Health Care
  - 1. Suspected mental or emotional disorders which are observed by foster parents shall be reported to the certifying authority and the child's caseworker so that appropriate care may be obtained.

2. Where pets or other animals are present, additional precautions shall be taken as required to insure both safety and good hygiene. Dogs and cats shall be vaccinated as required by State law or as designated by a veterinarian. Foster children shall not be permitted to mistreat animals. Any animal that poses a threat to a foster child's safety or health must be confined in a place away from the foster child(ren).

#### G. Home Environment and Family Activity

1. It is the purpose of family foster care to provide constructive family living experiences for foster children during the period of placement.
2. Daily activities shall be designed to encourage normal physical, mental, social and emotional development of foster children. This requirement shall be met in the following manner:
  - a. Materials and equipment appropriate for the age of foster children in care shall be available for both active and quiet play.
  - b. An effort shall be made to provide for contact and friendship between children in foster care and other children of a comparable age. Opportunities shall be provided for both group and individual play.
  - c. Foster children shall be encouraged to relate or to communicate with each other and with adults.
  - d. Outdoor activity shall be available to each foster child each day, weather permitting.
3. Foster parents or a designated representative from the certifying authority with knowledge of the child shall attend Administrative Reviews for the foster children in their care and participate in the planning for such foster children. They shall receive a copy of the Family Services Plan for each foster child in their care.

#### H. Nighttime Care Requirements

1. Foster children shall be provided with a bed, cot or crib as required by Section 7.708.22, B, 8.
2. Two sheets and suitable warm covering shall be provided to each foster child. Sheets shall be changed weekly or more frequently if needed, and no foster child shall be allowed to remain sleeping in a wet bed.
3. Except for emergency placements, foster children over the age of 18 months shall not sleep in the same room as unrelated adults on a regular basis. Sleeping rooms for unrelated foster children shall not be shared by foster children of the opposite sex when one foster child is over 4 years old. Siblings of the opposite sex that are over the age of 4 years and share bedrooms shall do so only with the written approval of the certifying authority and the county designee. The written documentation must be maintained in the foster child's and provider's file. Teen parents and their children may share a room.
4. Each foster child shall be provided with adequate sleep wear, and a complete set of clean sleep wear shall be available in the event that a change is necessary.
5. Sleeping rooms for foster children under 5 years of age shall be near the bedroom of the foster parents or other responsible person. Monitoring systems may be utilized to ensure safety. Foster children under 12 years of age shall not be permitted to sleep in a detached structure unless a responsible person sleeps in the same structure. Foster children who sleep in a detached structure must have written approval of the county

department that placed the foster child, who will assess the foster child's abilities and needs.

#### **I. Infant Care**

1. Not more than two infants, whether birth, adoptive or foster children under the age of two years, shall be cared for in a family foster care home, except under unusual circumstances such as multiple births.
2. In addition to the applicable provisions of paragraphs A through G, above, infant care shall include the following:
  - a. Infants shall be held during bottle feeding and at other times during the day. Infants shall not be confined but shall be allowed freedom of movement insofar as practical and shall be provided with an environment designed to stimulate their senses.
  - b. Diapers shall be changed as required and used diapers cleaned or disposed of consistent with the practices of good hygiene. Toilet training shall not be attempted with any foster child less than 18 months of age and shall be done in a non-disciplinary manner.

#### **7.708.32 Suspected Child Abuse**

Where child abuse is suspected, the foster parent shall be alert for evidence of signs of abuse and report such evidence promptly to the county department of social/human services. A written report of any external signs of injury, such as bruising, scratching or swelling, shall be placed in the foster child's record. If there is any suspicion of abuse or illness, the foster child shall be seen by medical personnel immediately.

#### **7.708.33 Foster Children's Rights**

- A. The certifying authority shall have written policies and procedures that address and ensure the availability of each of the following core rights for foster children in residence. These rights may not be restricted or denied by the family foster care home or certifying authority. Every foster child has the right to:
  1. Enjoy freedom of thought, conscience, cultural and ethnic practice, and religion.
  2. A reasonable degree of privacy.
  3. Have his or her opinions heard and considered, to the greatest extent possible, when any decisions are being made affecting his/her life.
  4. Receive appropriate and reasonable adult guidance, support and supervision.
  5. Be free from physical abuse or neglect and inhumane treatment. Every foster child has the right to be protected from all forms of sexual exploitation.
  6. Receive adequate and appropriate medical care.
  7. Receive adequate and appropriate food, clothing, and housing.
  8. Live in clean, safe surroundings.

9. Participate in an educational program that will maximize his/her potential in accordance with existing law.
  10. Communicate with "significant others" outside the family foster care home, such as a parent or guardian, caseworker, attorney or guardian ad litem, current therapist, physician, religious advisor, and, if appropriate, probation officer.
- B. The following foster children's rights may be limited; to reasonable periods during the day or restricted according to routine of the family foster care home to ensure the protection of the foster children and foster family. Every foster child has the right to:
1. Have access to letter-writing materials, including postage, and to have a foster parent(s) assist him/her if unable to write, prepare, and mail correspondence.
  2. Have access to telephones to both make and receive calls in private.
  3. Have convenient opportunities to meet with visitors.
  4. Wear his/her own clothes, keep and use his/her own personal possessions, and keep and be allowed to spend a reasonable sum of his/her own money.
  5. Receive and send sealed correspondence.
- C. Family foster care homes must develop a plan, in conjunction with the certifying authority, regarding the following rights of foster children and these rights must be explained to the foster children upon admission. The notification must be communicated in a language or mode of communication the foster child can understand. There must be plans for:
1. How and when telephone and written communications will take place.
  2. How, when and where regular visits of the foster child with relatives, friends, or others interested in his/her welfare will take place.
  3. Extenuating circumstances and emergency situations affecting the foster child and his/her family.

#### **7.708.34 The Prohibited Use of Cruel and Aversive Therapy**

The family foster care home shall refrain from engaging in all cruel and aversive treatment or therapy including, but not limited to, the following:

- A. Any intervention designed to or likely to cause a foster child physical pain
- B. Releasing noxious, or toxic, sprays, mists, or substances in proximity to the foster child's face.
- C. Any intervention that denies a foster child sleep, food, water, shelter, access to bathroom facilities, adequate bedding, or appropriate physical comfort.
- D. Any intervention or type of treatment that subjects a foster child to verbal abuse, ridicule, humiliation or that can be expected to cause excessive emotional trauma.
- E. Interventions that use a device, material, or object that is designed to simultaneously immobilize all four of the foster child's extremities.
- F. Any treatment intervention that deprives a foster child of the use of his/her senses, including sight,

hearing, touch, taste, or smell.

- G. The use of mechanical restraints, including but not limited to, the use of handcuffs, shackles, straight jackets, posey vests, ankle and wrist restraints, craig beds, vail beds, and chest restraints.
- H. Physical restraint, except as described at 7.714.90, and locked Seclusion
- I. Use of rebirthing therapy or any therapy technique that may be considered similar to rebirthing therapy as a therapeutic treatment, as defined by Section : 2-43222(1)(t)(IV). C.R.S.

#### **7.708.35 Discipline**

- A. The family foster care home or certifying authority shall have written policies and procedures regarding discipline that must be explained to all foster children, parent(s), guardian(s), staff, and placing agencies. These policies must include positive responses to a foster child's appropriate behavior.
- B. Discipline shall be constructive or educational in nature and may include talking with the foster child about the situation, praise for appropriate behavior, diversion, separation from the problem situation, and withholding privileges.
- C. Basic rights shall not be denied as a disciplinary measure.
- D. Separation when used as discipline must be brief and appropriate to the foster child's age and circumstances. The foster child shall always be within hearing of an adult in a safe, clean, well-lighted, well-ventilated room in the family foster care home that contains at least 50 square feet of floor space. No foster child shall be isolated in a bathroom, closet or pantry.
- E. Foster children in care at the family foster care home shall not discipline other foster children.
- F. A family foster care home shall prohibit all cruel and unusual discipline including, but not limited to, the following:
  - 1. Any type of physical hitting or any type of physical punishment inflicted in any manner upon the body of the foster child, such as spanking, striking, swatting, punching, shaking, biting, hair pulling, roughly handling a foster child, striking with an inanimate object, or any humiliating or frightening method of discipline to control the actions of any foster child or group of foster children.
  - 2. Discipline that is designed to, or likely to, cause physical pain.
  - 3. Physical exercises such as running laps, push-ups, or carrying heavy rocks, bricks, or lumber when used solely as a means of punishment.
  - 4. Assignment of physically strenuous or harsh work that could result in harm to the foster child.
  - 5. Requiring or forcing a foster child to take an uncomfortable position such as squatting or bending, or requiring a foster child to stay in a position for an extended length of time such as standing with nose to the wall, holding hands over head, or sitting in a cross-legged position on the floor, or requiring or forcing a foster child to repeat physical movements when used solely as a means of punishment.
  - 6. Verbal abuse or derogatory remarks about the foster child his/her family, his/her race, religion, or cultural background.
  - 7. Denial of any essential/basic program service solely for disciplinary purposes.

8. Deprivation of meals or snacks, although scheduled meals or snacks may be provided individually.
9. Denial of visiting or communication privileges with family, clergy, attorney, or caseworker solely as a means of punishment.
10. Releasing noxious, toxic, or otherwise unpleasant sprays, mists, or aerosol substances in proximity to the foster child's face.
11. Denial of sleep.
12. Requiring the foster child to remain silent for a period of time inconsistent with the foster child's age, developmental level, or medical condition.
13. Denial of shelter, clothing or bedding.
14. Withholding of emotional response or stimulation.
15. Discipline associated with toileting, toileting accidents or lapses in toilet training.
16. Sending a foster child to bed as punishment. This does not prohibit a family foster care home from setting individual bed times- for foster children.
17. Force feeding a foster child.
18. Isolating a foster child in a locked room for discipline.
19. Use of- physical or mechanical restraint as discipline for a foster child, including, but not limited to, the use of handcuffs, shackles, straight jackets, posey vests, ankle and wrist restraints, crais beds, vail beds hospital cribs, and chest restraints.

#### **7.708.36 Physical Restraint**

If a family foster care home uses physical restraint with a foster child(ren) in care in an emergency situation when the foster child is a danger to himself/herself or others, the family foster care home must be pre-approved by the certifying authority to conduct restraints and must be in compliance with all the rules concerning physical restraint as found at Sections 7.714.90 - 7.714.97. The family foster care home must notify the placing caseworker when a child is restrained.

#### **7.708.37 Religion**

- A. The family foster care home shall demonstrate consideration for, and sensitivity to, the religious backgrounds of foster children in care. The family foster care home shall assist a foster child's involvement in religious activities appropriate to the foster child's religious background and based upon the needs and interests of the foster child.
- B. Foster children in care at the family foster care home shall be allowed and encouraged to celebrate their religious holidays.
- C. Opportunity and assistance shall be provided for each foster child to practice the chosen/preferred religious beliefs and faith of his/her family. If the family has no preference, the individual preference of the foster child shall be respected. This includes, but is not limited to, making necessary arrangements for attendance of foster children at the appropriate religious institution or at a study group for religious instruction.



- D. A foster child may be invited to participate in religious activities of the family foster care home.
- E. A foster child shall not be coerced or forced to participate in the religious activities of the family foster care home or to attend religious services.
- F. Any form of religious intervention used by the family foster care home to control or change a foster child's behavior, or treat or heal a medical condition, must be approved, in writing, by the legal guardian(s) of the foster child prior to the use of the intervention.
- G. A family foster care home cannot deny medical care to a foster child because of religious beliefs.
- H. The foster child's family and/or guardian must be consulted prior to any planned change in religious affiliation made by the foster child while he/she is in care at the family foster care home.

#### **7.708.38 Education**

- A. Foster children shall attend educational/vocational programs in the most appropriate and least restrictive educational setting for the foster child, including, but not limited to, attending regular classes conducted in accredited elementary, middle, and secondary schools within the community.
- B. Regular school attendance or an educational plan is required for each foster child according to school attendance laws; a suitable, quiet, well-lighted place for study shall be provided together with necessary books, papers, pencils and other equipment which are reasonably required by school-age children. Foster parents shall review grade reports and other information received from teachers or school authorities with foster children in care and shall counsel and assist foster children regarding adequate classroom performance. The parent, guardian or authority with responsibility for the foster child shall be advised of school performance. Reasonable efforts shall be made to involve a foster child in extracurricular activities. The foster parents shall attend school staffings, conferences, and Individualized Educational Plan meetings when possible.
- C. Foster children attending school shall be permitted to participate in school extracurricular activities to the extent of their interests and abilities and in accordance with each individual foster child's plan.
- D. In order to ensure that all students who may have disabilities are provided an appropriate education, the family foster care home, in cooperation with the certifying authority, shall ensure that adequate "Child Find" procedures are utilized. Such procedures shall be developed cooperatively with Local Education Agencies (LEA) in accordance with Exceptional Foster Children's Educational Act rules and regulations and LEA procedures. Child Find includes a process for screening, referring, assessing and staffing students suspected of having a disabling condition.

#### **7.708.39 Community Participation**

- A. Participation in community activities shall be encouraged, supported, and a vital part of each foster life and choice.
- B. The family foster care home shall reflect consideration for, and sensitivity to, the racial, cultural, ethnic and/or religious backgrounds of foster children in care. The family foster care home shall involve a foster child in cultural and/or ethnic activities appropriate to his/her cultural and/or ethnic background. Other factors should include, but are not limited to, consideration of the child's family, community, neighborhood, faith or religious beliefs, school activities, friends, and child's and family's primary language.
- C. The family foster care home shall utilize available services, facilities, and activity programs of the

community, and foster children shall be given opportunities to participate as individuals or as a group in agency-sponsored recreational and cultural programs.

- D. With the approval of the certifying authority, the family foster care home may deduct reasonable sums from a foster child's allowance as restitution for damages done by the foster child. Restitution must be negotiated with the foster child and based on the foster child's ability to pay. A written record of damages and any restitution paid by a foster child must be maintained by the family foster care home and certifying authority.
- E. Chores at the family foster care home are considered part of the participatory responsibility of living together. They shall provide constructive experiences in accordance with the age and ability of the foster child.
- F. All chores shall be scheduled so as not to conflict with other essential scheduled activities.
- G. The family foster care home shall comply with all child labor laws and regulations in making work assignments, with consideration for agricultural work assignments in those communities.
- H. Paid or voluntary work assignments outside of the family foster care home shall be approved by foster parent(s) and the county designee for the foster child, who shall know the employer, the specific type of work, and the conditions of employment.
- I. A foster child shall not be exploited. A foster child may not participate in solicitation on behalf of the family foster care home or certifying authority for a fund-raising activity without the written permission of the parent(s) or guardian(s) for each specific activity, and the foster child must be willing to participate in the activity.

#### **7.708.4 PERSONAL CARE AND SAFETY OF THE FOSTER CHILD**

##### **7.708.41 Medical and Health Services**

- A. A general medical examination for each foster child must be completed or scheduled with a physician or a nurse practitioner prior to or within fourteen (14) calendar days following placement at the family foster care home. A statement from the examiner shall be retained in the foster child's file. This exam shall include the following:
  - 1. An examination for physical injury and disease.
  - 2. Vision and hearing screening.
  - 3. A current assessment of the foster child's health, including immunizations.
- B. Whenever indicated, a foster child shall be referred to an appropriate specialist for either further assessment or treatment.
- C. Subsequent physical and other examinations shall be done annually or as directed, in writing, by the physician or other qualified health professional.
- D. Dental examinations, appropriate to the age of the foster child, must have been completed within four months prior to placement or scheduled or completed within eight (8) weeks following placement. The family foster care home or governing body shall ensure that each foster child receives a dental examination every six months or as required in writing by a dentist.
- E. At all times there shall be first aid supplies readily available at the family foster care home. Each foster parent must be certified in first aid, or the equivalent, and CPR for all ages of foster children in

care.

- F. The family foster care home, in conjunction with the parent(s) or guardian(s), shall make every effort to ensure that a foster child needing corrective devices such as glasses, hearing aids, etc., is provided with the necessary equipment. The placing authority for the foster child shall assist with obtaining resources as necessary to fulfill this requirement.
- G. The family foster care home has the right to request a statement regarding the foster child's general health from a medical examiner. In a potentially life- threatening situation, the family foster care home shall refer the foster child's care to the appropriate medical and legal authority. If a foster child wishes an exemption from a medical examination or medical treatment due to religious beliefs, the foster child shall submit a written statement signed by his/her parent(s) or guardian(s) which states the reasons for such an exemption. The family foster care home has the right to refuse admission to a foster child whose parent(s) or guardian(s) refuses medical treatment or examination based upon religious convictions.
- H. Foster parents shall be aware of and shall observe foster children for signs of illness or disease and shall respond to and care for a foster child suffering from illness, accident or injury. If contagious, the foster child affected should be isolated from other children in the home and made as comfortable as possible. First aid care shall be provided as required. If additional care, medical attention or removal from the home is indicated, the appropriate person with responsibility for the foster child shall be contacted and medical assistance shall be obtained without undue delay. A written record of any illness or injury to a foster child shall be retained in each foster child's individual record.
- I. The family foster care home shall regularly maintain and update a foster child's Human Services Health Passport, or a document containing all the information listed in the Health Passport, for foster children placed by a county department of social services. This document is to be photocopied regularly and submitted to the foster child's caseworker. The original of the document shall be given to the caseworker upon the foster child's discharge so that it can be given to the family foster care home where the foster child is being admitted or to the foster child's parent(s), guardian(s), or family member(s) with whom the foster child is placed.
- J. Medications shall be administered and stored in the following manner
  - 1. When a foster child first goes into care, the family foster care home shall ascertain all medication the foster child is currently taking.
  - 2. All medication must be kept in a clean storage area inaccessible to foster children and stored according to pharmacy instructions.
  - 3. All prescriptive medications shall be administered only upon the written prescription of a physician. The family foster care home shall also obtain written authorization from the prescribing physician to administer any non- prescriptive medication.
  - 4. In an emergency situation, non- prescriptive medication may be administered on the verbal authorization of a physician. Written confirmation must then be obtained for the verbal authorization.
  - 5. The family foster care home shall maintain for each foster child a cumulative record of all medication, both prescriptive and non-prescriptive dispensed to that foster child, including:
    - a. The name of the foster child.

- b. The name and dosage of medication.
- c. The time and date the medication was dispensed.
- d. The name or initials of the person administering the medication.

#### **7.708.42 Food and Nutrition**

- A. The family foster care home shall provide nutritious foods in the variety and amounts as appropriate for the age, appetite, and activity of each foster child in care.
- B. At least three nourishing, wholesome, well-balanced meals a day shall be offered at regular intervals except when foster children receive their morning and/or noon meal(s) at school. No more than fourteen (14) hours shall elapse between the evening and morning meals. Nourishing snacks shall be part of the daily food provided.
- C. Family meals including all children and adults present in the home shall be provided whenever possible.
- D. Foster children shall be encouraged to eat a variety of the food served but shall not be subjected to undue coercion, including forced feeding, or punished for refusal to eat.
- E. All food shall be from sources approved or considered satisfactory by the health authority. All foods shall be stored, prepared, and served in such a manner as to be clean, wholesome, free from spoilage, and safe for human consumption. Only pasteurized milk shall be served. Home pressure-canned fruits and vegetables and canned meats cannot be served because of the possible severe health concerns for foster children from botulism in unsafe canned foods. Fruits, vegetables and meats may be frozen.
- F. There shall be a record made of the special diets prescribed and prepared for a foster child.
- G. Foster children must not be given foods that are contrary to their religious beliefs, or of their family, or are known to cause an allergic reaction or a health hazard.
- H. Water shall be readily accessible to foster children.
- I. Common drinking cups shall not be permitted.

