Title of Proposed Rule:	Rule Revisions for 12 CCR 2509-8; 7.714	
CDHS Tracking #:	23-11-06-01	
Office, Division, & Program:	Rule Author: Logan Ellett	Phone: 720-245-1195
Office of Children, Youth, and Families, Division of Child Welfare, Provider Services Unit		E-Mail: logan.ellett@state.co.us

RULEMAKING PACKET

Type of Rule: *(complete a and b, below)*

a. [x] Board [ ] Executive Director

b. [X] Regular [ ] Emergency

This package is submitted to State Board Administration as: *(check all that apply)*

X	AG Initial Review		X	Initial Board Reading			AG 2nd Review		X	Second Board Reading / Adoption

This package contains the following types of rules: *(check all that apply)*

Number	
86	Amended Rules
58	New Rules
34	Repealed Rules
	Reviewed Rules

What month is being requested for this rule to first go before the State Board?	February, 2025

What date is being requested for this rule to be effective?	May 30, 2025
Is this date legislatively required?	No

I hereby certify that I am aware of this rule-making and that any necessary consultation with the Executive Director's Office, Budget and Policy Unit, and Office of Information Technology has occurred.

Office Director Approval: _____ Date: _____

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REVIEW TO BE COMPLETED BY STATE BOARD ADMINISTRATION
Comments:

Estimated Dates:	1st Board	February 2025	2nd Board	APRIL and MAY ~~February~~ 2025	Effective Date	JUNE ~~March~~ 2025

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STATEMENT OF BASIS AND PURPOSE

Summary of the basis and purpose for new rule or rule change.
Explain why the rule or rule change is necessary and what the program hopes to accomplish through this rule. ***1500 Char max***

The proposed rule revisions to 12 CCR 2509-8; Section 7.701 - General Rules for Child Care Facilities are needed to support adjustments in current practice for licensed providers in the State of Colorado. Updates are needed primarily to remove the Colorado Department of Early Childhood (CDEC) language that is no longer pertinent to CDHS or programs that it administers. The purpose of the proposed rule revisions also includes adjustments to the fee schedules to adjust for inflation, as well as adding language removed from other sections in 12 CCR 2509-8 that apply to most facility types. For instance, definitions were removed from other areas within the rule and added to Section 7.701 so that all definitions would be in one central location as universally applicable to all 24-hour licensed facility types.

Also included in this rule package are proposed rule revisions to 12 CCR 2509-8; Section 7.705 - Rules Regulating Residential Child Care Facilities and Section 7.714 - Quality Standards for Twenty-Four Hour Child Care. Revisions to these sections are necessary to support the Family First Prevention Services Act (FFPSA) federal mandates, as well as necessary updates to reflect current practices in licensed residential child care facilities. Proposed language includes removing rules duplicative to the Colorado Department of Public Health Environment (CDPHE), adding a therapeutic wilderness rules section, adding shelter care services and runaway and homeless youth services rules, reorganization of the physical restraint and seclusion sections, additions to the Qualified Residential Treatment Program (QRTP) section of rule, addition of a volunteers and interns section, and additions surrounding control of contraband. Proposed revisions across each section include removing gendered pronouns, changing the “shall” to “may” or “must” language as appropriate and when not statutorily outlined, and adding ‘youth’ to all areas where only ‘child’ is mentioned, if applicable, and the rule applies to both youth and children.

An emergency rule-making (which waives the initial Administrative Procedure Act noticing requirements) is necessary:

- [ ] to comply with state/federal law and/or
- [ ] to preserve public health, safety and welfare

Justification for emergency: N/A

State Board Authority for Rule:

Code	Description
26-1-107(5)(b), (6)(a), C.R.S. (2024)	Authorizes the State Board to promulgate rules for programs administered under Title 26 and Title 27 and states the State Board shall adopt board rules

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26-1-111(2)(d)(I), C.R.S. (2024)	Authorizes the state department through executive director and rules of state board to promulgate rules for child welfare services including out-of-home placement services

Program Authority for Rule: *Give federal and/or state citations and a summary of the language authorizing the rule-making function AND authority.*

Code	Description
26-6-909(1), C.R.S. (2024)	The department shall prescribe and publish standards for licensing.
26-6-905(1)(c), (6), (7), (9), C.R.S. (2024)	The state board shall promulgate rules for renewal of child placement agency and facility licenses. The state board shall establish rules for the approval of foster care homes and child care centers. The state board may adopt rules that are consistent with federal law for governing procedures for adverse actions for accreditation for child placement agencies. The state board shall promulgate rules for fingerprint processes for all current or prospective county employees having direct contact with children.
26-6-907, C.R.S. (2024)	The department is authorized to establish, pursuant to rules promulgate, fees for licenses and processing license applications.
26-6-909(1), (2), (3), C.R.S. (2024)	The department shall promulgate licensing standards for all facility types described in Part 9 of Article 6 of Title 26. The standards are enumerated in subsection (2). The state board may also promulgate rules related to self-administration of medication.
26-6-911(1), C.R.S. (2024)	The state board shall promulgate rules that apply to foster care generally, including care through a county, child placement agency, and kinship care.
26-6-912(1)(a)(I)(A), (d)(II), C.R.S. (2024)	The state board shall promulgate rules that define and identify what the criminal history record check entails; concern the public availability of the most recent facility inspection reports; require the facility to post their most recent license and procedures for filing a complaint.
26-6-915(1)(c), (2), C.R.S. (2024)	The state board shall promulgate rules concerning the assessment of a fine against a license for mailings related to adverse licensing actions and requiring facilities and agencies to provide written notice to parents and legal guardians/custodians of the children cared for in facilities or agencies regarding the process for filing complaints against the facilities/agencies.

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26-6-922(4)(b), C.R.S. (2024)	The department shall promulgate rules for the procedures for appeals for child placement agencies and misused funds.

Does the rule incorporate material by reference?	X	Yes			No
Does this rule repeat language found in statute?	X	Yes			No

If yes, please explain.	*The below rules incorporate material by reference*
	FEDERAL FORM ICPC-100A (2021) is incorporated by reference in rule 7.714.21.H.2
	RULES AND REGULATIONS FOR THE ADMINISTRATION OF THE EXCEPTIONAL CHILDREN'S EDUCATIONAL ACT (JUNE 30, 2024) is incorporated by reference in rule 7.714.6
	CDPHE REGULATIONS REGARDING MEDICATION ADMINISTRATION, STORAGE, AND DISPOSAL, 6 CCR 1011-1, CHAPTER 24 (JULY 1, 2017) is incorporated by reference in rule 7.714.82.J.
	THE STATE BOARD OF PHARMACY RULES AND REGULATIONS AT 3 CCR 719-1 (NOVEMBER 30, 2024) is incorporated by reference in rule 7.714.82.J.12.b.
If yes, please explain.	*The below rules repeat language verbatim found in statute*
	26-6-904, C.R.S. is verbatim to rule 7.701.11.B.1-4
	26-6-903(16), C.R.S. is verbatim to rule 7.701.2 Definitions of "Kinship Foster Care Homes"
	26-20-102(2), C.R.S. is verbatim to rule 7.701.2 Definitions of "Chemical Restraint"
	12-245-202(3.5), C.R.S. is verbatim to rule 7.701.2 Definitions of "Conversion Therapy"
	26-20-102(3), C.R.S. is verbatim to rule 7.701.2 Definitions of "Emergency"
	26-6-914(6)(a)(II), C.R.S. is verbatim to rule 7.701.2 Definitions of "Convicted"