#### **7.708.43 Personal Hygiene and Daily Routine**

- A. The family foster care home shall ensure that foster children receive training in good habits of personal care, hygiene, and grooming appropriate to their age, gender, race and culture.
  - 1. There shall be supervision by foster parents to provide for proper grooming and physical cleanliness of the foster children.
  - 2. The family foster care home shall ensure that foster children are provided with necessary and appropriate toiletry items, including clean, individual towels and washcloths, toothbrush, toothpaste, comb, and shampoo.
  - 3. Foster children shall be encouraged or assisted to maintain cleanliness or good hygiene: teeth shall be brushed each day and more frequently when possible.
- B. The family foster care home shall have basic daily routines for foster children in care.

1. Daily routines shall not be allowed to conflict with the implementation of a foster child's family services plan.
2. Daily routines shall be established for mealtimes, waking, and bedtimes.
3. Opportunity for physical exercise shall be planned for each foster child.

#### **7.708.44 Clothing and Personal Belongings**

- A. The family foster care home shall allow a foster child in care to bring his/her personal belongings to the program, as defined by the family foster care home policy, and to acquire belongings of his/her own. However, the family foster care home shall, as necessary, limit or supervise the use of these items while the foster child is in care. Where extraordinary limitations are imposed, the foster child shall be informed of the reasons, in a language or manner of communication the foster child can understand.
- B. The family foster care home shall ensure that each foster child in care has adequate clean, proper-fitting, attractive, and seasonable clothing as required for health, comfort, and physical well-being and as appropriate to age, gender, individual needs, culture, and ethnicity.
  1. Each foster child's clothing shall be distinguished as his/her own.
  2. A foster child's clothing shall be kept clean and in good repair. The foster child shall be involved, as appropriate, in the care and maintenance of his/her clothing. As appropriate, laundering, ironing, and sewing facilities shall be accessible to the foster child.
- C. The family foster care home in conjunction with the placing authority shall ensure that discharge plans make provisions for clothing needs at time of discharge. The wardrobe for each foster child shall go with him/her at time of discharge.

#### **7.738.45 Emergency Drills**

- A. There shall be a plan for foster parent(s) and foster children to follow in case of emergency or disaster. The plan shall include provisions for roles and responsibilities during an emergency, evacuation of the family foster care home and the assignment of a central meeting place where each individual may be accounted for.
- B. Fire exit drills must be held often enough so that all occupants are familiar with the drill procedure and their conduct during a drill is a matter of established routine.
- C. Drills must be held at unexpected times and under varying conditions to simulate the conditions of an actual fire.
- D. Drills must emphasize orderly evacuation under proper discipline rather than speed. Running or horseplay shall not be permitted.
- E. Drills must include suitable procedures for ensuring that all persons in the family foster care home actually participate.
- F. A record of fire drills must be recorded by the family foster care home.
- G. Smoke alarm devices shall be regularly used in the conduct of drills.
- H. The family foster care home shall make special provisions for the evacuation of any foster child with a disability in the family foster care home.

- I. The family foster care home shall take special care to help emotionally disturbed or perceptually handicapped foster children understand the nature of such drills.
- J. If appropriate to the location of the family foster care home, tornado drills must be held often enough so that all occupants are familiar with the drill procedure and conduct during a drill is a matter of established routine. A record of tornado drills must be recorded by the family foster care home.

#### **7.708.46 Transportation**

- A. A family foster care home or certifying authority shall ensure that each foster child is provided with the transportation necessary for implementing the foster child's family service plan.
- B. A family foster care home shall have means of transporting foster children in cases of emergency.
- C. Any vehicle used by the family foster care home in transporting foster children in care, whether such vehicle is operated by a foster parent or any other person acting on behalf of the family foster care home, shall be properly licensed, and the vehicle shall be maintained in accordance with Colorado law.
- D. Any foster parent or other person acting on behalf of the family foster care home operating a vehicle for purpose of transporting foster children shall be properly licensed to operate the class of vehicle in accordance with Colorado law.
- E. Foster children under 16 years of age must be properly fastened into a restraint system that conforms to all applicable Federal Motor Vehicle Safety Standards and pursuant to Colorado law.
- F. A family foster care home shall not allow the number of persons in any vehicle used to transport foster children to exceed the number of available seats in the vehicle.
- G. The vehicle shall be enclosed and provided with door locks.
- H. A family foster care home shall ascertain the nature of any need or problem of a foster child which might cause difficulty during transportation, such as seizures or a tendency toward motion sickness. The family foster care home shall communicate this information to the driver of any vehicle transporting foster children in care.

#### **7.708.5 RECORDS AND REPORTS**

##### **7.708.51 Records**

- A. The family foster care home, in conjunction with the certifying authority, shall maintain complete records as required for the licensing or certification of the family foster care home in accordance with the rules regulating family foster care homes.
- B. Records for foster children shall be retained for at least three years. Retention of records for a longer period may be desirable when they reflect an accident, injury or other unusual circumstance.
- C. A record of admission shall be completed for each foster child in care prior to or at the time of placement. The admission record shall be maintained at the family foster care home where the foster child resides and shall contain:
  - 1. Foster child's name, date and place of birth (verified by a birth certificate when possible), gender, race, religious preferences of parent(s) or foster child, date and reason for placement.

2. Foster child's address and telephone number, parent(s) or guardian(s) address and telephone number if different from the foster child.
3. Name, address, day and nighttime telephone number of individual or agency placing the foster child with the name of individual arranging the placement.
4. Any documents pertaining to the foster child's legal status such as court orders, including the appointment of a Guardian ad litem, legal guardianship, or custody agreements.
5. A copy of the placement agreement pursuant to 7.708.61, K.
6. Health records including a health history, chronic medical problems of the foster child, illnesses the foster child has had during the last six months and a complete list of all medications the foster child is taking.

D. Each foster child's file shall also include:

1. Current medical and dental reports, accident, injury, or illness reports, record of medication administered and necessary medical care provided to the foster child while in placement.
2. Copies of educational records and reports of school work, including scholastic performance, certificates of achievement or award, copies of school pictures, extracurricular interests.
3. The foster child's Family Services Plan, a summary of the periodic evaluations of the foster child's progress and resultant changes in the Family Services Plan.
4. Psychiatric and psychological reports, when available.
5. Summary recording of significant contacts with parent(s), guardian(s) and other involved agencies.
6. If requested by the provider, a written notice to employees of the Department of Human Services and of county departments or other individuals with a need to know, if the foster parents do not want personally identifiable information provided to adult members of the foster child's family. Written notice may be subsequently provided to the parties aforementioned for release of personally identifiable information to the foster child's family which shall include the consent to release information, the foster parent's signature, and the date.

#### **7.708.52 Reports**

- A. The family foster care home shall immediately notify the foster child's parent(s), guardian(s), and/or the responsible agency of any serious illness or serious injury resulting in medical treatment away from the family foster care home, hospitalization or death involving a foster child in care.
- B. The family foster care home shall notify the parent(s), guardian(s), or placing authority as soon as possible upon discovery that a foster child has run away.
- C. A report about a death must include:
  1. The foster child's name, birth date, address, and telephone number.
  2. The names of the foster child's parent(s) or guardian(s) and their address and telephone number if different from that of the foster child.

3. Date of the fatality.
  4. Brief description of the incident or illness leading to the death.
  5. Names and addresses of witnesses or persons who were with the foster child at the time of death.
  6. Name and address of police department or authority to whom the report was made.
- D. The family foster care home shall notify the certifying authority of any change in the status of the family foster care home, police intervention or moving traffic violations that could affect care and safety of foster children.

## **7.708.6 CERTIFYING AUTHORITY REQUIREMENTS**

### **7.708.61 Admission Requirements**

- A. Admission of a foster child to a family foster care home shall be in keeping with the stated purpose of the family foster care home and shall be limited to those foster children for whom the foster parent(s) is qualified and by the needs of foster children already in residence to provide THE care necessary. Care must be provided in the least restrictive, most appropriate setting in order to meet the foster child's needs.
- B. Each family foster care home or its certifying authority shall have a written admission policy which at a minimum must include:
1. The policies and procedures related to intake.
  2. The age range and sex of foster children accepted/admitted for care.
  3. The needs, problems, situations or patterns best addressed by the family foster care home.
  4. Any pre-placement requirements for the foster child, the parent(s) or guardian, and/or the placing agency.
  5. The anticipated problems or situations that would result in the family foster care home or certifying authority requesting removal of a foster child from placement prior to the planned discharge.
- C. The written description of admission policies and criteria shall be provided to referring agencies.
- D. Information regarding the prospective foster child shall be discussed with the foster parent(s) as early as possible prior to placement. The family foster care home shall accept a foster child into care only after a preliminary assessment/screening of presenting problems in areas such as social, physical health, mental health, psychological concerns, previous physical or sexual abuse, and concerns about previous delinquent, assaultive, or destructive behavior, if appropriate, has been conducted.
- E. It is desirable for the foster child to visit and become familiar with the foster parents, the foster home and other persons living in the home prior to placement.
- F. For each foster child referred for placement, the family foster care home shall be provided with a current comprehensive intake evaluation, including a social, health, and family history, developmental assessment or mental health evaluation, and a psychological evaluation, if determined to be necessary by the family foster care home or certifying authority. Educational



records shall be provided if appropriate. As much of this information as possible shall be provided to the foster parent prior to admission, but the total evaluation shall be completed by the placing authority within one month after admission. If the family foster care home or certifying authority is unable to obtain this information within these time periods or is totally unable to obtain the information, the certifying authority must document its attempts to obtain the information and reasons for not obtaining the information.

- G. At the time of placement, the foster parent(s) shall be provided with a record of admission as outlined in Section 7.708.51. C. The Medicaid card shall be given to the foster parent(s) for Medicaid eligible foster children as soon as possible after placement. If a foster child is placed at the family foster care home as an emergency placement, the family foster care home shall be provided with at least the following information: name, birth date, if available, and physical description of the foster child, date and time of the admission; name, address telephone number and authority of person bringing the foster child to the family foster care home, and the reason for placement. Any other information that may be available should be recorded at the time of placement or as it becomes available. The date that placement terminates shall also be recorded.
- H. For all placements of foster children, previous medical records should be obtained and pertinent information from those records, including immunization records shall be given to foster parents within four weeks of the initial placement. The medical history shall contain, to the maximum degree possible, the information listed in the Colorado Department of Human Services Health Passport.
- I. Preparation of the foster child for admission shall be in a manner consistent with the foster child's age and ability to participate in the plan and to understand the reason for the placement.
- J. Prior to placement of the foster child at the family foster care home, the, guardian(s), and/or placing agency must be notified of the religious practice;;, philosophy, and affiliation of the family foster care home.
- K. The placement agreement shall be developed with the involvement of the foster child, the parent(s) or guardian(s) and the representative of the placing agency. Where the involvement of any of these is not feasible or desirable, the reasons for the exclusion shall be recorded by the certifying authority. The placement agreement shall include by reference or attachment at a minimum the following:
  - 1. Discussion of the foster child's and the parent's or guardian's expectations regarding: family contact and involvement: how family contact and involvement are to occur; the nature and goals of care, including any specialized services or specialized treatment to be provided; the religious orientation and practices of the foster child and, or family; and the anticipated planned discharge date and plan for the foster child following discharge.
  - 2. The policy and procedure to be followed regarding the use of restraint in an emergency situation pursuant to Section 7.708.36.
  - 3. A delineation of the respective roles and responsibilities of all agencies and persons involved with the foster child and his/her family.
  - 4. Written authorization for care and treatment of the foster child.
  - 5. Written authorization to obtain routine medical and dental care for the foster child and to obtain emergency medical and dental care.
  - 6. Legal status or custody of the foster child.

7. If a foster child is being placed by a Colorado county department of social/human services, the appropriate state form or contract shall be completed. This form or contract may provide some of the required authorizations.

#### **7.708.62 Foster Children's Grievance Procedure**

The certifying authority must establish a written grievance procedure that provides adequate due process safeguards, spells out the appeal process, and assures that foster children and parent(s) or guardian(s) are entitled to report any grievance and shall not be subject to any adverse action as a result of filing the grievance.

- A. The family foster care home and/or certifying authority for the family foster care home must follow grievance procedures without alteration, interference, or unreasonable delay.
- B. If a grievance is filed with the family foster care home, the grievance shall be recorded in the foster child's official case record along with the investigation findings and resulting action taken by the family foster care home or certifying authority. Information regarding the grievance must be sent to the individual or agency holding legal custody of the foster child.

#### **7.708.63 Comprehensive Program for Medical Care for the Foster Child**

The certifying authority shall ensure the availability of a comprehensive program of preventive, routine, and emergency medical and dental care for each foster child in care. Every reasonable effort shall be made to obtain routine and corrective dental care. The certifying authority shall have a written plan for providing such care. This plan shall include at a minimum:

- A. Ongoing appraisal of the general health of each foster child, including immunizations, in accordance with state law and regulations.
- B. Procedures for obtaining diagnostic services, emergency care, including the availability of emergency medical care on a 24-hour, seven-day-a-week basis, corrective care, recuperative care, and immunization updates.
- C. Provision of health education, which includes sex education, and birth control information and education, age appropriate to the foster child.
- D. Provision that any medical treatment administered will be explained to the foster child in a language or manner of communication understandable to him/her.
- E. The provision of dental care by a Colorado-licensed dentist, who is available to the family foster care home.
- F. Procedures for dispensing medication, storage of medication, documentation of administration of all medication, disposing of medications when not needed or no longer in use, and notification to a primary physician in cases of medication errors and/or drug reactions.

#### **7.708.64 On-Going Health of Family Foster Care Parents**

- A. A certifying authority shall not certify or continue to certify any person whose health, or emotional or psychological makeup impairs his/her ability to properly protect the health and safety of foster children.
- B. A certifying authority shall not allow a foster parent provide care for foster children if the foster parent, upon examination or as a result of tests, shows indication of a physical condition which could be hazardous to a foster child, or self, or which would prevent performance of duties.

- C. If in the opinion of a licensed health care professional or licensed mental health practitioner, a medical, emotional or psychological condition exists at any time which may jeopardize the health and/or safety of foster children or adversely affect the ability of foster home parents to care for such foster children, the issuance of a certificate shall be conditioned upon the satisfactory report of the licensed health care professional and, if foster children are in care, the certifying authority shall contact the appropriate social/ human services personnel to make satisfactory arrangements for the temporary care of foster children.
- D. The unfavorable report from any medical evaluation concerning the physical, mental health or emotional stability of any foster care parent or applicant must be evaluated and may be grounds for denial, revocation or making probationary of a foster care certificate.

#### **7.708.65 Orientation, Training, and Certification**

- A. The certifying authority shall have a comprehensive written plan for the orientation, pre-certification training, certification, and ongoing training of foster parents.
  - 1. The certifying authority shall have an introductory training and orientation program for all foster parents. This program shall include, at a minimum, twenty-seven hours of initial core training consisting of at least 12 hours prior to placement of a child and the remaining hours to be completed within 3 months after placement, including orientation to emergency and safety procedures and the general and specific duties and responsibilities of being a foster parent.
  - 2. If a child is placed with a foster care family on an emergency basis, 12 hours of core training must be completed and the remaining hours of training completed within 4 months from the date of placement. An emergency means that a child's safety is subject to actual or likely harm, immediate or emerging, serious or severe, which requires control.
  - 3. The certifying authority shall maintain written documentation of specific in-service training held, foster parents participating, the hours involved, and/or other on-going training activities in which foster parents were involved.
- B. The certifying authority shall create a training development plan for each foster parent(s) to document the strengths and competencies of the foster parent(s) and to identify those areas in which additional training is needed.
- C. The certifying authority shall document that foster parents receive quality, appropriate, competency-based training in the following areas that builds on basic competencies of the foster parent(s) established through life experiences and pre-certification training.
  - 1. The family foster care home's emergency and safety procedures, including but not limited to fire evacuation drills, tornado drills, where appropriate, and flood evacuation drills, where appropriate, on at least a semiannual basis.
  - 2. The principles and practices of child care, including developmentally appropriate practices.
  - 3. The certifying authority's administrative procedures and overall program goals.
  - 4. Acceptable behavior management techniques, including appropriate discipline and restraint of foster children, if appropriate, in accordance with these rules.
  - 5. Appropriate boundaries (both physical and emotional) between foster parents and foster children while in placement at the family foster care home and after discharge.

6. Positive and constructive methods of dealing with the foster child, including but not limited to, physical structuring of the environment and de-escalation of crisis situations.

7. Annual review of these regulations by foster parents.

D. Training requirements for the initial year of certification are as follows:

1. 27 hours of Core training, as identified in Section 7.708.65, A; and,

2. CPR and First Aid training; and,

3. 20 hours of ongoing specialized training.

E. Annually, each foster parent must complete 20 hours of on-going specific training as required in his/her training development plan. Training must include at least the areas listed above. Foster parents providing therapeutic services must complete an additional 12 hours of on-going training annually for a total of 32 hours of training. All providers serving children funded by the Children's Habilitation Residential Program (CHRP) must complete thirty-two (32) hours of ongoing specific training as identified in their training development plan.

#### **7.708.66 Transportation Policy**

The certifying authority shall have a written policy concerning under what circumstances a vehicle may be driven by a licensed foster child alone or with one passenger. Such driving privileges shall be a part of the foster child's family services plan.

#### **7.708.67 Limitation of Foster Children's Personal Belongings**

The decision and reasons why a family foster care home would limit a foster child's access to his/her personal belongings brought to the foster home upon admission shall be recorded in the foster child's case record maintained by the placing authority.

#### **7.708.68 Personal Allowance and Work Opportunities**

Foster children shall be provided personal allowance and/or work opportunities according to the established policy of the certifying authority and shall have opportunities appropriate to the foster child's age and development to experience the use and value of money by making purchases for items according to their own choice.

A. Money earned, received as a gift, or received as allowance by a foster child in care shall be deemed to be that foster child's personal property.

B. Limitations may be placed on the amount of money a foster child may possess or have access to when such limitations are considered to be in the foster child's best interests.

#### **7.708.69 Confidentiality of Records and Reports**

A. The certifying authority shall have a policy as to the maintenance, storage and confidentiality of records.

B. Records shall be the property of the certifying authority and shall be protected against loss, tampering, or unauthorized use.

C. Facts learned about foster children and their families shall be kept confidential, with the following exceptions:

1. In medical emergencies, and then only when the assistance and/or expertise is required of that unauthorized person; or,
2. The foster child, his/her parent(s) or guardian(s) and their respective legal counsel(s), a court having jurisdiction over the foster child, or an authorized public official, or certifying/licensing representative in performance of his/her mandated duties; or,
3. If the parent(s) or guardian(s) has given voluntary, written consent.

## **7.709 RULES AND REGULATIONS FOR SPECIALIZED GROUP FACILITIES**

All Specialized Group Facilities must comply with the "Quality Standards for 24-Hour Child Care" as well as the Rules Regulating Specialized Group Facilities and the "General Rules For Child Care Facilities.

### **7.709.1 DEFINITIONS**

- A. The specialized group facility is sponsored and supervised by a county department or a licensed child placement agency (henceforth to be known as the agency) for the purpose of providing 24-hour care for five or more children, but fewer than 12 children from three years old to sixteen years old and for children from 16 to 18 years old and those persons 21 years old who are placed by court order prior to their eighteenth birthday whose special needs may best be met through the medium of the small group. The two types of specialized group facilities are the specialized group home and the specialized group center.

A specialized group home is located in a house owned or otherwise controlled by the group home parents who are primarily responsible for the care of the children and reside therein.

A specialized group center is located in a house owned or controlled by a governing body that hires the group center parents or personnel who are primarily responsible for the care of the children.

The Governing Body is the individual, partnership, corporation or association in whom the ultimate authority and legal responsibility is vested for the conduct of the specialized group center and the center's relationship with the supervising agency.