	19-7-302(14), C.R.S. is verbatim to rule 7.701.2 Definitions of “Foster Youth in Transition Program”
	26-5.7-102(2), C.R.S. is verbatim to rule 7.701.2 Definitions of “Homeless Youth Shelter”
	26-5.7-102(3), C.R.S. is verbatim to rule 7.701.2 Definitions of “Homeless Youth Shelter Services”
	26-6-903(21)(A), C.R.S. is verbatim to rule 7.701.2 Definitions of “Negative Licensing Action”
	26-20-102(5.3), C.R.S. is verbatim to rule 7.701.2 Definitions of “prone position”
	26-20-102(5.5), C.R.S. is verbatim to rule 7.701.2 Definitions of “prone restraint”
	26-6-903(28), C.R.S. is verbatim to rule 7.701.2 Definitions of “Relative”
	26-6-903(30), C.R.S. is verbatim to added rule 7.701.2 Definitions of “Residential or Day Treatment Child Care Facility”
	26-6-903(29), C.R.S. is verbatim to rule 7.701.2 Definitions of “Residential Child Care Facility”
	26-6-903(31), C.R.S. is verbatim to rule 7.701.2 Definitions of “Respite Child Care Center”
	26-20-102(6), C.R.S. is verbatim to rule 7.701.2 Definitions of “Restraint”
	26-20-102(7), C.R.S. is verbatim to rule 7.701.2 Definitions of “Seclusion”
	26-6-903(32), C.R.S. is verbatim to rule 7.701.2 Definitions of “Secure Residential Treatment Center”
	26-6-903(34), C.R.S. is verbatim to rule 7.701.2 Definitions of “Specialized Group Facility”
	26-6-903(35), C.R.S. is verbatim to rule 7.701.2 Definitions of “therapeutic foster care”
	26-60903(36), C.R.S. is verbatim to rule 7.701.2 Definitions of “Treatment Foster Care”
	19-1-103(141), C.R.S. is verbatim to rule 7.701.2 Definitions of “Trauma-Informed”
	26-6-914(2), C.R.S. is verbatim to rule 7.701.33.F
	26-6-914(2)(a), C.R.S. is verbatim to rule 7.701.33.F.1

	26-6-914(2)(e), C.R.S. is verbatim to rule 7.701.33.F.5
	26-6-914(2)(f), C.R.S. is verbatim to rule 7.701.33.F.6
	26-6-914(2)(g), C.R.S. is verbatim to rule 7.701.33.F.7
	26-6-914(2)(H), C.R.S. is verbatim to rule 7.701.33.F.8
	26-6-914(2)(i), C.R.S. is verbatim to rule 7.701.33.F.9
	26-6-914(2)(j), C.R.S. is verbatim to rule 7.701.33.F.10
	26-6-914(2)(l), C.R.S. is verbatim to rule 7.701.33.F.12
	26-6-914(2)(m), C.R.S. is verbatim to rule 7.701.33.F.13
	26-6-914(2)(o), C.R.S. is verbatim to rule 7.701.33.F.15
	26-6-909(2)(E)(II), C.R.S. is verbatim to rule 7.701.34.D
	18-13-121(1)(a), C.R.S. is verbatim to added rule 7.701.91.D
	27-5.7-105(7), C.R.S. is verbatim to rule 7.705.72.B.1
	19-7-101(2)(a)(I)-(VII), C.R.S. is verbatim to rule 7.714.33.A.1.A – A.1.G.
	19-7-101(2)(b)(I)-(XII), C.R.S. is verbatim to rule 7.714.33.A.2.A – A.2.L.
	19-7-101(2)(c)(I)-(III), C.R.S. is verbatim to rule 7.714.33.A.3.A – A.3.C.
	19-7-101(2)(d)(I)-(III), C.R.S. is verbatim to rule 7.714.33.A.4.A – A.4.C.
	19-7-101(2)(e)(I)-(II), C.R.S. is verbatim to rule 7.714.33.A.5.A – A.5.B.
	19-7-101(2)(f)(I)-(III), C.R.S. is verbatim to rule 7.714.33.A.6.A – A.6.C.
	19-7-101(2)(g)(I)-(V), C.R.S. is verbatim to rule 7.714.33.A.7.A – A.7.E.
	19-7-101(2)(h)(I)-(IV) and (VI), C.R.S. is verbatim to rule 7.714.33.A.8.A – A.8.E.
	19-7-101(2)(i)(I)-(-VIII), C.R.S. is verbatim to rule 7.714.33.A.9.A – A.9.H.
	19-7-101(7), C.R.S. is verbatim to rule 7.714.33.B.-.
	26-20-105(1.5)(a), C.R.S. is verbatim to rule 7.714.534.A.2.

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	26-20-105(1.5)(a), C.R.S. is verbatim to rule 7.714.544.A.1.

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REGULATORY ANALYSIS

1. List of groups impacted by this rule.
Which groups of persons will benefit, bear the burdens or be adversely impacted by this rule?

Many groups will be impacted by this rule packet and rule shifts. Other state departments such as Behavioral Health Administration (BHA), Colorado Department of Public Health and Environment (CDPHE), Colorado Department of Early Childhood (CDEC), Health Care Policy and Financing (HCPF), and Colorado Department of Education (CDE) weighed in on the proposed rules and sections that impact them directly. Providers of all license types will be impacted by the rule changes. These providers include residential child care facilities; qualified residential treatment programs; psychiatric residential treatment programs; general treatment; and therapeutic foster care; child placement agencies; homeless youth shelters; day treatment centers; therapeutic wilderness programs; and specialized group facilities. County departments of human/social services may also be impacted indirectly by some of the rule changes as they use the licensed providers for placements from county child welfare.

2. Describe the qualitative and quantitative impact.
How will this rule-making impact those groups listed above? How many people will be impacted? What are the short-term and long-term consequences of this rule?

This rulemaking will impact the groups listed above in a myriad of ways. The state departments listed are impacted, as many of the shifts in this packet removed duplicative rule language or rules that were specific to the other state departments. Rules that have been removed from this rule packet exist in Colorado Department of Public Health and Environment rule sets at 6 CCR 1011-1 as well as the Colorado Department of Early Childhood rule sets at 8 CCR 1402-1. Other state departments also oversee our facilities and want to ensure that any reference to their rules or their department procedures are clearly outlined and identified in any of our rule changes. Providers are most directly impacted by the rule changes, as they are held to these standards and accountable to the rules in this CCR series. Counties are indirectly impacted as they utilize the providers listed above to accept placement of the children and youth entering county custody. It is hard to estimate the number of people that will be impacted, but we anticipate it's in the tens of thousands if all state departments, county departments, and providers and their staff are counted. Short-term consequences of the rule changes are that some providers will be out of compliance with new rules and regulations and potentially submitting more appeals or having more reports of inspection generated by the licensing and monitoring specialists assigned to the facilities. We do not anticipate any long-term negative impacts to providers. However, we do anticipate positive long-term outcomes with more clearly defined and trauma-informed practice for each of the licensing types.