- B. A specialized group facility may accept children five years old and over in an emergency for a short period of time. Special rules necessitated by the emergency placement regarding intake, records, placement planning and staffing are found at Section 7.709.26.
- C. No more than two children less than five years old may be cared for in a specialized group facility at one time.
- D. In specialized group facilities licensed after 5/1/84, the number of natural and relative children less than sixteen years old of the caretaker plus the foster children shall not exceed twelve children.

### **7.709.2 REQUIREMENTS FOR THE OPERATION OF SPECIALIZED GROUP HOMES OR SPECIALIZED GROUP CENTERS**

#### **7.709.21 Personnel Qualifications and Role of a County Department of Social Services or a Licensed Child Placement Agency to Establish and Supervise a Specialized Group Home or Center**

- A. The Specialized Group Home or Center shall be supervised by a paid staff member of the agency who holds a Master of Social Work degree or a master's degree in behavioral science with an emphasis in child development and/or family relations and a minimum of two years paid full time

or equivalent part-time experience in social work; or if the staff member does not have the aforementioned education and experience, then he/she must have a bachelor's degree with a major in social work, sociology, psychology or closely related field and be directly supervised by an agency staff member holding the master degree and experience described above.

- B. In establishing a new group home or center the agency shall, with the group home parents or governing body, complete a financial feasibility study reflecting actual and realistic cost factors as well as adequate resources to insure its ongoing operation.
- C. A statement of purpose and function which includes a description of the characteristics of the youth population which is to be served by the facility shall be written by the agency and the group home parents or the group center governing body.
- D. The agency and the group home or center parents or personnel shall develop and adhere to written policies and procedures regarding the care of children which shall be reviewed annually and shall include the following:
  - 1. Provision for emergency procedures including illness, accident, fatality and fire.
  - 2. Participation in potentially dangerous recreational activities which include but are not limited to the use of such equipment as trampolines, trail bikes, snowmobiles, boats, body-building equipment and such activities as archery, riflery and horseback riding.
- E. The group home or center parents or personnel and the agency shall develop and adhere to written policies and procedures regarding personnel including: pay (when appropriate), provision of relief time and vacation time, annual performance evaluation, training opportunities, selection of personnel and maintenance of personnel records.
- F. The agency staff member who supervises the group home or center shall obtain, provide and/or coordinate the following services:
  - 1. Group and/or individual counseling for children in care and their families.
  - 2. For each child, long range, intermediate and short term goals shall be established and a case plan written. The goals and case plan must include a plan for discharge and must be developed and evaluated pursuant to regulation Section 7.714.70, D. Goals and case plan for children three and four years old shall be evaluated monthly.
  - 3. Records for the home or center as required in Section 7.709.27.
  - 4. Psychiatric, psychological or developmental evaluations and consultations as required.
  - 5. Specialized educational resources as required.
  - 6. All necessary legal representation of child.
  - 7. Consultation with the home or center parents or personnel about methods of work with the children.
  - 8. Assessment of quality of care with the home or center parents or personnel.
- G. The agency staff member shall meet with the group home or center parents or personnel a minimum of two hours per week exclusive of counseling services, to discuss individual children, problems, program and/or special needs.

- H. The agency shall ensure that adequate records be maintained about group home or center income and expenses, the provision of clothing, allowances, dental and medical services and medicine.

**7.709.22 Character, Suitability and Qualifications of Group Home or Group Center Parents or Personnel**

- A. The group home or group center parent's or personnel's own children shall not have been placed in foster care or a residential treatment facility under circumstances tending to show that the parent is unable or unwilling to care for his/her own children unless the placement was primarily for such reasons as the physical illness of the parent, mental retardation or physical handicap of the child or the relinquishment of an infant child for adoption.
- B. The group home or group center parents or personnel shall be able to demonstrate through satisfactory past experience and references the ability to provide for the proper physical, mental and character development of children in care.
- C. The group home or group center parents or personnel shall demonstrate stability in family or marital relationships, where applicable, within the home where the care is to be provided.
- E. The group home or group center parents or personnel appointed after 5/1/84 shall hold a high school diploma or General Equivalency Diploma (GED).
- D. The group home or group center parents or personnel shall not be less than 21 years of age, shall be appropriate for the age of children in care and shall possess the adequate physical stamina to care for children. An individual such as the son or daughter of the group home or group center parents, who is well acquainted with the children in care and is between the ages of 18 and 21 years old may be a child care personnel and assist in the care of the children with the approval of the agency
- F. Children of the group home parents or group center parents or personnel and any other persons not placed by the agency and living in the group home or group center shall obtain a physical examination annually or as required in writing by an approved health care professional.
- G. The group home or group center parents or personnel shall include at least one primary caregiver who is a full-time employee of the facility, provides some direct care for children, supervises other child care personnel and holds major responsibility for child care.
- H. The primary caregiver shall have had verifiable working experience with children of the age to be cared for in the group facility. Such experience shall be from one or more of the following:
1. One year of experience as a foster home parent.
  2. Two thousand hours work experience with children of the age to be cared for in the group facility.
  3. One year of experience as a child care worker in a residential facility for children.
  4. The group home primary caregivers who have not previously received 12 hours of "core" training shall receive 12 hours of training within the first 12 months following the submission of the applications.
- I. Other child care personnel in the group center or group home shall be supervised by a primary caregiver.
- J. The group home or group center parents or personnel who are the primary caregivers appointed after

5/1/84 shall be evaluated by a board-eligible psychiatrist, a certified psychologist or a Licensed Social Worker II, and shall obtain a statement from the evaluator which describes the person's ability to provide affection, discipline, role modeling and care for the type of children to be placed in the home or center and any existing condition which may jeopardize the health or well-being of children or impair the care of the children.

- K. The licensing or certifying authority must receive at least three statements which describe the primary caregiver's character and ability to provide care for children from references, provided by the primary caregiver, who are not related to the caregiver and have known the caregiver one year or longer. References need not be residents of Colorado.
- L. References shall be obtained by the group home or center for other personnel. References shall be kept on file at the facility or the agency.

#### **7.709.23 Physical Requirements for a Safe and Adequate Specialized Group Facility**

- A. The following shall be required of each specialized group care facility:

1. In facilities licensed after May 1, 1984, all furnaces shall be separated from living areas by one-hour fire resistive material, provided with adequate outside combustion air, installed and maintained with safety devices to prevent fire, explosions and other hazards. The space around the furnace shall not be used for storage.
2. Electrical wiring systems throughout the facility shall be in good repair. There shall be no three-way plugs or extension cords in use. There shall be no exposed wiring.
3. Household materials which may be dangerous to children, such as matches, plastic bags, cleaning and laundry supplies as well as household tools and equipment which may present a danger to children, shall be stored out of their reach when appropriate.
4. In each facility licensed after May 1, 1984, there shall be at least two approved, alternate, widely separated means of egress from each floor of the building to safe and Open space at the ground level.
5. No lock or fastening to prevent free escape from the inside of any room or building used by the children shall be permitted. Exit door hardware shall be of the single-action type.
6. Exit doors shall be obvious, and where this is not so, exit signs shall be installed.
7. The local fire department shall determine the adequacy of exits and other measures for life safety in accordance with the requirements of the Uniform Building Code and the National Fire Protection Codes. In cases of practical difficulty or unnecessary hardship, the local fire department may grant exceptions from the Uniform Building Codes or the National Fire Protection Codes, but only when it is clearly evident that reasonable safety is thereby secured.
8. When smoking within the facility is permitted, smoking areas shall be designated.
9. In new facilities licensed after May 1, 1984, any accessible areas beneath stairways shall be enclosed with one-hour fire-resistant material.

- E. Living areas for children in a specialized group home or center shall include:

1. Separate sleeping rooms for boys and girls. In sleeping rooms that accommodate two to four children, 60 square feet of floor space per child shall be provided. There shall be no more



than four children in any bedroom. Each room for single occupancy shall have a minimum of 80 square feet of floor space. Closet space and drawer space for personal items sufficient for the occupants in each sleeping room shall be provided.

2. Each child shall be provided suitable sleeping facilities consisting of individual beds or bunks complete with mattresses in good repair and constructed so as to facilitate cleaning while in use by residents, and upon each change of occupancy. Single beds shall be spaced not closer than 36 inches laterally or end to end. Triple-deck bunk facilities are prohibited. Beds being used by children shall have a mattress cover, clean sheets, pillows and pillowcases and blankets as appropriate.
  3. Sleeping rooms above or below the floor of exit travel shall not be used for sleeping purposes for children who have physical handicaps which limit mobility. Children less than eight years old shall sleep on the same floor as the group home or center parents or personnel. Children under 12 years of age shall not be permitted to sleep in a detached structure unless a responsible person sleeps in the same structure.
  4. Bedrooms, separate from those used by children, shall be provided for the group home or center parents or personnel who sleep at the facility.
  5. Facilities shall provide living areas of no less than 35 square feet per occupant of usable indoor space exclusive of halls, baths and sleeping areas which shall be available for such things as dining, recreation, reading, visiting. Interior walls and ceilings shall be constructed of solid material and shall be in good repair.
  6. There shall be a ratio of at least one toilet, lavatory and bathtub or shower for every six foster children living in the home or center. Toilet, lavatory and bath or shower facilities shall be in the same building(s) as the children's sleeping quarters and shall be accessible from the inside of the building.
  7. There shall be a towel rack for each child in residence in bathroom or bedrooms.
- F. The group home or center's kitchen shall be equipped with the following:
1. Adequate space for receiving, storage and refrigeration of food.
  2. Adequate space for eating in kitchen or adjacent room for all children to eat at the same time.
- G. The facility must have laundry facilities with adequate storage for linens.
- H. The group home or center, if located in the same building as or immediately adjacent to other residential facilities such as another group home or center, an adult treatment center or a nursing home, shall be so arranged that the care and activities of the children residing in the group home can be completely separate and independent from the other residential facility. No group home or center shall be used for purposes of a rooming or boarding house. A specialized group facility may not be operated adjacent to or on the premises of a business of a nature which might be hazardous to the health, safety, morals or welfare of children and the operation of the specialized group facility. The group home or center shall house only unrelated children of the ages mentioned on the license or certificate and of the type described in the statement of purpose. The facility shall not also be used by unrelated adults.
- I. Mobile homes shall not be used for group homes or centers.
- J. When a swimming pool is provided, it shall meet the requirements of the Colorado Department of Public Health and Environment or its local unit. Safety precautions shall include protective

fencing, a nonskid surface of at least four feet adjoining poolsides, and winter coverage which shall exclude plastic or inflatable-type domes. A certified lifeguard shall be in attendance at all times when the pool is in use.

#### **7.709.24 Care of Children**

A. Group home or group center parents or personnel shall provide supervision and care appropriate to each child's age, level of development, ability to accept independence and responsibility, and according to the group home or group center's policies, procedures and the child's case plan.

1. The group home or group center parents or personnel shall know the intended whereabouts of each child in care at all times.
2. Children less than 14 years old shall not be left without adult supervision in the home or center. Children over 14 years old may be allowed to stay alone occasionally for short periods of time in the home or center pursuant to a case plan and the facility policy.
3. Children who are less than 16 years old who are sleeping away from the group home or center, such as during a camping trip or a slumber party, must have adult supervision.
4. When all the children are away from the group home or center, the adult parent or personnel on duty may be away from the home or center for short periods of time.

B. The following staff pattern shall be maintained:

1. If the primary caregiver is married, one spouse may be working full time outside the home or center. The spouse or one child care personnel shall assist the primary caregiver during times when the number and/or needs of the children require additional supervision as determined by the group facility and the supervising agency; or,
2. If the primary caregiver is single, she/he must be at the home or center full time. There shall be one child care personnel assisting the primary caregiver during times when the number and/or needs of children require additional supervision as determined by the group home and the supervising agency; and,
3. A relief staff member who is knowledgeable about the policies and practices of the home or center shall be available to provide child care when the primary caretaker is gone from the home and as determined by the group home or center and supervising agency. An adult shall be available in the event of an emergency; or,
4. If the group center has rotating staff, there shall be at least one child care personnel on duty during each shift. The primary caregiver shall work together with the other child care personnel to provide modeling and supervision for at least 16 hours a week during the hours the children are at the facility.
5. If the group home or center and supervising agency determine that additional personnel are necessary, a mutually agreed upon written plan for staffing the group home shall be followed.

C. Health Care, Hygiene, Meals, Safety

1. There shall be a written agreement with a health care facility or medical personnel who has agreed to provide emergency medical care to children in the group home or center.
2. Necessary medical care shall be obtained pursuant to the policy and procedures of the group

home or center.

3. Menus shall be kept for at least a two-week period, and there shall be a documented review periodically by a qualified nutritional consultant.
4. One group home or center parent or personnel shall be responsible for meal planning, and a parent or personnel shall be assigned responsibility for food preparation for each meal. Children may help when appropriate.
5. Only pets permitted by local codes are acceptable at the group facility. Pets shall be housed, cared for and vaccinated according to health department regulations and other local codes. Precautions shall be taken as required to ensure both safety and good hygiene. Children shall not be permitted to mistreat animals. Animals shall not be permitted to eat in kitchen or eat from dishes in which food is prepared, served, stored or from which it is eaten.
6. An evacuation plan shall be posted in a conspicuous place.

#### D. School and Recreation

1. Regular school attendance is required for each child according to school attendance laws. A suitable, quiet, well-lighted place for study shall be provided together with necessary books, papers, pencils and other equipment which is reasonably required by school-age children.
2. Outdoor and indoor recreational equipment and materials shall be provided in sufficient variety and quantity to offer some choice of activities. Games, toys, equipment and arts and craft materials shall be selected according to age, number of children, and with consideration of the needs of children to engage in both active and quiet play. All equipment and materials shall be of quality to assure safety, and shall be of a type which allows for imaginative play and creativeness.

#### **7.709.25 Required Records**

There shall be a personnel file maintained for each parent or personnel by the facility or the agency. The file shall include identifying information, references, statement from physician or qualified nurse practitioner, name and telephone number of person to contact in emergency, and verification of education and experience. The personnel file for the primary caregiver shall include a statement from a psychiatrist, a certified psychologist or a Licensed Social Worker II. The personnel records shall be maintained pursuant to the personnel policy and procedures. If personnel records are at the agency office, there shall be maintained at the facility the address, local phone number and name, address, and phone number of persons to call in an emergency.

#### **7.709.26 Special Rules for Emergency Placement and Care of Children**

- A. Emergency placement indicates that due to circumstances beyond the agency's control a child needs placement, yet pre-placement admission requirements have not been completed. The acceptance of a child in such an emergency status shall only be done if it is a part of the admission policy and procedures of the facility.
- B. During placement at the facility as much evaluation of the child shall be completed as possible and as is necessary for future planning for the child. As much data as possible shall be collected pursuant to the admission record.
- C. A specialized group facility which accepts only children by emergency admission shall have on duty

one child care personnel for each six children or fraction thereof at the facility during the daytime and swing shift. One child care staff member will be sufficient during sleeping hours.

- D. Information gathered at the time of emergency placement and during placement shall become part of the child's file. The file shall also include the date the child was discharged from the facility, to whom the child was released, and a description of the physical condition of the child at the time of discharge.
- E. A specialized group facility operating as a shelter care facility or which accepts only children by emergency admission shall make every effort to assure that emergency placements do not exceed sixty days. Exceptional circumstances must be documented in the case file for any placement lasting over 60 days. Reimbursement at the shelter care rate shall not exceed 90 days.

## **7.710 RULES AND REGULATIONS FOR CHILD PLACEMENT AGENCIES**

All child placement agencies shall comply with the "General Rules for Child Care Facilities" , "Rules Regulating Family Foster Care Homes" , and "Rules and Regulations for Child Placement Agencies" .

### **7.710.1 DEFINITIONS**

- A. A "child placement agency (CPA)" means any corporation, partnership, association, firm, agency, institution, or person unrelated to the child being placed, who places or who arranges for placement for care, any child under the age of 18 years with any family, person, or institution for the purpose of adoption, treatment, or foster care. The natural parents or guardian of any child who places said child for care with any facility licensed as a "family care home" or "child care center," as defined by this section, shall not be deemed to be a CPA.
  - 1. Any agency from out of state placing a child within Colorado must be licensed as a CPA by the Colorado Department of Human Services (the Department) unless the placement services are coordinated with and provided by a county department of social services or a CPA licensed by the State of Colorado.
  - 2. A CPA may not be operated without a license, as required by law, which license is to be issued by the department in conformity with all rules and regulations contained within Section 7.710.
- B. "To arrange for placement" means to act as an intermediary by assisting a parent or guardian or legal custodian to place or plan to place a child with other than persons related to the child for the purpose of foster care or for the purpose of adoption.
- C. A "multi-service agency" is an organization that provides additional community services and programs other than foster care and adoption.
- D. A "program director in a multi-services agency" is the person responsible for overseeing the foster care and/or adoption program of the organization.
- E. "Relative" , except as used in the definition of foster care home, means any of the following relationships by blood, marriage, or adoption: parent, grandparent, son, daughter, grandson, granddaughter, brother, sister, stepparent, stepbrother, stepsister, stepson, stepdaughter, uncle, aunt, niece, nephew, or cousin.
- F. "Social and behavioral sciences" includes sociology, psychology, social work, criminal justice, human services, human development, and counseling.

### **7.710.11 Statement of Policy and Purpose**

It is the policy of the Department to ensure that agencies which engage in the business of placing children in homes or institutions shall have as their primary objective and concern the health and well-being of such children. It is also the obligation of the Department to prescribe standards designed to protect the legal rights of the child in placement.

In adoptive placement, the policy of the department is to protect the rights of child, birth parents, and adoptive parents and to insure that any adoptive placement is in the best interests of the child.

### **7.710.2 MINIMUM STANDARDS FOR OPERATION OF CHILD PLACEMENT AGENCIES**

#### **7.710.21 Governing Body**

- A. The governing body shall be the corporation, partnership, association, firm, agency, institution or person in whom the ultimate authority and legal responsibility is vested for the conduct of the CPA.
- B. The governing body shall be identified by its legal name. If the governing body has a board of directors, the names of the officers of the board shall be transmitted to the department.
- C. The governing body of the CPA shall:
  - 1. Maintain the written purpose and policies for the general operation and management of the agency. When such purpose and policies are reviewed and revised, the department shall be advised of such changes. The purpose and policies as a minimum shall include:
    - a. Statement of purpose of the CPA as to what type of placement of children in which the agency intends to engage, the geographic area the agency expects to serve, the ages of children to be placed, and any other specific factors regarding the children to be placed or the homes in which the children shall be placed.
    - b. Personnel policy.
    - c. Foster care policy.
    - d. Adoption policy which includes types of adoption in which the agency will participate and policy and procedure for each adoption program.
    - e. Fee policy.
  - 2. Be responsible for the protection of the legal rights of children served by the CPA.
  - 3. Be responsible for approval of budget, obtaining funds and dispersal of funds.
  - 4. Appoint an executive director who meets requirements of Section 7.710.23 and be assured that staff members responsible for placement of children and/or certification of foster homes meet the requirements as stated in Section 7.710.23. The department shall be informed in writing when there is a change in the executive director of the CPA.
  - 5. Inform the department in writing of each agency office or change of agency office in which child placement is carried out at that location. The CPA shall inform the State Department in writing of the hours of operation that each CPA office is open each week and available for inspection of CPA records.

6. Inform the department in writing of any legal action brought against the CPA which affects any child or children in care, personnel or conduct of the CPA.

D. The governing body shall be responsible for completing the licensing renewal requirements by:

1. Completing and submitting the license renewal application at least 90 calendar days prior to the annual expiration date of the child placement agency license; and,
2. Completing, signing and submitting the required verification of compliance form; and,
3. Paying the prescribed fee pursuant to Section 7.701.4; and,
4. Cooperating with on-site monitoring visit(s) to assess the agency's compliance with the rules for child placement agencies.