3. Fiscal Impact
For each of the categories listed below explain the distribution of dollars; please identify the costs, revenues, matches or any changes in the distribution of funds even if such change has a total zero effect for any entity that falls within the category. If this rule-making requires one of the categories listed below to devote resources without receiving additional funding, please explain why the rule-making is required and what consultation has occurred with those who will need to devote resources. ***Answer should NEVER be just "no impact" and should include "no impact because…."***

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State Fiscal Impact *(Identify all state agencies with a fiscal impact, including any Colorado Benefits Management System (CBMS) change request costs required to implement this rule change)*

The Colorado Department of Human Services (CDHS) will have a positive fiscal impact from this rulemaking, as licensing fees for providers are increased by 3%. CDHS has the authority to increase fees to licensed facilities according to section 26-6-907(1)(a), C.R.S. With this authority, the Provider Services Licensing Team has implemented an annual licensing fee for all 24-hour child care facilities licensed under the Department. Licensing fees are essential to help cover direct administrative costs per Section 26-6-907(1)(c), C.R.S. Licensing fees have not been increased since 2020. The proposed fee structure increases the costs of licensing fees by adjusting up 3% over the last four years.

County Fiscal Impact

This rulemaking will not have a fiscal impact for counties because these rules are directed toward licensed providers and do not require action on the part of counties.

Federal Fiscal Impact

This rulemaking will not have a federal fiscal impact because these rules are directed toward licensed providers and do not require action on the part of the federal government.

Other Fiscal Impact *(such as providers, local governments, etc.)*

This rulemaking will not fiscally impact local governments because these rules are directed toward licensed providers and do not require action by local governments. Licensed providers will have a fiscal impact from this rulemaking. This rulemaking increases licensing fees by 3% for all licensed providers. These fees have not been increased since 2020. Licensed providers may also be impacted by this rule making as it pertains to appeals. Previously all appeals filed by licensed providers to licensing Reports of Inspection were free of charge. This rulemaking adjusts fees for appeals as allowed pursuant to § 26-6-907(1)(b)(V), C.R.S. The new rule allows each provider five appeals free of charge and then requires a charge of $25 per appeal in order to offset direct and indirect costs of the department. This fiscal impact of fees for providers will be dependent on the number of appeals a provider files. This rulemaking has been examined for fiscal impact for direct services and indirect costs. This rulemaking will not fiscally impact direct services or indirect costs for licensed providers because no additional requirements for licensure were made that impact licensed providers financially. Requirements for background checks and staff to youth ratios remain unchanged.

4. Data Description

List and explain any data, such as studies, federal announcements, or questionnaires, which were relied upon when developing this rule?

The original pre-rule for these suggested revisions was submitted in 2021 to update language to be consistent with the federal Family First Prevention Services Act (FFPSA). A draft was completed at that point and brought through multiple stakeholder/partner feedback groups to garner feedback. The drafts stalled between 2021 and August of 2023 when manager and now rule author, Logan Ellett, took over updating the proposed rules and language that had already been developed. To the rule author's

knowledge, there were no questionnaires or studies that were relied upon in the development of these rules.

5. Alternatives to this Rule-making

Describe any alternatives that were seriously considered. Are there any less costly or less intrusive ways to accomplish the purpose(s) of this rule? Explain why the program chose this rule-making rather than taking no action or using another alternative. **Answers should NEVER be just "no alternative" answers should include "no alternative because…"**

There are no alternatives to this rule making because of the significant amount of revisions, additions, and edits that were made and necessitated by FFPSA, CDPHE, CDEC, and working with providers. Rule edits and improvements were necessary and could not be accomplished in another way.

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STAKEHOLDER COMMENT SUMMARY

Development

The following individuals and/or entities were included in the development of these proposed rules (such as other Program Areas, Legislative Liaison, and Sub-PAC):

Rules were drafted by the Provider Services Unit inside of the Division of Child Welfare for the Colorado Department of Human Services for the first draft. There were eleven, two-hour internal CDHS feedback sessions held with staff from Administrative Review Division, Provider Services Unit, Youth Services, Permanency, Dr. Deborah Monaghan, and other units contributing to the proposed language that went out for provider feedback. Also involved in the initial draft were Fire Marshal Chief Jennifer Henderson of Louisville Fire Protection District in Boulder County, Colorado and all state agencies listed below.

This Rule-Making Package

The following individuals and/or entities were contacted and informed that this rule-making was proposed for consideration by the State Board of Human Services:

During the rulemaking process, the following individuals and entities were contacted and/or consulted on the proposed rules for consideration: Broomfield Human Services, Douglas County, Denver County, Jefferson County Deputy County Attorney, Colorado Association of Family and Children's Agencies (CAFCA), Fostering Colorado, Mountain States Children's Home, Griffith Center, Ascend Group Home, Signal, Smith Agency, Maple Star, Seeds Wilderness Therapy, The Daisy Center, Karis Inc, Jefferson Center for Mental Health, Rocky Mountain Health Plans, Sandstone, Third Way Center, Parker Personal Care Homes, Ariel Clinical Services, Whimspire, Keystone Achievements, Gateway, Shiloh House, Firefly Autism, Laradon, Tennyson Center, Colorado Behavior and Learning Group, TGTHR, Children's Hospital of Colorado, Cedar Springs Hospital, Cloverleaf Enrichment Schools of Douglas County, Facility Schools, lived experts, and people from the public. Public comments and feedback are housed at the bottom of this document as well as linked here for reference.

Other State Agencies

Are other State Agencies (such as HCPF or CDPHE) impacted by these rules? If so, have they been contacted and provided input on the proposed rules?

[X] Yes [ ] No

If yes, who was contacted and what was their input?

The Behavioral Health Administration (BHA)
The Division of Child Welfare, Provider Services Unit (CDHS)
The Division of Child Welfare, Youth Services Unit (CDHS)
The Office of the Child's Representative (OCR)
The Administrative Review Division (CDHS)
The Colorado Department of Health Care Policy and Financing (HCPF)
The Colorado Department of Education (CDE)
Input linked here for reference

Sub-PAC

Have these rules been reviewed by the appropriate Sub-PAC Committee?

[X] Yes [ ] No

Name of Sub-PAC	Child Welfare SubPAC		
Date presented	January 4, 2024 and August 1, 2024		
What issues were raised?	No Issues Raised		
Vote Count	*For*	*Against*	*Abstain*

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			No Vote was Taken
If not presented, explain why.	Rules were presented for awareness to Child Welfare SubPAC on January 4, 2024 just before Information Memos were published regarding partner feedback sessions. Rules will not be brought to Child Welfare SubPAC for a vote, as they are provider-facing rules and do not directly impact counties.		

PAC
Have these rules been approved by PAC?

[X] Yes [ ] No

Date presented	September 5, 2024; Approved October 3, 2024		
What issues were raised?	No issues were raised, as it was on the consent agenda		
Vote Count	*For*	*Against*	*Abstain*
	All votes to move forward		
If not presented, explain why.			

Other Comments
Comments were received from stakeholders on the proposed rules:

[X] Yes [ ] No

If "yes" to any of the above questions, summarize and/or attach the feedback received, including requests made by the State Board of Human Services, by specifying the section and including the Department/Office/Division response. Provide proof of agreement or ongoing issues with a letter or public testimony by the stakeholder

7.714 QUALITY STANDARDS FOR TWENTY–FOUR (24)-HOUR ~~CHILD~~ CARE FOR CHILDREN AND YOUTH ~~[Rev. eff. 6/1/12]~~

All rules in Section 7.714 will be known and hereinafter referred to as the Quality Standards for Twenty-Four (24)-Hour ~~Child~~ Care FOR CHILDREN AND YOUTH and will apply to all ~~child care~~ applicants and licensees subject to licensing as a specialized group facility, A CHILD PLACEMENT AGENCY (CPA) OR COUNTY THAT CERTIFIES ~~SPONSORS~~ SPECIALIZED GROUP FACILITIES, OR A residential child care facility (RCCF), INCLUDING FACILITIES OPERATING UNDER A RCCF LICENSE. FACILITIES OPERATING UNDER A RCCF LICENSE INCLUDE: QUALIFIED RESIDENTIAL TREATMENT PROGRAMS (QRTP), PSYCHIATRIC RESIDENTIAL TREATMENT FACILITIES (PRTF), SHELTER CARE SERVICE PROGRAMS, AND RUNAWAY AND HOMELESS YOUTH SHELTER CARE FACILITIES. ~~shelter residential, child care facility or psychiatric residential treatment facility~~. SECURE RESIDENTIAL TREATMENT CENTERS (SRTC) MUST COMPLY WITH RULES FOR PHYSICAL RESTRAINT FOUND IN SECTION~~S~~ 7.713.24.B AND SECTIONS 7.714.53 THROUGH 7.714.536. ~~However, Section 7.714.53, et seq., and the applicable definitions in Section 7.714.1 also apply to approved family foster care homes, see Section 7.708.36, et seq.~~ DAY TREATMENT CENTERS MUST COMPLY WITH APPLICABLE RULES FOR PHYSICAL RESTRAINT FOUND IN SECTIONS 7.706.17 AND 7.714.53 THROUGH 7.714.536. ~~and day treatment centers, see Section 7.706, et seq.~~

~~**7.714.1 DEFINITIONS [Rev. eff. 6/1/12]**~~

~~"Client Representative" means a person designated by the facility to process grievances.~~

~~"Chemical restraint" means giving an individual medication involuntarily for the purpose of restraining that individual; except that chemical restraint does not include the involuntary administration of medication pursuant to Section 27-65-111(5), C.R.S., or administration of medication for voluntary or life-saving medical procedures. A chemical restraint does not include a drug or medication that is a usual and customary part of a medical diagnostic or treatment procedure to treat the individual's medical condition or symptoms or to promote the individual's independent functioning.~~

~~"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 management.~~

~~"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.~~

~~"Escalation" is an increase in intensity of a child's out-of-control behavior.~~

~~The "Family Service Plan" is a case services plan completed by a county caseworker jointly with the child, parents, and providers within sixty (60) calendar days of placement for each child receiving services from a county department of social/human services.~~

~~The "Individual Child 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.~~

~~"Mechanical Restraint" means a physical device used to involuntarily restrict the movement of an individual or the movement or normal function of a portion of his or her body. Mechanical restraints include, but are not limited to: the use of handcuffs, shackles, straight jackets, posey vests, ankle and wrist restraints, craig beds, vail beds, and chest restraints. Mechanical restraint does not include the use of protective devices used for the purpose of providing physical support or prevention of accidental injury.~~

~~"Nationally Recognized Criteria" means a set of standards, nationally acknowledged as acceptable and appropriate for use with at-risk populations, that are incorporated into the model of physical management utilized by the facility. The Nationally Recognized Criteria shall include, at a minimum the following:~~

~~A. Annual staff training and/or certification, to include training upon hire, and ongoing (at least every six months) refresher training or practice exercises for each staff member trained or certified in restraint, to review and refresh skills involved in positive behavior intervention, prevention, de-escalation, and physical management, in accordance with the model.~~

~~B. A restraint prevention and de-escalation component, to include identifying antecedents that may cause an individual to escalate, and/or development of behavior management plans that are in alignment with individual treatment plans if necessary.~~

~~C. A physical management process that prohibits or provides alternatives to a prone position, and includes identifying primary control techniques that emphasize utilizing only the minimum amount of force necessary to gain control and keep the individual safe.~~

~~D. A debriefing process which includes a review of physical management, to determine the appropriateness and effectiveness of preventive/de-escalation techniques used, the appropriateness of physical management, and how, or if, physical managements are preventable.~~

~~"Physical Management" means the physical action of placing one's hands on an individual. Physical management may be used to gain physical control in order to protect the individual or others from harm after all attempts to verbally direct or deescalate the individual have failed. Physical management may be utilized when an emergency situation exists. The physical management continuum may include:~~

~~A. Utilizing transitional measures.~~

~~B. Placing one's hands on an individual to physically guide and/or physically control the individual.~~

~~C. Use of an approved restraint method to control or contain the individual.~~

~~D. Placing of an individual into an approved prolonged restraint method.~~

~~E. Physical management may be used to move or escort an individual into seclusion. Seclusion, in itself, is not a form of physical management.~~

~~"Physical Restraint" means the use of bodily, physical force to involuntarily limit an individual's freedom of movement.~~

~~"Prone Position" means placing an individual in a face-down position.~~

~~"Prone Restraint" means a restraint in which the individual being restrained is secured for a period of time in a prone position for a period of time exceeding five (5) minutes.~~

~~"Reasonable" as used in these rules means appropriate and suitable, or not excessive or extreme.~~

~~"Religion" where used in these regulations includes traditional religious beliefs and spiritual beliefs such as those of Native Americans.~~

~~"Restraint" means any method or device used to involuntarily limit freedom of movement, including, but not limited to, bodily physical force, mechanical devices, or chemicals. Restraint includes a chemical restraint, a mechanical restraint, a physical restraint, and seclusion. Restraint does not include:~~

~~A. The use of any form of restraint in a licensed or certified hospital when such use is in the context of providing medical or dental services that are provided with the consent of the individual or the individual's guardian;~~

~~B. The use of protective devices or adaptive devices for providing physical support, prevention of injury, or voluntary or life-saving medical procedures;.~~

~~C. The initial temporary holding or positioning of an individual, for less than five minutes, by a staff person appropriately trained and/or certified for protection of the individual or other persons;~~