#### **7.710.22 Financial Operation**

- A. Each CPA shall develop an annual budget reflecting anticipated income by source and expenses by purpose, plus an accompanying balance sheet, which demonstrates that the CPA has assured resources to carry out its defined purpose. The budget shall be approved by the Board of Directors. The first year's budget shall be submitted with the original license application.
- B. The purpose of these requirements is to provide assurance the CPA has adequate accounting and budgeting information available to allow management to maintain a financially viable enterprise and to demonstrate financial accountability to the County and State Departments of Human Services for the use of public funds.

Each CPA must have a double entry accounting system and all financial transactions must be posted to this system. Financial statements, prepared from information provided by this system, shall be presented in conformity with U.S. Generally Accepted Accounting Principles (GAAP). Books and records of the CPA shall be subject, at any time the CPA office is open, to inspection, audit or copying by appropriate Federal, State or county personnel, or such independent auditors or accountants as may be designated by these personnel.

#### **C. Annual Audits**

Each CPA whose total annual foster care or adoption expenditures are \$100,000 or more shall provide for an annual audit by an independent Certified Public Accountant in accordance with appropriate generally accepted auditing standards. CPAs with less than \$100,000 total annual expenditure may submit an audit as described above or may submit compiled or reviewed financial statements, prepared in accordance with generally accepted accounting principles.

1. Every CPA shall submit supplementary information as prescribed by the state on the required supplementary information form and the administrative expenses for foster care as defined by the State Department.
2. The supplementary information submitted shall contain an affidavit signed by the CPA's Executive Director and an officer of its board attesting to the authenticity of the information. Submission of falsified information shall be grounds for suspension of the CPA license.
3. The audit and supplementary information shall be submitted to the Department within 6 months of the CPA's fiscal year end.
4. CPAs that are a subsidiary of a parent organization must submit separate audited financial

statements for the subsidiary that detail each of the CPA's facilities and/or programs that provide services for the State or county department.

5. If a CPA does not submit its annual audit or refuses to disclose financial information regarding the operation of the program in a timely manner, the State may send notice to withhold payment until the audit and/or requested information is submitted.
6. Upon receipt of adequate written notice that a county department or the State Department plans to recover or withhold unallowable or misused funds from a CPA, a CPA may file a written request for review of the decision with the State Department.
  - a. The written request for review must be submitted within 30 calendar days of the receipt of the notice to recover or withhold the misused funds.
  - b. The State Department shall convene a review committee to review the written request from the CPA. The committee shall consist of three members representing:
    - 1) the State Department's Child Care Division; and,
    - 2) the State Department's Child Welfare Division; and,
    - 3) an independent representative of an auditor from another State department or a certified independent accountant referred from the Colorado Society of Certified Public Accountants.
  - c. The State Department reserves the right to receive legal consultation regarding the written request for review.
  - d. The review committee shall review all relevant information and make a decision within 60 calendar days of the receipt of the request.
  - e. The review committee shall send its findings to the Executive Director of the State Department or his/her designee, who shall make the final agency decision for the State Department.

#### D. Allowable Expenditures

1. A Child Placement Agency expenditure shall be allowable if it meets all of the following criteria:

- a. Reasonable

The expenditure is reasonable in nature or amount and does not exceed the cost that would be incurred by a prudent person under the circumstances prevailing at the time the decision was made to incur the cost.

- b. Ordinary and Necessary

The expenditure is of a type generally recognized as ordinary and necessary for the operation of a CPA or the performance of a contract for CPA services.

- c. Prudent

The individuals concerned acted with prudence in the particular circumstances, considering their responsibilities to the CPA, its employees, clients, foster families, foster children, the public at large, the State and the CPA's

responsibilities pursuant to the contract for services, and must not be contrary to Federal or State law.

d. Documented

An expenditure must be adequately documented.

e. Made in Accordance with GAAP

An expenditure must be recorded in accordance with generally accepted accounting principles (GAAP).

## 2. Generally Allowable Expenditures

The following list of expenditures shall be a general list of expenditures that would be permissible for CPAs to incur in order to further the goals and objectives of their agencies. This list includes, but is not limited to, the categories described below, and shall be used as a reference for guiding the expenditure of CPA funds.

When a specific expenditure is not listed in the table below, yet management deems it to be in the best interests of the CPA to make the expenditure of the funds, then the criteria in the table above for an allowable expenditure shall be followed. Every attempt shall be made by the CPA to document the purpose of the expenditure so that a "reasonable person" test can be made in the event the expenditure is audited. Each CPA shall allocate expenditures in accordance with its internal policies.

- a. Salaries and Wages, and related benefits, employment taxes, unemployment taxes, worker's compensation taxes, retirement benefits, and insurance benefits.
- b. Retention and recruitment of staff, contractors, foster care parents, and volunteers, including advertising, background checks and other evaluations, recruiting, relocation, recognition, and food bank administrative expenses.
- c. Foster care, including provider reimbursement, respite for foster parents, child enrichment, clothing, health services, therapy, transportation, and other supportive services.
- d. Professional fees, including audit and accounting fees, consulting, legal fees, and other professional fees. These fees must be consistent with what the market would pay if paid to a related party.
- e. Contracted services, including contract labor, human resource services, payroll services, and temporary employment agencies.
- f. Occupancy expenditures, including office rent comparable to given market rates, meeting room rental, electricity and gas, water and sewer, janitorial service, property repair and maintenance, storage unit rent, and waste removal. If the CPA owns the building, then reasonable depreciation shall be allowed based on the estimated useful life of the building.
- g. Depreciation and amortization, based on estimated useful life of the asset, and prorated if the CPA only uses a portion of that asset.
- h. Child care during client meetings, support groups, or training functions.



- i. Training for staff, foster parents, and volunteers, including honorariums and conference registration fees.
- j. Travel and transportation provided that there is some contemporaneous record to support the expense, including airfare, fuel, lodging, meals, mileage, parking, per diem, travel incidentals, vehicle rental, and vehicle repair and maintenance.
- k. Telephone, including cellular and paging, data communication services, and telephone services.
- l. Postage and shipping.
- m. Office services, including coffee, tea, and water.
- n. Printing and supply expenditures, including computer and office supplies, printing, and program supplies.
- o. Dues, memberships, licenses, and subscriptions, including accreditation fees, dues and memberships, licenses and fees, and subscriptions and publications.
- p. Insurance, including automobile, directors and officers, volunteer, general and professional liability commercial packages, and umbrella.
- q. Marketing and promotion, including advertising, booths and fairs, graphics and editorial, and printed material/mailing house.

#### E. Unallowable Expenditures

A CPA expenditure shall be unallowable if it does not meet the criteria specified under the definition of an allowable expenditure as referenced in Section 7.710.22, D.

#### F. Remedies

Remedy for unallowable expenditures may include any or all of the following solutions:

1. Repayment to the State and/or Counties of identified unallowable expenditures.
2. Reclassification of the accounting entry to record the expenditure correctly, if the transaction can be appropriately reallocated to another cost center of the CPA, or affiliated agency, parent company, etc.
3. "Negative licensing action" which could result in the denial, suspension, or revocation of a license issued, pursuant to the Child Care Licensing Act or the demotion of such a license to a probationary license.
4. Any other appropriate remedy based upon the facts and circumstances of the unallowable expenditure.

#### G. Intentional Mis-Use of Funds

Intentional mis-use of funds implies that the individual(s) making the expenditure decision had deliberate, willful, and intentional disregard for the fiduciary responsibility for how public funds are to be used for purposes of placing children in foster care or adoptive homes, or arranging for the placement of children in foster care or adoptive homes, considering their responsibilities to the CPA, its employees, clients, foster families, foster children, the public at large, the State and the

CPA'S responsibilities pursuant to the contract for services.

These rules do not preclude the State and/or county department(s) from pursuing other remedies available at law; for example:

1. Referral for prosecution; or,
2. referral to the Internal Revenue Service for issues that violate Internal Revenue codes; or,
3. Repayment to the State and/or counties of identified unallowable expenditures; or,
4. "Negative licensing action" which could result in the denial, suspension, or revocation of a license issued, pursuant to the Child Care Licensing Act, or the demotion of such a license to a probationary license.

### **7.710.23 Personnel Requirements**

A. Each CPA shall have staff members in sufficient number to meet the needs of individuals served. Such staff members shall meet the following requirements:

1. The executive director or in a multi-services agency, the program director, shall possess a knowledge of the type of child welfare services in which the CPA engages and shall be able to demonstrate administrative skill and leadership qualities. Any executive director hired after the promulgation of these rules must have graduated with a Bachelor's degree from an accredited college or university with a minimum of thirty semester credits or equivalent quarter credits in the social or behavioral sciences, shall have at least five years' full time or equivalent part time work experience in an administrative capacity, at least two of which included staff supervision and budget or fiscal management; or must have graduated with a Master's degree or greater from an accredited college or university with a minimum of thirty semester credits or equivalent quarter credits in the social or behavioral sciences, and have two years full time or equivalent part time work experience in an administrative capacity, all of which must have included staff supervision and budget or fiscal management.

Administrative capacity includes, but is not limited to, policy and procedure development and implementation, strategic planning, budget responsibility, fiscal management, quality assurance, networking, human resources management, program development and oversight, and business management.

The Executive Director must have at least nine semester hours or equivalent quarter hours in business or finance classes; or 18 months previous work experience, including budget responsibility and fiscal management.

The State Department must receive at least three written statements from individuals unrelated to the applicant, at least one of whom has been the employer or supervisor of the applicant, which describes the executive director's character, reliability, knowledge of child welfare services and ability to perform the tasks of the executive director as outlined in the duties of the Executive Director at Section 7.710.26, A. If the executive director or in a multi-service agency, the program director, is also to have responsibility for placement supervision, she/he shall also meet the requirements for placement supervisor as set forth in Section 7.710.23, A, 2.

2. Placement supervisors shall have a master of social work degree or a master's degree in the social or behavioral sciences. If the placement supervisor has a Master of Social Work degree, the placement supervisor must have a minimum of two years (3640 hours) full-

time or equivalent part-time experience in social work, some of which must have included child placement. If the placement supervisor is not qualified by a Master of Social Work degree, the individual must have a minimum of two years (3640 hours) full-time or equivalent part-time experience in child placement. The two years experience in child placement shall have been supervised by a person holding a Master of Social Work degree, a licensed professional counselor, a licensed marriage and family therapist, a licensed clinical social worker, or licensed psychologist. The agency shall obtain at least three written statements from individuals unrelated to the applicant, one of whom has been the employer or supervisor of the applicant, which describes the character, reliability, knowledge of child welfare services and the ability to perform the tasks of the placement supervisor as outlined in the duties for that position at Section 7.710.26, B.

3. If additional placement workers are necessary to fulfill the placement responsibilities of the agency, such workers, if not qualified as the placement supervisor, as a minimum shall be supervised by a qualified placement supervisor and hold a bachelor degree in the social or behavioral sciences. If an individual has a Bachelor's degree in a non-related field, he/she shall have at least two years experience supervised by an individual with a Master of Social Work or other Master's degree in the social or behavioral sciences.

B. There shall be sufficient clerical staff to comply with record keeping, bookkeeping and reporting requirements as necessary.

C. Paraprofessionals or trainees may assist qualified placement workers, but may not assume primary responsibility. Qualifications shall be stated by the CPA.

#### **7.710.24 Personnel Policy**

A statement of personnel policy shall be made available to each employee or qualified applicant. This statement shall, as a minimum, contain the following information: a job description which outlines the duties, responsibilities, qualifications and educational requirements for the position of the placement supervisor and/or placement worker.

#### **7.710.25 Personnel File**

A. A personnel file with official transcripts from the college or university shall be maintained for the executive director, the placement supervisor(s) and placement worker(s) and shall be available to authorized representatives of the Department.

B. Each file shall include:

1. Employment application showing qualifications and experience.
2. Statements obtained from previous employers and personal references.
3. Dates that statements were obtained from previous employers and personal references.
4. Reports of job performance.
5. Medical reports as required in CPA employment practice.

#### **7.710.26 Duties of the Executive Director, Placement Supervisor, Placement Worker, Paraprofessionals/Trainees**

A. The responsibilities of the Executive Director are: human resources management, policy and procedures development and implementation, accountability for being in compliance with

regulations, fiduciary requirements, quality assurance, regulatory compliance and accountability, overall professionalism of the agency, and responsibility for the daily operation of the agency. In a multi-service agency, the program director may have responsibility for administering the adoption and/or foster care unit and may not be responsible for the budget and accounting duties.

- B. The placement supervisor shall be responsible for the certification of foster care homes and the placement of children in foster care homes and/or the study of adoptive families, study of the child for adoption, and the placement of children in homes for adoption. The placement supervisor shall be responsible for the coordination of medical services for the children placed in the care of any facility certified or sponsored by the CPA.
- C. The placement worker is responsible for the monitoring and protection of children, provides case management for individual children, coordinates services for child(ren) and their family and with Department of Human Services, provides monitoring and support to foster homes, may conduct home studies to assess the ability of foster homes to meet children's needs, all under the direct supervision of the placement supervisor.
- D. Paraprofessionals/trainees may complete home assessments of the physical environment for foster homes for compliance with regulations; act as a liaison with courts, schools, foster parents and all peripheral parties under the direct supervision of a placement supervisor or placement worker.

### **7.710.3 CERTIFICATION OF FAMILY CARE HOMES**

#### **7.710.31 Legal Base**

- A. Licensed Child Placement Agencies are authorized Section 26-6-102, Colorado Revised Statutes, to certify foster care homes.
- B. A foster care home certified by a CPA may not accept placements from any source other than the certifying CPA as to each such child, unless the certifying CPA gives written consent and approval for the placement.

#### **7.710.32 Minimum Regulations**

##### **A. Operation**

The regulations for operation of a foster care home or a family child care home shall be met before a CPA certificate for such a facility can be issued.

##### **B. Certification**

The law states that certificates issued by placement agencies are considered licenses; the regulations which are established by the department for foster care homes or family child care homes are therefore applicable to any such facility being certified by a licensed CPA. Copies of these rules shall be made available to each applicant for certification and to each foster care home.

##### **C. Conflict of Interest**

1. Staff members or members of the governing board or relatives of staff members or relatives of any officer, executive or member of the governing board of a CPA shall not be certified by the CPA to operate a foster care home.
2. No owner, officer, executive, member of the governing board, or employee of a CPA or any relative of said owner, officer, executive, member or employee shall hold a beneficial

interest in any property operated or intended to be operated as a foster care home when the property is certified by the CPA as a foster care home.

### **7.710.33 Application and Inspection for Certification of Foster Care Homes**

- A. Any application accepted by the CPA from an individual(s) or couple who wishes to be certified to operate a foster care home shall be on the Department approved form and shall include:
  - 1. The names and addresses of child placement agencies and county departments of social services that had previously certified the applicant. Information as to whether the applicant has been licensed or certified for child care in the past or is licensed or certified for child care at the time of the application, what agency issued the certificate or license, and the type of child care the license or certificate authorizes.
  - 2. Information about an applicant or individual living in the proposed foster care home who has been convicted of a felony or charged or convicted of child abuse or an unlawful sexual offense.
  - 3. Include a statement on the application for certification as a foster care home that states:

“Any applicant who knowingly or willfully makes a false statement of any material fact or thing in this application is guilty of perjury in the second degree as defined in Section 18-8-503, C.R.S., and, upon conviction thereof, shall be punished accordingly.”
- B. No application shall be accepted from an individual who is currently certified by another county or CPA to operate a foster care home until that individual has terminated the certification by the other county or CPA.
- C. No board member, director or staff member of a CPA shall contact or recruit foster homes currently certified by another county department or CPA.
- D. A CPA must take an application from an applicant(s) before the CPA has authority to complete the family assessment, background checks, and training.
- E. An applicant may apply for a dual certificate to operate a family child care home as well as a foster care home. Both sets of standards shall be met. The CPA shall counsel the family if it believes such a certificate is not in the best interest of any child who may be placed in the home. The CPA shall approve placement of each child in the home for either foster care or for day care.
- F. A CPA shall conduct a reference check of each applicant by contacting all of the previous certifying authorities listed on the application before issuing the certification for that foster care home. The CPA shall sign an affidavit that, after reviewing all previous certifying information, certification is appropriate.
- G. After the application is received, each applicant listed on the application must complete a minimum of twenty-seven (27) hours of initial training consisting of at least 12 hours of core training prior to the certificate being issued and completion of the remaining training within three months after the placement of a child. The training shall be provided through the statewide core curriculum training, by the CPA, or by a county department. The core training shall include the following ten primary topic areas:
  - 1. General overview of foster care
  - 2. Administrative and legal issues

3. Why children get placed in out-of-home care
4. Parenting and family dynamics
5. Key concepts of child growth and development
6. Importance of the team approach
7. Individual differences such as ethnicity and culture
8. Discipline
9. Effects of fostering on the foster family
10. Working with the biological family

If the twenty-seven hours of initial training is not completed prior to the certificate being issued, the remaining training must be completed as identified in each foster parent(s)' training development plan as required at 7.708.65, B. This rule does not apply to foster homes certified for adoption placements; it only applies to initial applicants for family foster home certification on or after June 1, 2001, which is the effective date of implementing legislation.

H. After the application is received and prior to the certificate being issued, a family assessment using the Structured Analysis Family Evaluation (SAFE) instrument(s) to determine the character and suitability of the applicant(s), appropriateness of the home, and child care practices must be completed.

1. An assessment of character and suitability must include at least a review of the State Department's automated system as to applicants and persons who reside in the home of the applicants with written consent of the individuals. Statements from references and physician must be obtained. A review of all existing child placement agency and county department case records including the automated system must be completed. An investigation of any concerns raised from the application and/or the aforementioned sources of information and a personal assessment of the applicant must be conducted.
2. The agency will require any applicant or any person 18 years of age or older who resides with the applicant in the foster care home to submit a complete set of fingerprints taken by a qualified law enforcement agency. The fingerprints and appropriate processing fee must be submitted to the Colorado Bureau of Investigation (CBI) to obtain any record of arrest or conviction which is held by the CBI.
  - a. The agency must send an applicant card (FD 258) to the individual required to provide fingerprints. The fingerprints must be taken by a police or sheriff's department. The individual must send the card to the CBI with a certified check or money order for the amount of the current processing fee. The CBI report must be sent to the child placement agency certifying the foster home.
  - b. A certificate cannot be issued to a foster care home until the fingerprints and current processing fee are submitted to the CBI and a clearance or hit/match is received from the CBI. If a hit/match with a criminal history arrest is received, the formal court disposition must be received and reviewed before a decision is made to issue a certificate.
3. A family assessment using the Structured Analysis Family Evaluation (SAFE) instrument(s) to

determine the character and suitability of the applicant(s), appropriateness of the home, and child care practices must be completed. The assessment shall include, but not be limited to, the following:

a. Social History/Background (Adults and Children)

Separate and joint interviews with the applicant(s), all adults residing in the home both related and non-related to the applicant, and all children residing in the home regarding at least significant events in family background, evaluation of applicants' knowledge and capacity to care for children, and ability to maintain long term relationships and life changes including issues of grief and loss. Interviews with children must be age appropriate.

b. Current Status of the Family (Family System/Lifestyle)

Marital relationship, interrelationships with significant persons outside the nuclear family, lifestyle changes, methods of decision making, parenting/child rearing, methods of discipline, religion, finances, extended family, child care plan in the event of emergency and/or when parents work away from the home; assessment of any children in the home; an assessment of the family's interest and ability to meet the special needs of a child, including financial responsibility; assessment of ability to accept legal risk placement; and, assessment of family's strengths, including individual/family strengths and self-esteem.