~~D. The holding of by one adult the purpose of calming or comforting the child;~~

~~E. Placement of an individual in his or her sleeping room for the night; or,.~~

~~F. The use of time-out, in an unlocked setting where voluntary egress is not prevented, and as may be defined by written policies, rules, or procedures.~~

~~A "Residential Facility" ("the facility") provides 24-hour child care and includes residential child care facilities and specialized group facilities.~~

~~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.~~

~~"Seclusion" means the placement of an individual, six (6) years old or older, alone in a room from which egress is involuntarily prevented.~~

~~"Transitional measure" means physical guidance, prompting techniques of short duration or an initial, temporary, approved physical positioning of an individual at the onset or in response to a re-escalation during a physical management, for the purpose of quickly and effectively gaining physical control of that individual in order to prevent harm to self or others. Momentary utilization of a short term (as quickly as possible, but not to exceed five (5) minutes) prone position is only permissible during a transitional measure.~~

7.714.1 PROGRAM DESCRIPTION

A. THE FACILITY MUST HAVE A WRITTEN OVERALL PROGRAM DESCRIPTION FOR THE FACILITY. THE WRITTEN DESCRIPTION MUST ~~AND~~ INCLUDE THE FOLLOWING:

1. THE POPULATION SERVED, INCLUDING, BUT NOT LIMITED TO, THE FOLLOWING: AGES OF CHILDREN/YOUTH ACCEPTED, SPECIAL POPULATIONS SERVED, AND EXCLUSIONARY CRITERIA THAT CONFORMS TO THE AMERICANS WITH DISABILITIES ACT OF 1990 (ADA), 42 U.S.C. §§ 12101-12213 (2009), AS INCORPORATED BY REFERENCE IN SECTION 7.701.14;

2. TREATMENT MODALITIES AND PROGRAMMING UTILIZED BY THE FACILITY;

3. THE TITLE OF THE PERSON WHO HAS OVERALL RESPONSIBILITY FOR THE DEVELOPMENT, IMPLEMENTATION, AND COORDINATION OF THE TREATMENT PROGRAM;

4. STAFF RESPONSIBILITY FOR PLANNING, CHANGES, AND IMPLEMENTATION OF THE TREATMENT PROCEDURES AND THERAPEUTIC INTERVENTIONS;

5. THE RANGE OF PROCEDURES AND INTERVENTIONS TO BE USED AND THE ANTICIPATED RANGE OR TYPES OF BEHAVIOR OR CONDITIONS FOR WHICH SUCH PROCEDURES AND INTERVENTIONS ARE TO BE USED, INCLUDING PHILOSOPHY OF TREATMENT, MODES OF THERAPY, TRAUMA-INFORMED PRACTICES, POSITIVE BEHAVIOR INTERVENTION, SKILL-BUILDING STRATEGIES, PHYSICAL RESTRAINT, AND SECLUSION WHERE ALLOWED AND APPROVED BY THE DEPARTMENT; AND

6. THE FACILITY'S RESPONSIBILITY FOR MONITORING THE SAFETY OF CHILDREN/YOUTH DURING ROUTINE CARE AND TREATMENT, INCLUDING WHEN THE PROGRAM MAY UTILIZE EMERGENCY INTERVENTIONS.

7.714.2 GENERAL REQUIREMENTS FOR ADMISSION ~~POLICY AND PROCEDURES~~ ~~[Rev. eff. 6/1/12]~~

A. Admission of a child/YOUTH shall be in keeping with the stated purpose of the ~~child care~~ facility. ~~and shall~~ ADMISSION MUST be limited to those children/YOUTH for whom the facility is qualified AND LICENSED TO CARE FOR. ~~by staff, TRAINING, program, equipment, and needs of children/YOUTH already in residence to provide care deemed necessary~~. Care must be provided in A MANNER CONSISTENT WITH THE CHILD/YOUTH RIGHTS OUTLINED IN SECTIONS 7.714.31 THROUGH 7.714.32 AND IN THE LEAST RESTRICTIVE, MOST APPROPRIATE SETTING IN ORDER TO MEET THE INDIVIDUALIZED CHILD'S/YOUTH'S NEEDS. ADDITIONALLY, FOR CHILDREN/YOUTH IN FOSTER CARE OR PARTICIPATING IN A FOSTER CARE TRANSITION PROGRAM, CARE MUST BE PROVIDED IN A MANNER CONSISTENT WITH THE CHILD/YOUTH RIGHTS OUTLINED IN SECTION 19-7-101(2), C.R.S. AND SECTIONS 7.714.33 THROUGH 7.714.34 AND IN the least-restrictive, most appropriate setting in order to meet the INDIVIDUALIZED child's/YOUTH'S needs. A FACILITY THAT ACCEPTS YOUTH IN FOSTER CARE OR PARTICIPATING IN A FOSTER CARE TRANSITION PROGRAM WHO ARE EIGHTEEN (18) YEARS OF AGE AND OLDER BUT UNDER TWENTY-ONE (21) YEARS OF AGE MUST HAVE A WRITTEN POLICY TO ADDRESS HOW THE FACILITY WILL ENSURE THE YOUTH'S ADULT RIGHTS AND DUTIES WILL BE ACCOMMODATED, INCLUDING, BUT NOT LIMITED TO, REGISTERING TO VOTE AND REGISTERING FOR SELECTIVE SERVICE, IN ADDITION TO THEIR RIGHTS AS IDENTIFIED IN SECTION 7.714.33.

~~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 it appropriate. As much of this information as possible shall be obtained prior to admission, but the total evaluation shall be completed within fourteen (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 physical management, restraint and seclusion in an emergency situation pursuant to 7.714.53, et seq.~~

~~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 twenty-four (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, the consequences for certain behaviors, and the orientation, notification and consents required by Section 7.714.53, et seq.~~

~~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.~~

~~6. Introduction to staff.~~

~~7. Discussion of tasks and behaviors the child is expected to perform.~~

7.714.21 ADMISSION PROCEDURES

EACH FACILITY MUST DEVELOP AND ADHERE TO WRITTEN ADMISSION PROCEDURES. SUCH PROCEDURES MUST BE PROVIDED TO THE REFERRING AGENCIES AND PARENT(S) AND/OR GUARDIAN(S) OF THE CHILD/YOUTH REFERRED FOR PLACEMENT. PROCEDURES MUST INCLUDE:

A. THE WRITTEN DESCRIPTION OF THE PROGRAM, AS STATED IN SECTION 7.714.1.A.

B. THE FACILITY MAY ONLY ACCEPT A CHILD/YOUTH INTO CARE AFTER RECEIVING ALL NECESSARY INFORMATION FROM THE REFERRAL SOURCE, TO INCLUDE:

1. THE NAME, DATE OF BIRTH, SEX ASSIGNED AT BIRTH, GENDER IDENTITY, AND PHYSICAL DESCRIPTION OF THE CHILD/YOUTH;

2. REASON FOR REFERRAL AND IDENTIFIED RISK AND SAFETY TRIGGERS;

3. ANY KNOWN MEDICAL NEEDS, INCLUDING ANY ALLERGIES, INJURIES, PRESCRIBED MEDICATIONS, OR NECESSARY TREATMENTS;

4. CURRENT PRESENTING PROBLEMS AND AREAS OF CONCERN;

5. ANTICIPATED LENGTH OF STAY;

6. CURRENT FUNCTIONING;

7. REQUIRED ACCOMMODATIONS, INCLUDING SLEEPING/ROOMMATE ACCOMMODATIONS;

8. THE NAME AND CONTACT INFORMATION OF THE PLACING AUTHORITY, WHICH MUST INCLUDE AN EMERGENCY CONTACT PHONE NUMBER FOR ACCESS TO THE PLACING AUTHORITY TWENTY-FOUR (24) HOURS A DAY. VERIFICATION OF THE AUTHORITY OF THE INDIVIDUAL PLACING THE CHILD/YOUTH AT THE FACILITY MUST BE PROVIDED AND SUCH INFORMATION DOCUMENTED IN THE CHILD'S/YOUTH'S ADMISSION RECORD; AND

9. A PLACEMENT AGREEMENT, INCLUDING PROVISIONS FOR DISCHARGE PENDING NECESSARY INFORMATION ON CHILD/YOUTH.

C. THE FACILITY MUST OBSERVE AND DOCUMENT THE PHYSICAL CONDITION OF THE CHILD/YOUTH AT THE TIME OF ADMISSION, AS OUTLINED IN THE FACILITY'S PROCEDURES, TO INCLUDE MARKS OR TATTOOS, SIGNS OF ABUSE OR NEGLECT, OR SIGNS OF ILLNESS. THIS PROCESS MUST NOT VIOLATE THE CHILD'S/YOUTH'S RIGHT TO PRIVACY. ANY SIGNS OF POTENTIAL ABUSE OR NEGLECT MUST BE REPORTED TO THE CHILD ABUSE AND NEGLECT HOTLINE IMMEDIATELY. IF THERE IS REASONABLE CAUSE TO BELIEVE OR SUSPECT THAT THE CHILD/YOUTH HAS PHYSICAL SIGNS OF ABUSE OR NEGLECT IN BODILY AREAS NOT READILY VISIBLE, THEN THE FACILITY MUST HAVE THE CHILD/YOUTH IMMEDIATELY SEEN BY THE FACILITY NURSE OR OUTSIDE MEDICAL STAFF.

D. FOR ANY CHILD/YOUTH ADMITTED TO THE PROGRAM, THE FACILITY MUST REQUEST AND MAKE EVERY DILIGENT EFFORT, NO LESS THAN THREE (3) DOCUMENTED REQUESTS WITHIN THE FIRST MONTH OF ADMISSION, TO OBTAIN, UTILIZE, AND KEEP IN THE CHILD'S/YOUTH'S FILE CURRENT, RELEVANT INFORMATION ON THE CHILD/YOUTH, TO INCLUDE:

1. EXPECTED GOALS TO BE ACHIEVED BY THE CHILD/YOUTH WHILE IN CARE;

2. REQUIRED LEVEL OF SUPERVISION FOR THE CHILD/YOUTH, INCLUDING DURING TIMES OF TRANSPORTATION AND WHEN OFF FACILITY GROUNDS;

3. SOCIAL, EMOTIONAL, AND DEVELOPMENTAL HISTORY;

4. HISTORY OF TRAUMA, ABUSE/NEGLECT;

5. A MENTAL HEALTH ASSESSMENT AND SOURCE OF THE ASSESSMENT INFORMATION, IF OBTAINED FROM AN OUTSIDE SOURCE SUCH AS A PRIOR PLACEMENT OR MENTAL HEALTH PROVIDER;

6. CURRENT FAMILY STRUCTURE, RELATIONSHIP DYNAMICS, AND FAMILY FUNCTIONING;

7. BEHAVIORAL HEALTH HISTORY OR OBSERVABLE BEHAVIORS AND/OR ACTIONS THAT IMPACT OVERALL PHYSICAL AND PSYCHOLOGICAL HEALTH, INCLUDING, BUT NOT LIMITED TO, LIFESTYLE CHOICES LIKE DIET OR EXERCISE;

8. PHYSICAL CONDITIONS AND HEALTH, TO INCLUDE ALLERGIES, CHRONIC CONDITIONS, AND CURRENT MEDICATIONS;

9. MENTAL AND PSYCHOLOGICAL HEALTH, TO INCLUDE EMOTIONAL REGULATION, COPING STRATEGIES, AND CURRENT PSYCHOTROPIC MEDICATIONS;

10. IMMEDIATE SUPPORTS AVAILABLE, TO INCLUDE CULTURAL, RELATIONAL, RELIGIOUS, SPIRITUAL, OR EMOTIONAL;

11. SUBSTANCE USE;

12. PREVIOUSLY SUCCESSFUL AND UNSUCCESSFUL INTERVENTIONS;

13. SKILLS, ASSETS, AND STRENGTHS;

14. PREVIOUS PLACEMENTS;

15. THE FAMILY SERVICES PLAN, IF APPLICABLE AND AVAILABLE; AND

16. EDUCATIONAL RECORDS FOR THE CURRENT AND PAST YEAR IN ACCORDANCE WITH SECTION 7.701.63.B.8. SUCH RECORDS MUST BE EVALUATED BY THE CHILD'S/YOUTH'S EDUCATIONAL TEAM OR ADMINISTRATIVE UNIT TO DETERMINE THE CHILD'S/YOUTH'S EDUCATIONAL NEEDS FOR PURPOSES OF ENROLLMENT IN SCHOOL AND ENSURING A CHILD/YOUTH HAS ACCESS TO REQUIRED SERVICES LISTED IN SCHOOL PLANS, SUCH AS AN INDIVIDUALIZED EDUCATION PLAN (IEP) OR 504 PLAN.

E. AUTHORIZATIONS MUST BE OBTAINED FROM THE PARENT(S), LEGAL GUARDIAN(S), AND/OR CUSTODIAN(S) WITHIN ONE (1) WEEK OF ADMISSION, UNLESS OTHERWISE NOTED BELOW, AUTHORIZATIONS MUST INCLUDE THE FOLLOWING:

1. CONSENT FOR ROUTINE AND EMERGENCY MEDICAL, DENTAL, AND VISION CARE, OBTAINED PRIOR TO OR ON DAY OF ADMISSION. IN ACCORDANCE WITH SECTION 13-22-103(1), C.R.S. YOUTH EIGHTEEN (18) YEARS OR OLDER MAY GIVE CONSENT FOR MEDICAL CARE, DENTAL CARE, AND RELATED CARE;

2. CONSENT FOR PHYSICAL RESTRAINT AND/OR SECLUSION, OBTAINED PRIOR TO UTILIZING AND WHEN APPLICABLE, AS DESCRIBED IN SECTION 7.714.531;