For kinship care, ability to meet the individualized needs of the specialized child(ren) and assessment of the relationship with birth parents and extended family; members as they impact capacity of the applicants to care for the child(ren).

c. Motivation for a Child

Include a discussion of the child to be placed, attitudes toward foster care/adoption by applicants, other adults residing in the home, children and others such as extended family and discussion of fertility, if relevant. Assess the physical, mental, and emotional capability of the applicant(s) to parent a child(ren) and the ability to reevaluate and readjust expectations.

d. Transracial and Transcultural Assessment

Applicants fostering/adopting a child of a different ethnic and cultural background shall preserve continuity of the child's ethnic and cultural identity in a positive manner. Factors shall include, but are not limited to, consideration of the child's family, community, neighborhood, faith or religious beliefs, school activities, friends, and child's and family's primary language. Documentation of this requirement shall be in the case file.

e. Child Safety and Well-Being

Address each of the following factors that contribute to or contraindicate potential for abuse:

- 1) Personal history of abuse and beliefs regarding physical punishment.
- 2) Knowledge of child development and expectations of children.

- 3) Coping skills in dealing with anger, frustration, and provocation from children.
- 4) Ability to maintain control when angry.
- 5) Capacity for compassion and empathy.
- 6) Ability to separate own needs and perceptions from those of others.
- 7) Availability of support systems.
- 8) In kinship care, ability to set boundaries with birth parents to maintain safety for the child(ren) in care.

f. Children with Special Needs and/or Disabilities

The applicant's interest, preparation, and willingness to care for a child(ren) with disabilities such as emotional, mental and physical, and the ability to meet the special needs of the child(ren). The home study must include an assessment as to how the child(ren)'s special needs will impact the family and extended family.

g. Relationship with the County Department

Discuss the applicant's ability to work with the child welfare system, court, birth parents, and others in the child's life, including willingness to obtain help from professionals involved.

h. Other Requirements

- 1) Documentation of any previous emotional problems, mental illnesses, substance abuse issues, or marital/relationship problems that may have an impact on the care of a child(ren). Include any factors which would impact the safety and well-being of any child(ren) in the home.
  - 2) The application and medical records must be reviewed; and any issues that are identified be discussed with the applicants. No physical examination shall be required of any person who in good faith relies upon spiritual means or prayer in the free exercise of religion to prevent or cure a disease unless there is a reason to believe such person's physical condition is such that he/she would be unable to care for a child, or such person has a communicable illness.
  - 3) The agency shall not perform a family home assessment on its own staff member, board member, or family member of a staff member or board member.
  - 4) A current photograph of the family shall be requested and maintained in the file.
  - 5) In kinship care, the ability to provide a permanent home through adoption, guardianship or permanent custody.
- i. The agency shall not deny to any person the opportunity to become a foster/adoptive parent on the basis of race, color or national origin of the person or of the child involved.



j. As part of the assessment, the agency must:

- 1) Conduct a minimum of one joint interview with a couple, one individual interview with each adult member of the household and an age/developmentally appropriate interview with all children residing in the home. For single applicants, a minimum of two interviews will be required.
  - 2) Conduct at least one interview in the applicant's home.
  - 3) Spread out Interviews over a period of not less than seven (7) consecutive days.
  - 4) Update the assessment annually in the form of an addendum. An addendum shall include at least one home visit and a review of the current medical status. During each subsequent addendum, applicants shall be questioned regarding any child abuse investigations during the previous year.
4. Following the completion of the assessment, a narrative report must be completed that summarizes and evaluates the information obtained and lists the characteristics of child(ren) the home is approved for. Age, sex, race, legal risk, and special needs (such as medical, physical, behavioral, emotional) and any limitations or restrictions on placement of a child(ren).
  5. If there are additions of new adults to the household, additions of new children to the household, and/or changes in the age, sex, and special characteristics of child(ren) which will be considered for placement with the foster family, a re-evaluation of the family must be completed and the family assessment revised.
  6. An on site home inspection is required to determine its compliance with the Rules Regulating Foster Care Homes and, if the applicant is applying to be dual certified, with the rules regulating Family Child Care Homes. Written documentation of the home inspection shall be in the foster care home file at the child placement agency. Approval of local zoning, health or fire departments must be documented in writing when the situation warrants.
- I. An annual on-site, unannounced, home inspection must be made to the foster care home to determine compliance with the Rules Regulating Family Foster Care Homes and, if the foster care home is dual certified, with the rules regulating Family Child Care Homes. A written report of the supervisory visit must be given to the foster parent and a copy maintained at the child placement agency. A written notice of noncompliance with the regulations will be left with the foster parents or sent to the foster parents within 15 calendar days of the supervisory visit if there is noncompliance. Compliance must be achieved within the time frames indicated on the written compliance notice.

#### **7.710.34 Issuance/Denial of Certificate**

- A. After the completion of the family assessment/home study, one of the following certification actions must be taken:
1. A one year time-limited certificate will be issued when it is determined that the applicant is competent, has completed the necessary training, and has met the Rules Regulating Family Foster Care Homes. The certificate issue date is the date that the assessment/study is completed and the foster home is in compliance with the Rules Regulating Family Foster Care Homes.

2. A provisional certificate may be issued, upon the written approval of the State Department, if the home is temporarily unable to conform to all appropriate regulations upon proof by the applicant that attempts are being made to comply with the appropriate regulations.

The reasons for the issuance of a provisional certificate must be displayed on the certificate. The provisional certificate will be issued for up to 60 calendar days from the date it is determined that time will be needed to comply with the appropriate regulations. Only one original provisional certificate may be issued to a foster care home at one location address.

- B. Upon issuance of the certificate, the child placement agency shall submit data entry information to the department on forms prescribed by the department.
- C. The application will be withdrawn when the applicant no longer chooses to pursue certification.
- D. An applicant shall be denied if the person(s) applying for the certificate has been determined to be insane or mentally incompetent by a court of competent jurisdiction and, should a court enter an order pursuant to Part 3 or Part 4 of Article 14 of Title 15, C.R.S., or Section 27-10-109(4) or 27-10-125, C.R.S., specifically finding that the mental incompetency or insanity is of such degree that the applicant is incapable of operating a family child care home, foster care home, child care center, or child placement agency, the record of such determination and entry of such order being conclusive evidence thereof.
- E. The application must be denied if the person(s) applying for the certificate has been convicted of:
  1. Child abuse, as specified in Section 18-6-401, C.R.S.
  2. A crime of violence, as defined in Section 18-1.3-406, C.R.S.
  3. Any felony offenses involving unlawful sexual behavior, as defined in Section 16-22-102(9), C.R.S.
  4. Any felony, the underlying factual basis of which has been found by the court on the record to include an act of domestic violence, as defined in Section 18-6-800.3, C.R.S.
  5. Any felony involving physical assault, battery or a drug-related/alcohol-related offense within the five years preceding the date of application for a license or certificate.
  6. Any felony offense in any other state, the elements of which are substantially similar to the elements of any one of the offenses described in numbers 2 to 4 of this section.
  7. For the purposes of these regulations, convicted means a conviction by a jury or by a court and shall also include a deferred judgment and sentence agreement, a deferred prosecution agreement, a deferred adjudication agreement, an adjudication, and a plea of guilty or nolo contendere.
- F. The application may be denied for one or more of the following reasons if the applicant(s), an affiliate of the applicant, or any person living with or employed by the applicant(s) has:
  1. Been convicted in Colorado or in any other state of any felony, or has entered into a deferred judgment agreement or a deferred prosecution agreement in Colorado or in any other state to any felony other than those offenses specified in Section 26-6-104(7), C.R.S., or child abuse, as specified in Section 18-6-401, C.R.S., the record of conviction being conclusive evidence thereof, notwithstanding Section 24-5-101, C.R.S.; or,

2. Been convicted of third degree assault, as described in Section 18-3-204, C.R.S., any misdemeanor, the underlying factual basis of which has been found by the court on any record to include an act of domestic violence, as defined in Section 18-6-800.3, C.R.S., any misdemeanor violation of a restraining order, as described in Section 18-6-803.5, C.R.S., any misdemeanor offense of child abuse as defined in Section 18-6-401, C.R.S., or any misdemeanor offense in any other state, the elements of which are substantially similar to the elements of any one of the offenses described in this paragraph; or,
3. Been determined to be insane or mentally incompetent by a court of competent jurisdiction and incapable of performing duties; or,
4. Used any controlled substance as defined in Section 12-22-303(7), C.R.S., or consumed any alcoholic beverage or been under the influence of a controlled substance or alcoholic beverage during the operating hours of the facility. This shall not apply to foster care homes, unless such use or consumption impairs the foster parent's ability to properly care for children; or,
5. Been convicted of unlawful use of a controlled substance as specified in Section 18-18-404, C.R.S., unlawful distribution, manufacturing, dispensing, sale, or possession of a controlled substance as specified in Section 18-18-405, C.R.S., or unlawful offenses relating to marijuana or marijuana concentrate as specified in Section 18-18-406, C.R.S.; or,
6. Consistently failed to maintain standards prescribed and published by the Colorado Department of Human Services; or,
7. Furnished or made any misleading or any false statement or report to the Colorado Department of Human Services; or,
8. Refused to submit to the Colorado Department of Human Services any reports or refused to make available to the Department any records required by it in making investigation of the facility for licensing purposes; or,
9. Failed or refused to submit to an investigation or inspection by the Colorado Department of Human Services or to admit authorized representatives of the Department at any reasonable time for the purpose of investigation or inspection; or,
10. Failed to provide, maintain, equip, and keep in safe and sanitary condition premises established or used for child care pursuant to standards prescribed by the Colorado Department of Public Health and Environment and the Colorado Department of Human Services or by ordinances or regulations applicable to the location of the foster care home; or,
11. Willfully or deliberately violated any of the provisions of the Child Care Licensing Act; or,
12. Failed to maintain financial resources adequate for the satisfactory care of children served in regard to upkeep of premises and provision for personal care, medical services, clothing, and other essentials in the proper care of children; or,
13. Been charged with the commission of an act of child abuse or an unlawful sexual offense, as specified in Section 18-3-411(1), C.R.S., if:
  - a. Such individual has admitted committing the act or offense and the admission is documented or uncontroverted; or,

b. An Administrative Law Judge finds that such charge is supported by substantial evidence; or,

14. Admitted to an act of child abuse or if substantial evidence is found that the licensee, person employed by the licensee, or person who resides with the licensed in the foster home has committed an act of child abuse, as defined at Section 19-1-103(1), C.R.S.; or,

15. Been the subject of a negative licensing action.

G. The denial of the original application must be carried out in accordance with the Colorado Revised Statutes 26-6-108.

#### **7.710.35 Renewal or Continuation Notice**

A renewal notice must be sent to the foster parents at least 90 calendar days prior to the expiration of the certificate.

A. If the foster parents wish to continue to provide care, the renewal notice must be completed and returned to the child placement agency prior to the expiration of the certificate.

B. If the renewal notice is received by the child placement agency prior to the expiration of the certificate, the renewal notice is timely, and the certificate continues valid until action is taken by the child placement agency.

C. If the renewal notice is received after the expiration of the certificate, the renewal notice is untimely, and the certificate is no longer valid. The untimely renewal notice must be acted upon as an original application.

#### **7.710.36 Recertification Action**

A. Within 90 calendar days of the receipt of a timely renewal application for a certificate, the child placement agency must complete the following actions:

1. Evaluate the foster care homes' current and past compliance with the Rules Regulating Family Foster Care Homes.

2. Conduct an unannounced inspection of the foster care home in accordance with Section 7.710.33, G.

3. Review the following information, for the applicants) and all individuals residing in the home, to determine if continued certification is appropriate:

a. any child abuse allegations or investigations in the previous year;

b. any arrest or conviction records in the previous year;

c. any information from the local county department concerning county involvement with the foster family, including information from caseworkers;

d. current health status.

4. The family assessment narrative is amended with changes that have occurred with the foster family.

B. At the time of the renewal of the certificate, one of the following must be completed:

1. A provisional certificate will be changed to a one year time- limited certificate as soon as the foster family has completed the items listed as reasons for the provisional certificate.
  2. A new one year time-limited certificate is issued. The certificate issue date will be the date that the foster care home is in compliance with the Rules Regulating Family Foster Care Homes, as found at Section 7.708.
  3. The renewal application for the certificate is denied. The process for denial of a renewal application is the same as the process for denial of an original application.
- C. Upon issuance of the one year time-limited certificate, the child placement agency must submit date entry information to the department on forms prescribed by the department.
- D. A foster care home certificate is no longer valid whenever one of the following situations exists:
1. A certified foster family moves to a new address.
  2. A foster family decides to withdraw from the foster care home program and confirms same in writing.
  3. A certificate has been revoked or denied.

#### **7.710.4 PLACEMENT OF CHILDREN IN FOSTER CARE**

##### **7.710.41 Acceptance of Children for Placement**

- A. No agency shall accept a child for placement, except as provided in paragraph B below, from any source other than the child's parent(s) or guardian(s), a court of competent jurisdiction or a county department of social services and upon a specific written authorization by one of these to place the child, as only these have the right under the law to contract for a child's placement.
- B. If a law enforcement officer places a child in case of an emergency, when the parent or guardian cannot be located, in a facility which has been designated as a shelter facility in accordance with the law, and the law enforcement officer is unable to locate the child's parent, guardian or the persons with whom the child was living, the agency shall petition the appropriate court within 48 hours for legal custody.
- C. If a child placement agency no longer chooses to place children in the foster care home, the child placement agency shall follow one of the following procedures:
1. A provisional certificate may be allowed to expire if the foster family chooses not to submit a renewal application; or
  2. The child placement agency must send a written statement to the foster home explaining that the agency will no longer place children in the home for foster care, that the home must not accept any children for care from any other source; or
  3. The child placement agency must meet with or send a letter to the foster parents requesting them to sign a statement that they are withdrawing from the foster home program.

##### **7.710.42 The Placement Process**

- A. In addition to an agency's responsibility to inspect and to supervise the ongoing operation of certified foster care homes, agencies shall comply with the following minimum standards applicable to the placement process.

- B. The agency shall make an investigation or intake study to determine that foster placement of an individual child is necessary, desirable, and includes the preferences of the child when appropriate. The following shall be included in the intake study:
1. The reason(s) for placement.
  2. Information relating to the child's natural parents or family situation including religious, educational, economic and cultural background and other factors which should include, but are not limited to, consideration of the child's family, community, neighborhood, faith or religious beliefs, school activities, friends, and child's and family's primary language.
  3. Information relating to the child's legal status, medical or health history, his/her physical condition, personality, school placement and adjustment, previous placements outside the home, attitude toward removal from the home, and family relationships.
  4. Coordination with other social service agencies or departments which may have information relating to the child.
  5. Additional information, if any, designed to assist the agency in determining what type of placement, if any, will best meet the needs of such child.
- C. The agency must make available the original written family assessment, home study, and background checks of the foster parent(s) to the placing authority upon request. Updates to the family assessment, home study, and background checks must be sent to the placing authority.
- D. A child who is to be placed in a foster care home or child care center pursuant to Sections 7.500.21 and 7.500.22 respectively shall only be placed in a home or center that is licensed by the department or certified by a licensed placement agency or a county department of social services.
- E. The agency shall discuss information deemed necessary regarding a prospective foster child with foster parents as early as possible prior to placement. It is desirable for the child to visit and become familiar with the foster parents and other persons living therein prior to the time of placement.
- F. At the time of foster placement, the agency shall complete a record of admission for the foster care home parents as outlined in the Quality Standards for 24-Hour Child Care, Section 7.714.212, C, and be assured that the foster care home parents have a copy of a signed authorization for foster parents to obtain emergency medical care for the foster child, if necessary.
- G. No placement shall be continued where it is not in the best interest of the child.
- H. if a child is placed in a family child care home, the placement agency shall be assured that the child's admission record and all admission procedures as stated at Section 7.707.91, A, are completed.

#### **7.710.43 Responsibility of Placement Agency While the Child is in Care**

- A. The placement agency shall work as closely as possible with the child's natural parent(s), guardian(s), individual or agency with legal responsibility for each child with the view to maintaining a child in his own home, placing the child in foster care temporarily or appropriate permanent substitute care.
- B. The placement agency shall be assured that care is provided the child in placement in accordance with the applicable regulations, which shall include but not be limited to applicable medical, dental and optical care, and participation in appropriate educational and recreation experiences.

- C. The placement agency shall require the foster home to maintain written documentation of all medical, dental, and optical care appointments of foster children, including the need for follow-up, next visit scheduled, and the reason the child was taken to the doctor. The written documentation shall be submitted by the foster home to the agency on at least a monthly basis. The agency is responsible to send the written documentation of the medical appointments to the caseworker for each foster child in care on a at least a monthly basis.
- D. The agency shall provide on-going training for foster care parents to help improve their ability to care for children in placement. The training may include orientation and group meetings, publications, institutes, workshops, and consultation with experts.
- E. Professional staff of the agency shall visit the home at least monthly to observe the interaction of the foster children with the foster parent(s) and to generally assess the safety of the home.
- F. The agency is responsible to notify all placing agencies when a child is removed from care because of concern for the child's health, welfare, and safety and other children remain in care.
- G. The agency and/or the foster parent(s) shall attend Administrative Reviews in person or by conference call.
- H. The reimbursement rate for child maintenance agreed upon between the CPA and the county department shall be paid to the CPA foster parents for the care of the child.

#### **7.710.44 Termination of Placement**

- A. The agency shall counsel and assist parent(s) or guardian(s), foster parents and foster children in preparing for the termination of placement.
- B. Supervision and follow-up counseling and services shall be provided when appropriate to both the parents and the child after the child returns home.
- C. When a placement is terminated, the child shall be released only to his parent(s) or guardian(s) or to a court of competent jurisdiction. If a child has been received for care upon court order, the child shall be released only upon direction of the court.
- D. Upon termination of placement, the agency shall provide the parents or the agency receiving the child with pertinent health information and other records, such as school reports, which may be useful to persons with responsibility for such child.

#### **7.710.45 Required Records**

- A. A placement agency shall be responsible for maintaining an individual case record for each child accepted for care. All records are confidential and shall be protected from unauthorized examination.
- B. The department staff shall have access to such records upon request,
- C. Foster care home parents are to receive necessary information regarding the foster child in care pursuant to Section 7.710.42; and such foster parents shall be given detailed instructions regarding the confidential nature of information which they receive.
- D. The agency record for each child shall contain as a minimum:
  - 1. Report of the original intake study.

2. An agreement signed by the parent or guardian authorizing the agency to place the child in foster care and consenting to necessary medical and surgical care. A court order transferring legal custody to the agency will fulfill this requirement.
  3. If the child is placed in a foster care home, a copy of the record of admission form as required in the Quality Standards for 24-Hour Child Care, Section 7.714.212, C.
  4. Documentation of the legal custody and responsibility for the child.
  5. Reports of the child's progress under care.
  6. School reports including records of scholastic achievement and social adjustment.
  7. Individual medical records for each child including reports of the admission examination and a complete and continuous record of illness, immunization, communicable diseases and follow-up treatment and examination.
  8. Reports of psychological tests, psychological or psychiatric examination and follow-up treatment if obtained.
  9. Record of visits to the child and record of the contacts with child's own family and services to be provided or for which arrangements have been made.
  10. Copy of the treatment plan for the child.
- E. The record for each child placed by the agency in foster care shall be maintained at least three years after foster care has been terminated.
- F. Each placement agency shall maintain a separate record for each foster care home certified by the agency. This record shall include the application, all relevant information obtained at the time of certification and recertification, together with summary reports of subsequent visits to the home and a list of the children placed in the home, including names, birth dates, dates of placement and reasons for removal. This record shall be available to the staff of the department for inspection.
- G. Records relating to foster care homes whose certificates have expired shall be retained for at least three years after the expiration of the last-issued certificate and for a longer period if they contain information which would be relevant to a subsequent request for foster home certification.

## **7.710.5 PLACEMENT OF CHILDREN FOR ADOPTION**

### **7.710.51 Legal Basis**

A CPA that places children or arranges for the placement of children for the purpose of adoption shall comply with the provisions of the Child Care Licensing Act, Sections 26-6-101 through 26-6-114, C.R.S., and the Colorado Children's Code, Sections 19-5-100.2 through 19-5-403, C.R.S.