3. CONSENT TO TREATMENT FOR MENTAL HEALTH SERVICES IN ACCORDANCE WITH SECTIONS 27-65-103, C.R.S. AND 27-65-104, C.R.S. CHILDREN FIFTEEN (15) YEARS OR OLDER MAY GIVE CONSENT TO RECEIVE MENTAL HEALTH SERVICES;

4. CONSENT TO RELEASE CONFIDENTIAL INFORMATION AS REQUIRED BY LAW OR COURT ORDER;

5. CONSENT TO TREAT FOR OTHER BEHAVIORAL HEALTH SERVICES AND ALL TREATMENT MODALITIES THE FACILITY MAY UTILIZE IN THE CHILD'S/YOUTH'S COURSE OF TREATMENT;

6. SPECIFIC TO QRTPS, CONSENT FOR THE BHA TO RELEASE THE STATE-APPROVED ASSESSMENT IN ACCORDANCE WITH SECTION 7.705.208; AND

7. CONSENT FOR SEARCH PRACTICES CONDUCTED BY THE FACILITY;

F. FOR AN EMERGENCY ADMISSION OF A CHILD/YOUTH TO THE FACILITY, FACILITIES MAY REQUEST ADDITIONAL INFORMATION AS NEEDED, BUT AT LEAST THE FOLLOWING MUST BE OBTAINED PRIOR TO OR ON THE DAY OF ADMISSION:

1. THE NAME, DATE OF BIRTH, SEX ASSIGNED AT BIRTH, GENDER IDENTITY, AND PHYSICAL DESCRIPTION OF THE CHILD/YOUTH;

2. ANY KNOWN MEDICAL NEEDS, INCLUDING ANY ALLERGIES, INJURIES, PRESCRIBED MEDICATIONS, OR NECESSARY TREATMENTS;

3. THE NAME AND CONTACT INFORMATION OF THE PLACING AUTHORITY, WHICH MUST INCLUDE AN EMERGENCY CONTACT PHONE NUMBER FOR ACCESS TO THE PLACING AUTHORITY TWENTY-FOUR (24) HOURS A DAY. VERIFICATION OF THE AUTHORITY OF THE INDIVIDUAL PLACING THE CHILD/YOUTH AT THE FACILITY MUST BE PROVIDED AND SUCH INFORMATION DOCUMENTED IN THE CHILD'S/YOUTH'S ADMISSION RECORD;

4. WRITTEN AUTHORIZATION ALLOWING ROUTINE AND EMERGENCY MEDICAL, DENTAL, VISION, AND MENTAL HEALTH CARE TO BE PROVIDED TO THE CHILD/YOUTH; AND

5. A PLACEMENT AGREEMENT, INCLUDING PROVISIONS FOR DISCHARGE PENDING NECESSARY INFORMATION ON CHILD/YOUTH.

G. THE FACILITY MUST REQUEST AND MAKE EVERY DILIGENT EFFORT, NO LESS THAN THREE (3) DOCUMENTED REQUESTS WITHIN THE FIRST MONTH OF ADMISSION, TO OBTAIN, UTILIZE, AND DOCUMENT THE FOLLOWING FOR EACH CHILD/YOUTH ADMITTED TO THE PROGRAM:

1. ALL PERSONS ALLOWED TO HAVE CONTACT WITH THE CHILD/YOUTH, INCLUDING THE MANNER AND FREQUENCY OF CONTACT.

2. ALL DOCUMENTATION FROM REFERRAL SOURCE OF PERSONS NOT ALLOWED TO HAVE CONTACT WITH THE CHILD/YOUTH, INCLUDING COURT ORDERS, PROTECTION ORDERS, AND REASONS FOR SUCH RESTRICTIONS IF APPLICABLE AND MADE AVAILABLE.

3. THE NAME(S) AND TITLE(S) OF THE INDIVIDUAL(S) TO WHOM THE CHILD/YOUTH MAY BE RELEASED AT THE TIME OF DISCHARGE FROM THE FACILITY, IF MADE AVAILABLE; AND

4. THE LEGAL STATUS, INCLUDING PROBATION OR CRIMINAL ADJUDICATIONS, AND CUSTODY OF THE CHILD/YOUTH.

H. WHEN A CHILD/YOUTH IS PLACED BY A SENDING AGENCY OUT-OF-STATE, THE INTERSTATE COMPACT ON THE PLACEMENT OF CHILDREN (ICPC) PROCEDURES MUST BE FOLLOWED AS DETAILED IN PART 18 OF ARTICLE 60 OF TITLE 24, C.R.S., INCLUDING:

1. IN ACCORDANCE WITH SECTION 24-60-1802, C.R.S., THE SENDING AGENCY INCLUDES A PARTY STATE, OFFICER, OR EMPLOYEE THEREOF; A SUBDIVISION OF A PARTY STATE, OR OFFICER, OR EMPLOYEE THEREOF; A COURT OF A PARTY STATE; A PERSON, CORPORATION, ASSOCIATION, CHARITABLE AGENCY, OR OTHER ENTITY WHICH SENDS, BRINGS, OR CAUSES TO BE SENT OR BROUGHT ANY CHILD/YOUTH TO ANOTHER PARTY STATE ULTIMATELY RESPONSIBLE FOR THE PLANNING, FINANCING, AND PLACEMENT OF THE CHILD/YOUTH.

2. REQUESTS MUST BE SENT BY THE SENDING STATE DIRECTLY TO THE COLORADO DEPUTY COMPACT ADMINISTRATOR ON FEDERAL FORM ICPC-100A (2021) PRIOR TO THE PLACEMENT OF THE CHILD/YOUTH IN THE COLORADO FACILITY HEREIN INCORPORATED BY REFERENCE. NO LATER EDITIONS OR AMENDMENTS ARE INCORPORATED. THE FEDERAL FORM ICPC-100A CAN BE FOUND AT HTTPS://DRIVE.GOOGLE.COM/DRIVE/FOLDERS/1ZIRMFGQCETXSWY1KGXWBOS6ROK61J-PM. COPIES ARE ALSO AVAILABLE FOR PUBLIC INSPECTION AND COPYING AT THE COLORADO DEPARTMENT OF HUMAN SERVICES, 1575 SHERMAN STREET, DENVER, CO 80203, DURING REGULAR BUSINESS HOURS; AND

3. NO CHILD/YOUTH RESIDING OUT OF STATE MAY BE ADMITTED TO A COLORADO FACILITY UNTIL AN ICPC APPROVAL IS GRANTED BY THE COLORADO COMPACT OR DEPUTY COMPACT ADMINISTRATOR.