### **7.710.52 Definitions**

- A. "Agency Adoption" means an adoptive placement in which the CPA is responsible to counsel the birth parent(s), place the child(ren), supervise the placement, and provide reports to the court as required by law. The CPA is granted guardianship of the child(ren) with the right to place for adoption through relinquishment or termination of parental rights by court order and places the child(ren) for adoption with adoptive parent(s) who have a CPA approved adoptive family assessment.



- B. An "Adoption Caseworker" must be qualified as a placement worker and may complete family assessments, place a child with a family, provide post placement supervision and training for adoptive parents, all under the direct supervision of a placement supervisor.
- C. "Birth Parent Counseling" (here-in-after referred to as "counseling") means the required decision making counseling that shall be provided to a birth parent(s) prior to a decision regarding whether or not to relinquish a child(ren). Birth parent counseling must explore all options available to parent(s).
- D. A "Birth Parent Counselor" must be qualified as a placement worker and may have responsibility for relinquishment/decision making counseling with birth parent(s) dealing with an unplanned or crisis pregnancy or the relinquishment of a child, all under the direct supervision of a placement supervisor.
- E. "Closed Adoption" means an adoptive placement when the adoptive parent(s) and the birth parent(s) do not share identifying information or communicate with each other before or after the finalization of the adoption.
- F. "Expedited Relinquishment" means the process which a parent desiring to relinquish his or her child under one year of age may follow to obtain an expedited order terminating his or her parent-child legal relationship without the necessity of a court hearing.
- G. "Foster Care Adoption" means a placement in which the child(ren)'s parental rights have not been terminated at the time of the foster care placement. The placement is made as a long-term foster care placement with the intention of adoption if or when the parental rights are terminated.
- H. "Identified or Designated Adoption" means an adoptive placement in which adoptive parent(s) have been designated by the birth parent(s) prior to either parties involvement with a CPA licensed for adoptions. The CPA is responsible for completing the birth parent(s) counseling and an adoptive family assessment for the designated parent(s). The CPA is granted guardianship of the child for the purpose of placement. The CPA supervises the placement and makes reports to the court as required by law.
- I. "International Adoption" means the placement of a child born outside the United States and lacking United States Citizenship. The adoption may either be finalized in the foreign country or in Colorado depending upon the requirements of the foreign country. The adoptive applicants have an approved family assessment and have completed the required training.
- J. "Interstate Adoption" means a placement of a child into or from Colorado with a person(s) for the purpose of adoption. Placement shall be in conformity with Colorado Revised Statutes, including the Child Care Licensing Act, the Colorado Children's Code and the Interstate Compact on Placement of Children. Services to the child and adoptive family shall be provided under the laws of each state.
- K. "Intrastate Adoption" means an adoptive placement of a Colorado child with a person(s) who is a resident of Colorado.
- L. "Legal Risk Adoption" means an adoptive placement where parental rights have not been terminated and the child(ren) is not yet legally free for adoption at the time of placement. This includes infants placed directly after birth. The child(ren) is placed in an approved adoptive home. If the adoptive family resides in Colorado, the home shall be certified as a family foster home. The placement is with the intention of adoption when or if the child becomes available for adoption. The placement remains a legal risk placement until parental rights have been relinquished or terminated.

- M. "Non-Agency Adoption" means a placement in which the child(ren) is placed by the birth parent(s) with person(s) unrelated to the child(ren). The placement is made with the intention of adoption. There has been no CPA participation, birth parent counseling, or adoptive family assessment completed before the placement of the child(ren). In order for the adoption to be finalized, the birth parent counseling and approved family assessment shall be completed by a CPA or county department of social services.
- N. "Open Adoption" means an adoptive placement where the adoptive parent(s) and the birth parent(s) choose to communicate directly with each other and share information. The communication and sharing of information may occur before and/or after the finalization of the adoption. The degree of openness is determined by the parties involved.
- O. "Relative Adoption" means a placement for the purpose of adoption in which a child(ren) is placed with a person(s) related to the child(ren) as a grandparent(s), aunt, uncle, brother(s), or sister(s).
- P. "Semi-Open Adoption" means an adoptive placement when the adoptive parent(s) and the birth parent(s) choose to share information with each other either before and/or after the finalization of the adoption. The amount of information shared is determined by the parties involved. All information shared is sent to the adoption CPA. There is no direct contact between the parties involved.

#### **7.710.53 Disclosure Information on Adoption Procedure**

- A. Prior to the signing of any contract or agreement for adoptive services each agency must provide the following information to any applicant(s), whether an individual or couple, approaching the agency with an interest in adopting a child(ren). The information must be easily understandable to any applicant. Applicants must sign a statement affirming that they have received or have had access to the following information:
  - 1. The most current child care license for the agency.
  - 2. The philosophical perspective and/or religious affiliation of the agency.
  - 3. Information as to where any prospective adoptive parent may obtain:
    - a. A list of all licensed adoption agencies in the State of Colorado.
    - b. Information as to how to review the official licensing file for the agency.
    - c. Information as to how to file a complaint regarding the agency with the Colorado Department of Human Services.
    - d. Information as to how to obtain the rules regulating child placement agencies in the State of Colorado.
  - 4. For what programs the agency has been approved (foster care, domestic adoption, international adoption) by the Department including a detailed description of the services offered and the agency's role in those services.
  - 5. A statement that parents are paying for services provided by the agency, not for children.
  - 6. A copy of the most current annual report submitted to the Department.
  - 7. A fee schedule listing all the costs of the adoption itemized by services; including incidental fees, additional expenses, and post-finalization fees if included in the cost for the

adoption. Information as to what fees, if any, are reimbursable and under what conditions fees are reimbursable.

8. Average time frame for the different services provided, including the family assessment and for the complete finalization of the adoption.
  9. Description of required training for adoptive parents.
  10. The process of sharing available information regarding the child and the birth family as provided in accordance with Colorado statute.
  11. Any policy or requirements that would preclude placement of a child with an adoptive family.
  12. The grievance/appeal process of the agency.
  13. What post-finalization services are offered by the agency.
  14. The right to seek legal counsel to further understand Colorado Adoption laws.
- B. Prior to the provision of services, or for some items during the birth parent counseling, each agency must provide the following information in writing to any birth parent(s) approaching the agency with an interest in the possible relinquishment of a child(ren) for the purpose of adoption. The written information must be easily understandable to any birth parent(s).
1. Information as to whether the birth parent(s) is required to sign a contract or agreement with the agency.
  2. Rights under current Colorado law; including the right to change decision at any time prior to final decree of relinquishment during a court hearing, or the right to withdraw an affidavit for expedited relinquishment at any time before the affidavit is filed with the court. The petition for relinquishment may not be filed until at least four calendar days after the birth of the child.
  3. The philosophical perspective and/or religious affiliation of the agency.
  4. Range of available adoptive families, to include religion, race and ethnicity.
  5. Information as to where any parent considering relinquishing a child for adoption may obtain:
    - a. A list of all licensed adoption agencies in the State of Colorado.
    - b. Information as to how to review the official licensing file for the agency.
    - c. Information as to how to file a complaint regarding the agency with the Colorado Department of Human Services.
    - d. Information as to how to obtain the rules regulating child placement agencies in the State of Colorado.
  6. Copy of the most current annual report submitted to the Department.
  7. Policy regarding the payment of pregnancy related expenses and an itemization of what payments, goods or services would be required to be reimbursed to the agency if the birth parent(s) choose not to place a child(ren) for adoption with the agency and the process for the payment

8. Requirement for birth parent counseling; topics covered.
9. Information about the different types of adoption and the birth parent(s) continued involvement, if any, with the child(ren) once the adoption is final.
10. Information about whether the birth parent(s) have the right to choose the adoptive family.
11. How parental rights are terminated in Colorado; legal process; mother and father, including the option of expedited relinquishment.
12. The process for identifying legal and/or presumed birth father.
13. The grievance/appeal process of the agency.
14. Any policy or requirement that would preclude the agency placing a child for adoption.

Disclosure items 1 through 7, number 10, and number 13, must be provided prior to service. Disclosure item numbers 8, 9, 11, 12, and 14 may be provided to the birth parent during the birth parent counseling process. If all disclosure items listed above are provided prior to service, items 8, 9, 11, 12 and 14 must be reviewed again during the birth parent counseling.

#### **7.710.54 Adoption Procedure**

##### **A. Adoptions Finalized in Colorado**

For all adoptions to be finalized in Colorado in which a child is placed in Colorado with an adoptive applicant(s) residing in Colorado, the agency must:

1. Complete an assessment of each adoptive family in which a child is to be placed for adoption as detailed at Section 7.710.56.
2. Provide training to each adoptive family as detailed at Section 7.710.55.
3. Provide birth parent counseling to any parent prior to a decision regarding whether or not to relinquish a child as detailed at Section 7.710.57.
4. Complete a study of the child for adoption as detailed at Section 7.710.58.
5. Provide all necessary services for the adoptive family while the family is present in the foreign country as detailed at Section 7.710.64.
6. Complete all requirements that must occur at the time of placement of a child for adoption as detailed at Section 7.710.59.
7. Provide post placement services to the adoptive family and child until a decree of adoption is granted as detailed at Section 7.710.6.

##### **B. Adoptions Finalized in a Foreign Country**

For all adoptions of foreign nationals that will be finalized in a foreign country, the agency must:

1. Complete an assessment of each adoptive family in which a child is to be placed for adoption as detailed at Section 7.710.56.

2. Provide training to each adoptive family as detailed at Section 7.710.55.
3. Complete a study of the child for adoption as detailed at Section 7.710.58.
4. Complete all requirements for Immigration and Naturalization Services (INS) as detailed at Section 7.710.94.
5. Provide all necessary services related to the adoption while the family is present in the foreign country as detailed at Section 7.710.64.
6. Provide post placement services to the adoptive family and child, if required by the foreign country, as detailed at Section 7.710.62.
7. Notify the selected agency when the family returns to Colorado with the child adopted in the foreign country.

### **7.710.55 Training**

A. Adoptive applicants shall participate in training provided by the agency as a part of the adoption process as follows:

1. All adoptive applicants shall attend training on topics that pertain to the developmental years of a child's life and the implications these issues will have for the family unit.
2. This training must be completed by each adoptive applicant prior to the finalization of the adoption or in the case of an adoption finalized in a foreign country, prior to court validation of the adoption.
3. Training is required in core areas for all adoptive applicants and in specific areas if the child being adopted is an infant, special needs child, or a child from a foreign country.
4. Every effort must be made to complete at least 12 hours of training on core topics prior to the placement of a child(ren).
5. Training must be separate from and in addition to the family assessment.
6. If an adoptive applicant(s) is adopting for a second time, the core training need not be repeated if completed during the first adoption process.

B. Core training must include all of the following topics:

1. Attachment/bonding issues.
2. Loss and grief issues, as applicable for all parties to the adoption.
3. Adoption as a life long issue as it pertains to all parties to the adoption.
4. Key concepts of child growth and development.
5. Boundary setting and discipline.
6. Parenting a child of a different cultural or racial background, if applicable.
7. Dealing with history information regarding the child, birth parents and adoptive family.

8. Understanding adoption laws and procedures, including termination of parental rights and the expedited relinquishment process pursuant to Section 19-5-103.5, C.R.S., if applicable.
9. On-going contact and/or communication of child and adoptive family with biological family and/or significant individuals, if applicable.
10. Possible current and/or future use of community resources, including help with parenting techniques.

#### C. Specific Areas of Training

1. For families that will be adopting an infant, the following training must also be provided. Including the core training hours, total training hours for each applicant adopting an infant must not be less than 16 hours.
  - a. Infant care, to include but not be limited to basic care and feeding of the infant and Shaken Baby Syndrome.
  - b. Fetal Alcohol/Substance Abuse Syndrome, if applicable.
  - c. The possibility of misleading or incorrect history information about the child and/or the biological family.
  - d. Special medical and/or emotional issues.
2. For families that will be adopting a special needs child (defined as medically fragile and/or, over 12 months of age), the following training must also be provided. Including the core training hours, total training hours required for each applicant adopting a special needs child must not be less than 24 hours.
  - a. Parenting the emotionally, physically and/or sexually abused child.
  - b. Parenting the physically, mentally, emotionally challenged child, including those children with fetal alcohol/substance abuse syndrome.
  - c. The possibility of misleading or incorrect history information about the child and/or the biological family.
  - d. Accessing benefits and/or resources available.
3. For families that will be adopting a child from a foreign country, the following training must also be provided. Including the core training, the total training hours required for each applicant adopting an infant from a foreign country must not be less than 20 hours (includes infant training and training related to adopting from a foreign country), and the total training hours required for each applicant adopting a special needs child from a foreign country must not be less than 24 hours (includes special needs child training and training related to adopting from a foreign country).
  - a. Special medical and/or emotional issues related to international adoptions.
  - b. Void or lack of available history about the child and birth parents.
  - c. Immigration and Naturalization Service requirements and the laws and procedures of the foreign country.

d. Cultural background of the child.

#### **7.710.56 Assessment of the Adoptive Family and Report**

- A. Any individual, couple or family who desires to be considered to have a child placed for the purpose of adoption must participate in a family assessment regarding their suitability, appropriateness, and readiness for an adoptive placement.
- B. An agency must complete the assessment without regard to race, color, or national origin.
- C. The agency must include in the assessment all members of the household.
- D. The agency shall not conduct an assessment for any paid or volunteer member of its staff or any member of the board of directors for the agency.
- E. As part of the assessment, the agency must conduct a minimum of three joint interviews with a couple, one individual interview with each adult member in the household and an age/developmentally appropriate interview with all children residing in the home. For single applicants a minimum of three interviews will be required.
- F. The agency must conduct at least one interview in the applicant's home.
- G. Interviews must be spread out over a period of not less than 7 consecutive days. Joint interviews must be held on separate days.
- H. The assessment shall be updated annually in the form of an addendum. An addendum shall include at least one home visit and a review of the current medical status. During each subsequent addendum applicants shall be questioned regarding any child abuse investigations during the previous year.
- I. In each addendum the agency must document any changes in residence, marital status, criminal history, finances, or addition or deletion of family members.
- J. As a part of the family assessment the agency must obtain:
  - 1. A completed, dated and signed formal application for adoption, including a signed fee agreement and a disclosure agreement as outlined at Section 7.710.53, A.
  - 2. A current photograph of all members of the household.
  - 3. A copy of a current marriage license, if applicable.
  - 4. A copy of a divorce decree(s), if applicable.
  - 5. The results of a current fingerprint-based criminal history record check through the Colorado Bureau of Investigation (CBI) and Federal Bureau of Investigation (FBI) on all adult members of the household, including court disposition of applicable.

The agency shall report to the court any case in which a fingerprint-based criminal history record check reveals that the prospective adoptive parent was convicted at any time of a felony or misdemeanor in one of the following areas:

- a. Child abuse or neglect;
- b. Spousal abuse;

- c. Any crime against a child;
- d. Any crime, the underlying factual basis of which has been found by the court on the record to include an act of domestic violence, as defined in Section 18-6-800.3, C.R.S.;
- e. Violation of a protective order, as described in Section 18-6-803.5, C.R.S.;
- f. Any crime involving violence, rape, sexual assault, or homicide;
- g. Any felony physical assault or battery conviction or felony drug-related conviction within, at a minimum, the past five years.

No person convicted of a felony offense, specified in items a-g, above, shall be allowed to adopt a child.

- 6. A minimum of 3 personal references from individuals, unrelated to the applicant(s), that have knowledge of the applicant(s) character and suitability to parent a child.
- 7. Verification of health insurance coverage or a statement of intent that health insurance coverage will be obtained for the child upon placement.
- 8. A dated physician's statement current within one year for each member of the household, certifying that the applicant(s) and all members of the household are free from communicable disease or a physical condition that would impair his/her/their ability to care for children. Subsequent medical examinations shall be required upon the written direction of the physician.

No physical examination shall be required of any person who in good faith relies upon spiritual means or prayer in the free exercise of religion to prevent or cure disease unless there is a reason to believe such person's physical condition is such that he/she would be unable to care for a child.

K. A family assessment using the Structured Analysis Family Evaluation (SAFE) instrument(s) shall include, but not be limited to:

- 1. The applicant's motivation to adopt a child(ren), including a discussion of fertility issues, if appropriate.
- 2. The significant events in family background, evaluation of applicant's knowledge and capacity to care for children, ability to maintain long-term relationships, and significant life changes including issues of grief and loss.
- 3. The current status of the family system/lifestyle including marital relationship, interrelationships with significant persons outside the nuclear family, relationships with extended family, methods of decision making, parenting/child rearing practices, methods of discipline, religion, career decisions; child care plan if parent(s) work away from the home.
- 4. The physical, mental, and emotional capability of the applicant(s) to parent a child(ren) through adoption.
- 5. Any previous emotional problems, mental illnesses, substance abuse issues or marital problems that may have an impact on the adoption of a child(ren).
- 6. The applicant's ability to assist with possible post-adoptive issues of the child including, but not



limited to:

- a. Questions about the birth family.
  - b. Locating and obtaining non-identifying information about the birth family.
  - c. Search and possible reunification of the adopted child with the birth family.
7. The willingness of the applicant to assist the adopted child with counseling if needed related to adoption issues, including grief and loss issues related to the adoption and the birth family.
  8. The extended family's reaction to proposed adoptive placement.
  9. The applicant's finances as it relates to his/her/their ability to parent a child.
  10. The applicant's interest, preparation, willingness and ability to adopt a child(ren) with disabilities and the ability to meet the special needs of the child(ren), including financial responsibility. The assessment must include an evaluation of the impact on the extended family.
  11. The applicant's interest, attitudes, preparation and willingness to adopt a child(ren) of a different ethnic, cultural, or religious background; including an assessment of the impact on the extended family.
  12. The applicant's interest and willingness to preserve continuity of the child's ethnic and cultural identity in a positive manner.
  13. Any history of substance abuse, sexual abuse, child abuse, child neglect, or domestic violence in the applicant's nuclear family, whether the incident resulted in an investigation, arrest or conviction.
  14. Whether the applicant has ever been rejected as a prospective adoptive or foster parent, or has been the subject of an unfavorable family assessment. If there has been a prior unfavorable finding, the assessment must address the reasons for the unfavorable finding and any resolution of disagreements concerning the finding.
  15. The suitability of the accommodations within the home for an adoptive child(ren).
- L. If an applicant desires to be considered for another adoption with the same agency within 3 years of the completion of the original family assessment, a subsequent update using the SAFE instrument shall be completed. The assessment update shall include at least one joint interview, coupled with one documented individual interview with each adult member of the household, and an age/developmentally appropriate interview with all children. At least one interview with the family must be conducted in the home.
- M. The agency must update the previously completed family assessment in order to address significant changes in the time period subsequent to the original family assessment, including, but not limited to:
1. Place of residence;
  2. Marital status;
  3. Criminal history;

4. Other significant changes within the family;
  5. Child abuse investigations;
  6. Health status.
- N. If the period of time since the last family assessment is longer than three (3) years, a complete family assessment using the SAFE instrument shall be completed.
- O. If a family assessment is received directly from the originating agency and is less than one year old, the new agency must complete an update of the family assessment using the SAFE instrument. If the assessment is more than one year old, a complete assessment using the SAFE instrument must be completed.
- P. Following the completion of the family assessment, a narrative report must be completed according to the SAFE instrument guidelines.
1. Additional information may be added to the narrative report as required by a foreign country.
  2. The family assessment submitted to the foreign country shall be a reasonable, true, and responsible assessment in regards to the requirements of the foreign country.
- Q. At the conclusion of the family assessment process, applicants must sign a statement that they have been given the opportunity to read and review the final version of the family assessment excluding the confidential references.
- R. If at any time during the adoption process the agency becomes aware that it will not be able to continue to provide services or recommend the applicant(s) for approval for an adoptive placement, the agency must immediately notify the applicant(s) in writing. At the time of notification, applicants will be advised in writing of the process for dispute or disagreement with the adoption process or assessment.
- S. The family assessment is a part of the official adoption record of the agency and may only be released upon the written authorization by the applicant(s). Such circumstances are:
1. That the assessment may only be released to another licensed adoption agency, a county department of social services, or entity approved to operate in another state.
  2. When required by a foreign country to complete the adoption of foreign nationals, the family assessment and supporting documentation may be released to the adoptive applicant(s) if each page of the family assessment contains the agency raised seal.

#### **7.710.57 Birth Parent Counseling and Report**

- A. Any person who plans to petition the court for relinquishment of his/her child must obtain counseling about the relinquishment from a licensed Colorado child placement agency or a Colorado county department of social/human services. A court may refer a petitioner to a licensed child placement agency for counseling.
- B. An agency must provide counseling regarding possible relinquishment to birth parent(s) residing in Colorado in face to face interviews. In providing counseling services to an expectant parent(s), the agency must provide counseling prior to the birth of a child(ren) and following the birth of the child(ren).
- C. An agency must provide counseling to birth parents without regard to age, race, color, national origin,

religion, sex, or disability of either birth parent.

- D. The agency must conduct a comprehensive search for the legal father and/or the alleged or presumed birth father, or the birth mother if applicable. The agency must take seriously and promptly investigate any claims of paternity. Efforts to locate the birth father or birth mother must be documented.
- E. The agency must include in the counseling the legal, alleged and/or presumed birth father(s) if he can be located and is willing and interested in participating in the counseling.
- F. At the beginning of the counseling, the agency must ascertain if the birth parent(s) is receiving counseling from any other agency in Colorado.
- G. At the beginning of the counseling, the agency must provide, in writing, to the birth parent(s) a list of birth parents rights including, but not limited to:
  - 1. The right to have all of the options related to a pregnancy presented in an unbiased manner; and,
  - 2. The right to have all of the legal options related to relinquishment procedures presented in an accurate, competent, unbiased manner; and,
  - 3. The right to have a fair and balanced picture of adoption presented; and,
  - 4. The right to make the decision related to the possible relinquishment of a child in an atmosphere free from coercion and undue pressure; and,
  - 5. The right, by law, to change the decision about relinquishment and to choose to parent the child. The decision can be changed at any time prior to the final order of relinquishment being signed by the court, unless otherwise limited by a court order if a court hearing is held, or at any time before an expedited relinquishment affidavit is filed with the court. The petition for relinquishment may not be filed until at least four calendar days after the birth of the child; and,
  - 6. The right to receive the written grievance procedure for the agency; and,
  - 7. The right to know the philosophy and/or religious affiliation of the agency; and,
  - 8. The right to be referred to helping organizations in the community if a decision is made to parent the child; and,
  - 9. The right to terminate the relationship with the agency birth parent counselor at any point during the counseling relationship; and,
  - 10. The right to seek independent counsel on any issue related to the relinquishment of a child(ren), including the right to seek independent counseling for an expedited relinquishment procedure; and,
  - 11. The right to receive a copy of any document signed by the birth parent(s) and to receive a copy of the original birth certificate; and,
  - 12. The right to receive in writing the process by which an expedited relinquishment affidavit is withdrawn, including a personal meeting with a representative of the agency and the signing of a statement of withdrawal which is witnessed and signed by an agency representative. A copy of the statement with original signatures must be provided to the

birth parent.

H. The content of the counseling must include at least the following:

1. Discussion of the birth parent(s) motivation to consider relinquishment of the child(ren).
2. Discussion as to whether the birth parent(s) have been pressured or coerced to relinquish the child.
3. Discussion as to whether the birth parent(s) have been promised or received money, goods, or services or anything of value to motivate the relinquishment of the child(ren).
4. Discussion of alternatives to relinquishment and the resources available in the community if the birth parent(s) choose to parent the child(ren).
5. Discussion of the permanency of the decision to relinquish a child(ren).
6. Discussion of life long loss and grief issues that include, but are not limited to, helping the birth parent(s) identify and understand the present emotional impact of the relinquishment decision and gain an understanding of possible future grief-related emotions and behaviors.
7. Discussion of the life changing effect of pregnancy and birth of a child, including physiological changes.
8. Discussion of the birth parent(s) and birth families social developmental history, including the gathering of information regarding previous losses and life stability.
9. An assessment of the birth parent(s) ability to understand the consequences of the relinquishment decision and her/his ability to intellectually and emotionally understand the options.
10. Discussion regarding the identification of the birth father(s), the serious ramifications of failing to provide known information and the possible impact to the finalization of the adoption.
11. Discussion of whether the birth mother or the birth father is a member of or are eligible to be a member of a Native American Tribe.
12. Discussion that the birth parent(s) may only be reimbursed for pregnancy related expenses.
13. Discussion of the legal relinquishment options available, including being present at the termination or relinquishment hearing or the expedited relinquishment procedure of filing an affidavit with the court without the necessity of a court hearing.
14. Discussion of the time frame for withdrawal of the expedited relinquishment petition and affidavit, including that the petition for relinquishment may not be filed with the court until at least four calendar days after the birth of the child.

I. The agency must submit an affidavit, that includes a thorough written report of the counseling, directly to the court. The report must contain at least the following information:

1. Identifying information of the birth parent(s) including the legal and/or the alleged or presumed birth father(s), which shall include at least full name, address, and birth date of parent(s).
2. The name, address and qualifications, including education and experience, of the individual

that provided the counseling.

3. Confirmation that venue is appropriate.
4. The dates and hours on each date that significant face to face counseling occurred.
5. The total number of hours of counseling. If some counseling was done in a manner other than face to face, the agency must specify how the other counseling was provided and the number of hours of the other counseling.
6. An individualized narrative description of the specific content of the counseling covering required topic areas listed at Section 7.710.57, H, that were discussed during the counseling.
7. If the birth parent(s) choose the expedited relinquishment procedure, the counseling report and affidavit must include a statement that all legal options for relinquishment were presented including both the benefits and the detriments of attending the court relinquishment hearing or filing the expedited relinquishment petition with the court, including the time frame for withdrawal of the petition and affidavit if the birth parent(s) changes his/her mind.
8. Summary of social and medical history of the birth parent(s) and the reason for relinquishment.
9. Description of and documentation to support the efforts of the agency to locate the alleged, legal, and/or presumed birth father or birth mother and the cooperation or lack of cooperation of that parent.
10. The results of counseling with the alleged, legal, and/or presumed father.
11. Whether the Indian Child Welfare Act applies. If it applies, the agency must address the efforts made to locate or contact the tribe.
12. An account of all expenses, including financial and material aid, the agency is aware of, that were paid to, or on behalf of, the birth parent(s); including documentation of each expense and justification as to how each expense is pregnancy related.
13. The specific recommendation as to whether the relinquishment should be granted by the court.

#### **7.710.58 The Child Available for Adoption**

Information shall be obtained on each child available for adoption which shall include but need not be limited to:

- A. Report of a physical examination performed within the six months prior to adoptive placement, documenting the current physical condition of the child. For foreign children, a United States visa may be substituted for such a physical examination report.
- B. A history of the child including as much of the following information as is relevant and/or can be obtained:
  1. Physical appearance
  2. Emotional, behavioral, and cognitive history
  3. Race or ethnic origin
  4. Religion
  5. Education
  6. Hobbies
  7. Interests
  8. Talents
  9. Personal Qualities
  10. Placement History
  11. Any previous written assessments
  12. Health/medical history

- C. Statement documenting the chronological history of a child's family background in as much detail as available, including verification of the child's birth date and place and reasons for relinquishment or termination of the parent child legal relationships, as listed on the petition of relinquishment and signed by the birth parent, including a personal description written by the birth parent(s), if available.
- D. Developmental history of the child as can be obtained.
- E. A social history of the child's birth family including birth parents, extended family and siblings as applicable, including as much of the following information as can be obtained:
  - 1. Physical appearance
  - 2. Health/medical history
  - 3. Race or ethnic origin
  - 4. Religion
  - 5. Education
  - 6. Occupation
  - 7. Hobbies
  - 8. Interests
  - 9. Talents
  - 10. Personal Qualities

#### **7.710.59 Placement**

- A. The assessment of the adoptive applicant(s), as required at Section 7.710.56, K, must be completed prior to placement.
- B. As permitted under Colorado law, prior to placement as much information as possible shall be obtained and disclosed in writing to the adoptive parent regarding the child(ren) as required at Section 7.710.58, B.
- C. An effort shall be made to place siblings with the same adoptive applicant(s). If the county department locates an appropriate, capable, willing, and available joint placement for all of the children in the sibling group, there should be a rebuttable presumption that placement of the entire sibling group in the joint placement is in the best interests of the child(ren). Such presumption may be rebutted by the county by a preponderance of evidence that placement of the entire sibling group in the joint placement is not in the best interest of a child or the children. If this cannot, or should not, be done in the best interests of the children involved, the record shall contain the reasons and supporting evidence for such separate placements.
- D. The agency shall not place a child in an adoptive home that would be detrimental to the child's well-being.
- E. A written contract between the placement agency and the adoptive applicant(s) shall be executed at the time of placement. The contract must include an agreement that the adoptive applicant(s) will:
  - 1. File an adoption petition in accordance with Colorado law.
  - 2. Participate in supervision by the placement agency of the child(ren) in the adoptive home until such time as a decree of adoption becomes final.
  - 3. Agree to allow the placement agency to complete and submit a report to the court regarding the findings of the post-placement visits.
  - 4. Obtain permission of the placement agency or birth parent, as appropriate, prior to removing the child from the state.
  - 5. Agree that the child may be removed from the adoptive placement at the discretion of either the agency or the adoptive parent(s) with good cause before the finalization of the adoption.

#### **7.710.6 RESPONSIBILITY OF THE AGENCY AFTER PLACEMENT**

A. The placement agency having legal custody or guardianship is responsible for the welfare of the child until a decree of adoption is granted and shall:

1. Send written notification of the final decree of adoption to the court in which relinquishment took place. Such notification shall not disclose the name or address of the adopting parents.
2. Assume financial and planning responsibility for the child in the event that a child's adoptive placement is terminated.
3. Assume financial and planning responsibility for the child where a court refuses to grant a decree of adoption.
4. Maintain a copy of the final decree of adoption from the court in the agency file on each child.

B. Placements shall be supervised from the time a child(ren) is placed until court finalization to ensure:

1. The physical and emotional well-being of the child(ren); and,
2. Successful attachment between the child and parents; and,
3. Positive adjustment of all family members; and,
4. Adoption related issues are resolved as necessary.

C. For adoptions to be finalized in Colorado the agency must provide at least a six month period of post placement services between the time of placement and the finalization of the adoption and shall maintain at least monthly contact with the adoptive family and child(ren). The supervision shall include:

1. For children of less than one year of age, no less than three face-to-face supervisory visits, including at least two visits to the adoptive home, one visit to the adoptive home must be within the first two weeks after placement. Visits in the adoptive home should include all adoptive family members.
2. For children of one year of age or older, at least one visit per month with no less than half of the visits as face-to-face visits in the adoptive home. The first visit must be within two weeks after placement of the child(ren). Visits in the adoptive home should include all adoptive family members.

D. During the period of supervision the placement agency shall maintain records that include:

1. Case/contact notes of all contacts. These must be placed in the adoptive applicant's case file in a timely manner.
2. Two formal post placement reports shall be completed, one at three months after placement and the second at the time of finalization, or more frequently if required by the court, and must include information regarding:
  - a. The physical health and emotional well-being of the child.
  - b. Adjustments in the adoption.
  - c. Financial changes.

- d. Changes in family composition.
  - e. Other adoption issues that have arisen.
  - f. Recommendation on the continued placement of the child.
  - g. Recommendation on the finalization of the adoption.
- E. The agency may obtain a progress report, if appropriate or as necessary, from a school official or child care provider for each adoptive child that is attending child care or school.
- F. The placement agency shall be responsible for removing the child from the home, at the request of the adoptive family, or in accordance with state law, if the placement is not in the best interests of the child.

#### **7.710.61 Finalization**

- A. The agency must provide written consent to the adoption if it is in the best interest of the child.
- B. A certified copy of the final decree must be placed in the adoptive applicant's file at the placement agency.

#### **7.710.62 Post-Finalization**

- A. Prior to placement, the agency must notify the birth parent(s) and adoptive applicant(s) what post-finalization services are available through the agency.
- B. If the agency does not provide post-finalization services, the agency must provide resource and referral information regarding post-finalization services available to the birth parent(s), adoptive family, and child, if appropriate.
- C. If the agency provides post-finalization services, the agency must inform the birth parent(s), adoptive family, and child, if appropriate, of the cost at the time services are being provided.
- D. Post Finalization services may include, but not be limited to:
- 1. Consultation.
  - 2. On-going support and education.
  - 3. Resources for counseling, medical needs or search issues.
  - 4. Networking with other adoptive families.
  - 5. Adoption education and support groups.
  - 6. Providing to the adoptive family additional social and/or medical background information obtained after placement that could significantly impact the child.
- E. Post finalization services must be provided in the case of an international adoption if required by the foreign country.

#### **7.710.63 Interstate Adoptions**

- A. An agency may participate in an Interstate adoption under at least one of the following conditions:



1. The adoptive placement is arranged and carried out by a child placement agency licensed by the state of residence of the child in accordance with Section 7.710.1, C, or by an individual or organization licensed, authorized or approved by the Interstate Compact for the Placement of Children (ICPC) administrator of the other state.
2. The adoptive services are performed pursuant to an order of the court of Jurisdiction of the child.
3. The adoptive services for public adoptions are performed at the request of the Department through the (ICPC) of Children located at the Department.
4. The adoptive services for non-public adoptions are performed at the request of non-public agencies through the ICPC at the non-public agency selected and monitored by the Department.

B. An agency which participates in an interstate adoption shall perform at least the following:

1. Send all studies or reports for public adoptions through the ICPC at the Department unless otherwise authorized.
2. Send all studies or reports for non-public adoptions through the ICPC at the non-public agency selected and monitored by the Department (see Non-Public Interstate Adoptions, Section 7.710.93).
3. Comply with all rules and laws of the Interstate Compact on Placement of Children, as found at Section 24-60-1801, C.R.S. et seq., and Section 7.307 of the Program Area 7 rules.

#### **7.710.64 International Adoptions**

- A. An agency that contracts with adoptive applicants to adopt children born outside the United States and lacking United States citizenship must apply for and be approved by the Department to conduct international adoptions prior to entering into such contracts with adoptive applicants.
- B. When an agency contracts with an adoptive applicant to accept children born outside the United States and lacking United States citizenship, the agency shall have direct knowledge of and be able to comply with all applicable adoption rules, laws and procedures of the child's country of origin.
- C. When an agency contracts with an adoptive applicant to accept children born outside the United States and lacking United States citizenship, the agency shall have a written policy and procedure for the provision of adoption related services to the adoptive applicant while the adoptive applicant is present in the foreign country.
- D. The agency shall maintain on file at the agency:
  1. A current English-language translation of the adoption laws for each foreign country the agency is working with for the purpose of adoption.
  2. A verified English-language translation of any agreements the agency has entered into with a foreign government. Such agreements shall conform to the legal requirements of the foreign nation involved, as well as with the laws and regulations of the United States and the State of Colorado.
- E. An agency shall have a contract or memorandum of agreement with each child care agency authorized by a foreign government to receive custody of a child and to place a child. If the

agency has a staff member working in a foreign country, that staff member must be accepted by the appropriate authority in that country.

## **7.710.7 GRIEVANCE PROCESS, CONFIDENTIALITY, RECORDS AND REPORTS**

### **7.710.71 Grievance Process**

Each agency must have a written grievance/appeal process for adoptive applicants and for birth parents. This information must be provided as required in the Disclosure Information On Adoption Procedure found at Section 7.710.53, A, B.

### **7.710.72 Confidentiality and Disposition of Adoptive Records**

- A. All records required by the foregoing sections shall be treated as confidential and shall be protected from unauthorized examination. They shall be available to the staff of the Department, and for non-public adoptions, they shall be available to the appropriate staff of the selected non-public agency upon request.
- B. When a child is legally free for adoption, legal documents and records must be maintained in accordance with Title 19, Article 5, C.R.S., "Relinquishment and Adoption" .
- C. The records and papers in relinquishment and adoption proceedings are open for inspection only upon order of the court for good cause shown. The court and the agency are required to act in a manner so as to preserve the anonymity of birth parents, child, and adoptive parents except in the case of a designated adoption.
- D. An agency engaged in adoption placement of children shall not be licensed unless they possess adequate, secure storage facilities for records. Records shall be maintained in a locked, secured room.
- E. The agency shall develop and implement a written policy and procedure which assures that records are protected from destruction, loss and unauthorized removal or access.
- F. In the event that a child placement agency ceases operations, adoption records shall be forwarded to the successor agency, or, if none, shall be forwarded to the Department in an approved technological format such as microfilming or digital imaging.
- G. The records of birth parents, adoptive applicants and children that result in an adoption shall be permanently maintained.
- H. The records of birth parents, adoptive applicants and children, that do not result in an adoptive placement shall be maintained for a period of at least 3 years.
- I. The agency shall have an appropriate secure procedure for record destruction.

### **7.710.73 Required Records**

- A. An agency shall be responsible for maintaining a case record for each approved adoptive family, each birth parent who relinquishes a child for adoption, and for each adoptee. The record for each client shall be kept current from the point of intake to termination of services.
- B. The agency record for an adoptive family shall contain as a minimum:
  - 1. A completed, dated and signed formal application for adoption, including a signed fee and disclosure agreement.

2. A current medical examination for all members of the household.
3. A minimum of 3 personal references who have knowledge of the applicant(s).
4. A copy of a current photo identification, a copy of a current marriage license, if appropriate, and a copy of a divorce decree where applicable.
5. The results of the State Department's automated system check for all individuals residing in the household.
6. The results of the CBI background checks for all adults, 18 years of age and older, residing in the household or in the case of an international adoption, a copy of the FBI clearance initiated by INS.
7. Report of the original family assessment, family updates, and/or documentation of annual addendums as appropriate, information updates, and any subsequent family assessments.
8. Signed and dated adoption agreement or contract, as executed.
9. Petition for adoption, as executed.
10. Post placement supervisory reports.
11. Final decree of adoption.
12. Post adoption correspondence; including any correspondence from the birth parents(s).

C. The agency record for an adoptee shall contain as a minimum:

1. Social and medical histories.
2. Birth record.
3. Certified birth certificate.
4. Birth parent consent for placement.
5. ICPC files.
6. Record of admission or intake.
7. Summary of the child to be adopted.

D. The agency record for a birth parent(s) relinquishing a child(ren) shall contain as a minimum:

1. Signed disclosure agreement
2. Intake forms.
3. Birth parent counseling report and/or counseling affidavit.
4. Case notes.
5. After care plan, including communication agreement, if appropriate.

6. All appropriate legal documents related to the relinquishment.

#### **7.710.74 Required Reports**

- A. An annual report shall be made to the Department regarding the adoption services provided by the agency. The report shall provide the following information:

1. The types of adoptions, as defined at Section 7.710.52, in which the agency was involved, including the total number of:
  - a. Agency adoptions.
  - b. Identified or designated adoptions.
  - c. Legal risk adoptions.
  - d. Foster care adoptions.
  - e. Non-agency adoptions.
  - f. International adoptions.
  - g. Interstate adoptions.
  - h. Intrastate adoptions.
  - i. Open adoptions.
  - j. Semi-open adoptions.
  - k. Closed adoptions.
  - l. Relative adoptions.
2. The total number of finalized adoptions within a calendar year in which the agency was involved, including the number finalized:
  - a. In Colorado,
  - b. Out of state,
  - c. In a foreign country.
3. The total number of children placed for adoption within a calendar year in which the agency was involved, including the number of:
  - a. Boys placed.
  - b. Girls placed.
  - c. Caucasian children placed.
  - d. Children of Hispanic ethnicity placed.
  - e. African American children placed.

- f. Asian children placed.
  - g. Native American children placed.
  - h. Children placed that were of 3 or more races.
- 4. The total number of birth parent counseling cases completed by the agency in a calendar year in which the agency was involved.
- 5. The total number of approved family assessments completed within the calendar year in which the agency was involved, including those completed for:
  - a. Caucasian applicant(s).
  - b. Applicant(s) of Hispanic ethnicity.
  - c. African American applicant(s).
  - d. Asian applicant(s).
  - e. Native American applicant(s).
  - f. Applicants of mixed race (please specify races).
  - g. That resulted in a finalized adoption,
  - h. That did not result in a finalized adoption.
- 6. The total number of adoptive placements within a calendar year in which the agency was involved which resulted in disruption of the placement, including the following information:
  - a. Number prior to the finalization of the adoption.
  - b. Number after the finalization of the adoption.

#### **7.710.8 NON-IDENTIFYING INFORMATION**

Child placement agencies meeting the specified criteria may provide non-identifying information available in the Department's records to adoptees 21 and over and adoptive parents.

- A. Non-identifying information is defined as information which does not disclose the name, address, place of employment or any other material information which would lead to the identification of the birth parents. Non-identifying information includes, but is not limited to, the following:
  - 1. The physical description of the birth parents.
  - 2. The educational background of the birth parents.
  - 3. The occupation of the birth parents.
  - 4. Genetic information about the birth family.
  - 5. Medical information about the adult adoptee's birth.
  - 6. Social information about the birth parents.

7. The placement history of the adoptee.

B. Child placement agencies authorized to release information shall be qualified as follows:

1. Any agency selected shall be a non-profit agency which has been licensed for at least five years by the Department to provide adoptive services and is in good standing with the Department.
2. The agency will submit a written policy which includes the following:
  - a. A written statement, signed by the Executive Director of the agency, stating the agency shall maintain all information which identifies members of the birth family strictly confidential. In addition, the agency shall identify by name all staff involved in the provision of this service and shall furnish copies of statements agreeing to preserve confidentiality signed by members of the staff who will be handling the material.
  - b. Agreements for the physical security of any material.
  - c. Fees to be charged and a sliding fee schedule for low income persons.
  - d. Policy for releasing the information and type of material that is to be included.  
Information must be released in written form by placement workers on approval of the placement supervisor.
  - e. Time frame for response to requests.
  - f. Development of written information to be given to the persons seeking non-identifying information prior to providing the service which outlines the agency's procedures and fees for these services.

C. The agencies selected shall agree to participate in any training provided by the Department.

D. The agencies selected will return to the Department the record and a copy of the material released within 30 calendar days of release of the information.

## **7.710.9 NON-PUBLIC INTERSTATE AND FOREIGN ADOPTIONS**

### **7.710.91 Non-Public Agency**

Pursuant to Section 19-5-205.5, C.R.S., the State Department shall select a non-public agency to perform the administrative review and approval or denial functions required by the Interstate Compact on the Placement of Children (ICPC) and statutes governing foreign adoptions. Agencies selected by the department to provide these functions shall hereafter be referred to as "selected agencies" .

Agencies that perform or assist in obtaining adoptive placements shall hereafter be referred to as "placing agencies." The Interstate Compact defines the persons and agencies who, when they place a child from one state into another state, shall follow ICPC procedures. These persons and agencies are referred to as "sending agencies" (see Section 7.307.2)

### **7.710.92 Qualifying Criteria for Selection of a Non-Public Agency**

A. The agency selected to perform this administrative function shall be either a licensed child placement agency designated to facilitate adoptions or a non- public agency that meets the criteria to be a licensed child placement agency that facilitate adoptions

- B. A designated placement supervisor or an individual who meets the criteria to be a designated placement supervisor shall sign documents related to interstate or foreign adoptions (see Section 7.710.23, A, 2).
- C. Supervision of the position(s) responsible for performing this administrative function shall be provided from within the selected agency by a position(s) that is a designated placement supervisor or meets the criteria to be a designated placement supervisor.
- D. The selected agency shall have been a licensed child placement agency in good standing with the State Department or have met the criteria to be a licensed child placement agency for at least 5 years.
- E. Selected agencies shall not perform this administrative function regarding cases in which they are the placing agencies or have any other vested interest in the outcome of the administrative review since such action would constitute a conflict of interest.

The selected agency shall submit such cases to a non-public agency with which it subcontracts to perform the administrative function. The agency with which the selected agency subcontracts must meet the same qualifying criteria as a selected agency pursuant to this section.

### **7.710.93 Interstate Non-Public Adoptions**

#### **A. Where and How To Send Adoptive Placement Request Packets**

Adoptive placement request packets shall be sent in triplicate by the sending agency to the selected agency. The name and address of such agency shall be distributed by the department.

#### **B. Time Frame for Processing Adoptive Placement Request Packets**

1. Upon receipt of a complete set of request packets for an adoptive placement from another state ICPC office including the fee for the administrative services of the selected agency, the selected agency shall review the request packets and shall grant or deny permission for the placement to occur within 24 hours, excluding weekends and holidays.
2. Upon receipt of a complete set of request packets from a Colorado local agency for an adoptive placement into another state, including the fee for the administrative services of the selected agency, the selected agency shall review the request packets for compliance with Colorado laws and procedures, and the packets, including the accompanying 100-A, signed and dated by the authorized signer or the designee of that authorized signer, shall be sent on to the receiving state ICPC office within 24 hours, excluding weekends and holidays.
3. Permission for the placement to occur or denial of the placement request shall be signified by the dated signature of the authorized signer or the designee of that authorized signer on the Form 100-A that accompanied the request packets. If verbal permission for placement of the child who is the subject of the placement request is initially given to the sending state ICPC office, it shall only be considered a valid form of permission for placement if such verbal permission is immediately followed by the properly signed 100-A being sent by facsimile process to the sending state ICPC office. Within 24 hours of such facsimile being sent, copies of the original 100-A and an accompanying memo from the authorized signer of the 100-A that is written on the letterhead stationery of the selected agency shall be mailed to the sending state ICPC office and its local agency.
4. The authorized staff in the selected agency shall work with the sending state ICPC office, and/or with Colorado's local sending agency, and with other parties involved with a

requested adoptive placement to assist the sending party in bringing the request packets into compliance with applicable statutes and/or rules and regulations. As soon as possible, while such compliance issues are being clarified and potentially resolved, it shall be one option of the selected agency to return incomplete packets to the sending state ICPC office.

**C. Materials Required in Adoptive Request Packets for Children for Whom an Adoptive Placement into Another State is Requested**

1. Court documents showing the child is free for adoption. All birth parents who are residents of Colorado shall relinquish in a Colorado court and fulfill all Colorado statutory requirements for relinquishment. Adoption consent forms from other states signed by Colorado residents shall not be considered legal in Colorado.
2. Birth and discharge medical information on the child from the hospital where the child was born.
3. Birth Parent counseling report and affidavit from a licensed child placement agency in Colorado regarding the birth parents.
4. Genetic/medical/social background information regarding the birth parents
5. Written study regarding the adoptive parent(s) that has been completed and approved by a Colorado licensed child placement agency or individual legally approved by the receiving state to perform such studies. Adoptive studies or their updates shall be no more than one year old.
6. Itemized list of monies paid to attorneys, agencies and birth parents, including a statement that no money has been paid to locate for adoption the child who is the subject of the 100-A. This list shall separately specify all fees and costs charged for services associated with the review and approval of interstate adoptions.
7. Documentation of compliance with the Indian Child Welfare Act.
8. The name of any Colorado and/or out-of-state attorney involved in the requested placement.
9. If legal rights have not been terminated or legally relinquished by both birth parents, a legal risk statement shall be signed by the adoptive parents, accompanied by documentation certifying the initiation of relinquishment or termination court procedures.

**D. Materials Required in Request Packets for Children to be Placed into Colorado from Another State**

The materials required in request packets for children to be placed into Colorado from another state are identical to the materials described in Section 7.30.8,0.0, with the following exceptions. If the sending state does not require proof of relinquishment counseling. Colorado shall not require this in order to approve an adoptive placement into this state. The fulfillment of the sending state's requirements regarding consent forms shall satisfy Colorado's requirements for purposes of approval of the adoptive placement.

**7.710.94 Non-Public Foreign Adoptions**

**A. Requests for Authorization to Conduct an Adoptive Study**

The following procedures apply only to children whose adoption will be finalized in the United States.



The agency selected to perform the administrative review and approval or denial shall maintain files on each Colorado agency providing services to families adopting children from a foreign country. Each case file shall contain the following:

1. The Request for Authorization to Perform an Adoptive Study for a Foreign Born Child form shall be submitted with the appropriate fees to the selected agency performing administrative review and approval or denial of the request. Authorization shall be requested for the first two times the placing agency uses the same placement source in a foreign country.

Signing the authorization form verifies that:

- a. The placing agency obtained information on the source placing the child in the other country.
  - b. Such authorization to use a particular placement source in a foreign country was requested prior to the service agency starting a family assessment: or.
  - c. In cases where a family has an approved adoptive study, the placing agency will submit the authorization forms with appropriate fees for approval prior to a child being placed.
2. An English-language translation of any written contracts or agreements entered into with foreign governments or entities in the foreign country who are recognized by that foreign government to place children for adoption shall be submitted to the selected agency.
    - a. Such agreements shall conform to the legal requirements of the foreign country involved, as well as to the laws and regulations of the United States and the State of Colorado.
    - b. If the placing agency has a staff member working in the foreign country, that staff member shall be accepted by the appropriate authority in that country.
    - c. The placing agency shall verify through a notarized statement that the translation of the contract or agreement is a complete, full, true and accurate copy of the document.
  3. An English-language translation of the adoption laws of the foreign country from which the child(ren) are being placed shall be submitted to the selected agency with the original request for authorization to complete an adoptive home for that country.

#### B. Requests to Provide Home Studies for Out of State Entities

A licensed adoption agency requesting to provide adoptive services for a Colorado family working with an out of state agency, a referral source in another state or foreign country shall assume responsibility for the following:

1. A copy from the other state of the agency's license or documentation that referral sources are allowed under the other state's rules shall be submitted to the administrative review agency with the packet of case materials and appropriate fees.
2. If the child's adoption is to be finalized in the United States, the agency shall submit necessary documents and appropriate fees to the selected administrative agency as it would for any request for authorization to complete a family assessment for a foreign child. The licensed adoption agency will certify the adoptive family as a foster home prior to the

child being placed into the home for the purposes of adoption.

C. The following procedures apply only to children whose adoptions are finalized in the foreign country:

1. An adoption agency licensed in Colorado shall complete a family assessment for a foreign adoption on prospective adoptive parents who are residents of Colorado.
2. The completed family assessment and supporting documents shall comply with federal and state regulations including the family assessment requirements of the Immigration and Naturalization Services (INS)
3. The licensed adoption agency shall inform the selected agency of the date that the child's adoption was finalized in the foreign country. The case will be closed and no further services will be provided by the selected administrative review agency.
4. If at any time in the process the licensed agency or prospective adoptive family becomes aware that the child's adoption will not be finalized in the foreign country, the family and agency are to notify the state in writing of the changes with an explanation as to the reasons for the change in status. If the child returns to the state and was not legally adopted in the foreign country, all documents concerning the child's legal status and the type of visa which was issued allowing entrance into the United States shall be submitted to the Colorado Department of Human Services, Division of Child Care, for review by appropriate entities. The licensed adoption agency shall ensure that the home is certified as a foster home.

D. Materials and Procedures Required to Verify that Regulations Have Been Met

1. Where and How To Send Adoptive Requests

The following case materials with the appropriate fees shall be forwarded to the selected agency for review. The name and address of the agency shall be distributed by the State Department.

- a. If prior authorization to complete a family assessment for a foreign child has not been granted and is required, the Request for Authorization to Perform an Adoptive Study for a Foreign Born Child form shall be submitted to the selected agency.
- b. Three copies of the INS-Recommendation to the Immigration and Naturalization Service Concerning International Adoption.
- c. Adoptive family assessment.
- d. If required by the foreign country, three copies of a letter to be notarized stating that the adoption family assessment was completed by a Colorado child placement agency licensed to make adoptive placements.
- e. If the adoption is to be finalized in Colorado, translated copies of the child's social and medical history, legal documents and birth certificate shall be in the packet.

2. Time Frame and Procedures for Processing Adoptive Requests

- a. Upon receipt of a complete packet of case materials, including the fee for the administrative services of the selected agency, the selected agency shall review the request and shall grant or deny the request within 24 hours of receiving the request, excluding weekends and holidays.

- b. The selected agency signs three copies of the INS- Recommendation to the Immigration and Naturalization Service Concerning International Adoption (Form 394-25-18 0013) which verifies for INS that the adoption study was done by a licensed agency and if applicable that child information was reviewed and pre-adoptive requirements were met. Two copies are returned to the placing agency.
- c. If required by the foreign country, three copies of the letter stating that the adoption family assessment was completed by a Colorado child placement agency licensed to make adoptive placements will be notarized and two copies returned to the placing agency.
- d. The selected administrative agency shall make a case file and maintain a data system. The child(ren)'s name(s) and material is added to the file later in cases where it was not available at the time the initial case material was received.
- e. The selected agency shall, upon receiving the arrival notice write if requested a letter to the court in Colorado that the child came into the country legally and who made the placement.

The arrival notice shall include the adoptive parents names and address, child's birth name, sex and birth date, date of child's arrival, name of the foreign country and if the adoption is in the U.S. or in the foreign country (the date of the final adoption if known should be included). Cases requiring a court letter need the name of the judge or commissioner and names of the placing agencies.

- 3. The court letter shall be returned to the placing agency for filing with the court. The selected agency shall, when requested by the placing agency or court, write a letter to the court on validations for children who are adopted in a foreign nation.

#### **7.710.95 Confidential Case Files and Data System**

The selected agency shall maintain confidential case files and a data system for all interstate and foreign adoptive placement requests it processes (see Section 7.710.21).

#### **7.710.96 Conflict of Interest**

Selected agencies and the agencies with which they subcontract are prohibited from engaging in conflict of interest in the manner in which they conduct the administrative function associated with non-public interstate or foreign adoptions and authorized by statute and rules. Conflict of interest is defined in Section EE of the Administrative Information that accompanies the contract between the Colorado Department of Human Services and the selected agency.

#### **7.710.97 Guidelines for Fees Charged by the Selected Agency to Provide the Administrative Function Associated with Non-Public Interstate or Foreign Adoptions**

- A. The selected agency shall not charge in excess of a \$250 flat fee to provide the administrative function associated with non-public interstate and foreign adoptions as authorized by statute and rules.
  - 1. For interstate placement requests, the flat fee shall include the processing of all required materials and providing procedures necessary to process the request.
  - 2. For foreign adoptive requests the flat fee shall include authorization review, INS recommendation, processing the arrival notice and the court letter, if an approved family changes to another country requiring a new INS form there may be an additional charge

not to exceed fifty dollars.

- B. The fee charged for this service shall reflect the cost to the selected agency of direct and indirect expenses associated with the provision of administrative services required by statute and rules for the review and approval of interstate and foreign adoptive requests.
- C. The fee covers indirect costs associated with initial inquiries prior to the establishment of an adoptive placement request or other inquiries about interstate or foreign requests.

**7.710.98 Standards by which the Department of Human Services shall Evaluate the Delivery of Services by the Selected Non-Public Agency**

The Colorado Department of Human Services shall monitor the selected agency to determine compliance with Sections 7.710.91 - 7.710.97, in accordance with Section 19-5-20S.5(2)(b), (I-X), C.R.S

- A. The department shall conduct a site visit to the selected agency(ies) and review interstate and foreign adoption files that are a representative sample of pending, open and closed files.
- B. The department shall conduct a site visit on at least a semi-annual basis.
  - 1. Within 30 calendar days following each site visit, the department will provide the selected agency(ies) with a written evaluation that indicates the following:
    - a. Whether or not the agency is in compliance with rules.
    - b. What corrections, if any, are necessary in order to be in compliance.
    - c. If there are corrections to be made, the time frame within which these corrections are to be made.
  - 2. Failure by the selected agency(ies) to make corrections that have been indicated in the written evaluation of the site visit shall be grounds for the Colorado Department of Human Services to terminate the contract between it and the selected agency(ies).

**7.718 PSYCHIATRIC RESIDENTIAL TREATMENT FACILITY (PRTF) [Eff. 7/1/06]**

Psychiatric Residential Treatment Facility (PRTF) services are a Medicaid benefit statewide when provided in accordance with the provisions of the following sections.

**7.718.1 REQUIREMENTS [Eff. 7/1/06]**

- A. A "Psychiatric Residential Treatment Facility (PRTF)" must be a licensed Residential Child Care Facility (RCCF), which means a facility other than a hospital, that provides psychiatric services to individuals under age twenty-one (21) under the direction of a licensed physician in a residential setting. Psychiatric Residential Treatment Facilities as defined in Section 26-6-102, C.R.S., must have a current provider agreement with the Colorado Department of HealthCare Policy and Financing (HCPF).
- B. Each RCCF wishing to provide care as a "Psychiatric Residential Treatment Facility" must comply with the rules for Residential Child Care Facilities and the Quality Standards for 24-Hour Child Care. The following rules shall be in addition to sections 7.705.1 through 7.705.77 and Sections 7.714 through 7.714.933; however, if there is a conflict between those rules and these PRTF rules, these rules shall apply.
- C. The PRTF will meet all rules promulgated by Health Care Policy and Financing for mental health

services for clients of Psychiatric Residential Treatment Facilities or residing in Therapeutic Residential Child Care Facilities, Sections 8.765-8.765.13 (10 CCR 2505-10).

#### **7.705.97 ACCREDITATION [Eff. 7/1/06]**

The facility shall be accredited by one of the following: Joint Commission on Accreditation of Healthcare Organization (JCAHO), the Commission on Accreditation of Rehabilitation Facilities (CARF), or the Council on Accreditation of Services for Families and Children (COA).

#### **7.718.3 CLIENT RIGHTS [Eff. 7/1/06]**

- A. A list of client rights and the grievance procedure shall be posted in all facilities in areas frequented by clients and legal guardians.
- B. Every client has the right to receive assistance from the client representative in making complaints and to receive copies of the complaint procedure.
- C. Written policies pertaining to visitation, communication, dress, and personal possessions may be established and implemented. These policies shall only limit a client's rights to ensure the protection of the client, staff, and program from unreasonable and unnecessary intrusions and disruptions and from health and safety hazards.
- D. Client rights may only be denied for good cause by the physician lead inter-disciplinary team providing treatment for that client.
- E. If the PRTF enforces any restriction upon the client's rights, the facility shall review any denial or limitation at least every seven (7) days and document in the individual plan of care.

#### **7.718.4 PROFESSIONAL SERVICES [Eff. 7/1/06]**

PRTF clientele shall receive six hundred (600) minutes of documented professional clinical services each week they are in PRTF residence, with one hundred twenty (120) of those minutes dedicated to individual treatment. The remainder of the professional clinical services (480 minutes) may include any or all of the following: group therapy, family therapy, medication management, psychological services, weekly physician contact, and post emergency intervention de-briefing, which the client may be excused from if clinically contraindicated. These services will be based on the recommendations of the interdisciplinary team and reviewed each week for clinical appropriateness.

The facility team shall meet weekly to review and document the client's general progress in treatment and make any needed adjustment(s) to the service plan for each PRTF resident. If it is clinically contraindicated that this (600 minutes) total of professional clinical services be delivered to the client, it shall be documented as such on a weekly basis by the licensed professional managing the care of this client; documentation shall include a description of those services that will be delivered to the client.