7.714.22 CHILD/YOUTH ORIENTATION

A. WITHIN TWENTY-FOUR (24) HOURS OF ARRIVAL AT THE FACILITY, THE CHILD/YOUTH MUST BE GIVEN AN ORIENTATION TO THE FACILITY. IF THE ORIENTATION CANNOT HAPPEN WITHIN THE TWENTY-FOUR (24) HOUR TIMEFRAME FOR CHILD/YOUTH-SPECIFIC REASONS OR DUE TO THE NEED TO ACQUIRE LANGUAGE OR INTERPRETATION SERVICES, THIS MUST BE DOCUMENTED IN THE CHILD'S/YOUTH'S FILE. THE ORIENTATION MUST BE CONDUCTED IN THE CHILD'S/YOUTH'S PREFERRED LANGUAGE. THE ORIENTATION MUST BE CONSISTENT WITH THE CHILD'S/YOUTH'S AGE, REPORTED DEVELOPMENTAL AND/OR COGNITIVE LEVEL, AND ABILITY TO PARTICIPATE. IF THE CHILD/YOUTH IS NOT ABLE TO PARTICIPATE IN THE ORIENTATION, THE INDIVIDUAL PLACING THE CHILD/YOUTH IN THE FACILITY MUST BE GIVEN THE ORIENTATION ON BEHALF OF THE CHILD/YOUTH. THE CHILD/YOUTH WHO RECEIVED THE ORIENTATION OR THEIR PLACING AUTHORITY MUST SIGN AND DATE THE ORIENTATION FORM UPON COMPLETION OF THE ORIENTATION. THE ORIENTATION MUST INCLUDE:

1. A TOUR OF THE FACILITY TO INCLUDE WHERE THE CHILD/YOUTH WILL SLEEP, INSTRUCTIONS ON FIRE ALARM AND FIRE EVACUATION PROCEDURES, ESCAPE ROUTES, AND EXITS;

2. AN OVERVIEW OF THE RULES/REGULATIONS AND POLICIES OF THE FACILITY;

3. IF APPLICABLE, A DISCUSSION AS TO WHEN PHYSICAL RESTRAINT MAY BE USED AND THE NECESSARY PERMISSIONS AND AN EXPLANATION OF THE DEBRIEFING PROCESS, AS REQUIRED BY SECTIONS 7.714.53 THROUGH 7.714.536;

4. FOR CHILDREN/YOUTH RESIDING IN FOSTER CARE OR PARTICIPATING IN THE FOSTER YOUTH IN TRANSITION PROGRAM, THE LOCATION OF THE POSTED WRITTEN NOTICE OF CHILD/YOUTH RIGHTS REQUIRED BY SECTION 19-7-101(5), C.R.S. MUST BE POSTED IN A PLACE WHERE CHILDREN/YOUTH HAVE ACCESS. FOR OTHER CHILDREN/YOUTH, AN EXPLANATION OF CHILD/YOUTH RIGHTS, AS IDENTIFIED IN SECTION 7.714.31.B, AND WHERE THE RIGHTS ARE POSTED IN THE FACILITY;

5. FOR CHILDREN/YOUTH RESIDING IN FOSTER CARE OR PARTICIPATING IN THE FOSTER YOUTH IN TRANSITION PROGRAM, A NOTICE MUST BE PROVIDED CONTAINING CONTACT INFORMATION FOR THE CHILD'S/YOUTH'S APPOINTED ATTORNEY; THE OFFICE OF THE CHILD PROTECTION OMBUDSMAN; THE APPROPRIATE COUNTY DEPARTMENT OF HUMAN/~~ OR~~ SOCIAL SERVICES; AND THE DEPARTMENT OF HUMAN SERVICES.

   A. THE NOTICE MUST INCLUDE AN EXPLANATION THAT SUCH CHILDREN/YOUTH MAY SPEAK WITH THE PARTIES LISTED IN SECTION 7.714.22.A.5 IF THEY HAVE ANY QUESTIONS, CONCERNS, OR GRIEVANCES RELATED TO CHILD/YOUTH RIGHTS.

6. FOR CHILDREN/YOUTH WHO ARE NOT RESIDING IN FOSTER CARE OR NOT PARTICIPATING IN THE FOSTER YOUTH IN TRANSITION PROGRAM: AN EXPLANATION OF THE FACILITY'S GRIEVANCE POLICIES AND PROCEDURES, THE NAME AND CONTACT INFORMATION FOR THE DESIGNATED CLIENT REPRESENTATIVE, AND WHERE THE GRIEVANCE FORMS AND GRIEVANCE BOX ARE LOCATED. THE CHILD/YOUTH MUST BE ADVISED THAT THEY CAN REQUEST STAFF ASSISTANCE WITH SUBMISSION OF A GRIEVANCE.

   A. SUCH CHILDREN/YOUTH MUST ALSO BE PROVIDED NOTICE THAT THEY MAY CONTACT THE OFFICE OF THE CHILD PROTECTION OMBUDSMAN, THE APPROPRIATE COUNTY DEPARTMENT OF HUMAN/~~ OR~~ SOCIAL SERVICES, AND THE DEPARTMENT ABOUT ANY QUESTIONS, CONCERNS, OR GRIEVANCES RELATED TO ~~THE~~ CHILD/YOUTH RIGHTS;

7. AN INTRODUCTION TO STAFF AND PEERS; AND

8. AN OVERVIEW OF THE ANTICIPATED DAILY SCHEDULE FOR THE CHILD/YOUTH.

B. A FORM LISTING THE ORIENTATION REQUIREMENTS MUST BE SIGNED BY THE STAFF MEMBER AND THE CHILD/YOUTH, OR THE INDIVIDUAL PLACING THE CHILD/YOUTH, VERIFYING THE DATE THE ORIENTATION OCCURRED. A COPY OF SUCH FORM MUST BE PROVIDED TO THE CHILD/YOUTH AND THE PLACING AUTHORITY OF THE CHILD/YOUTH, AND A COPY MUST BE MAINTAINED IN THE CHILD'S/YOUTH'S FILE.

C. A COPY OF THE RULES/REGULATIONS AND POLICIES OF THE FACILITY, A COPY OF THE WRITTEN NOTICE FORM OF CHILD/YOUTH RIGHTS, AN EXPLANATION OF THE FACILITY'S GRIEVANCE POLICIES AND PROCEDURES, A NAME AND NUMBER OF A STAFF MEMBER TO BE CONTACTED FOR QUESTIONS AND/OR CONCERNS, THE CONTACT INFORMATION FOR FILING A COMPLAINT WITH THE DEPARTMENT, THE CHILD PROTECTION OMBUDSMAN, AND IF APPLICABLE, INFORMATION ABOUT WHEN PHYSICAL RESTRAINT MAY BE USED, MUST BE SENT TO THE CHILD'S/YOUTH'S PARENT(S) AND/OR GUARDIAN(S) AND CUSTODIAN(S) WITHIN ONE (1) WEEK OF ADMISSION AND DOCUMENTATION THAT THIS INFORMATION WAS PROVIDED TO THE PARENT(S) AND/OR LEGAL GUARDIAN(S) AND CUSTODIAN(S) MUST BE MAINTAINED IN THE CHILD'S/YOUTH'S FILE.

7.714.3 RELIGION, RIGHTS, AND GRIEVANCE PROCEDURES

7.714.31 Children'S/YOUTH'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/YOUTH in residence. A LIST OF CHILDREN'S/YOUTH'S RIGHTS AND THE GRIEVANCE PROCEDURE DESCRIBED IN SECTIONS 7.714.31 AND 7.714.32 MAY ~~MUST~~ BE POSTED IN ALL FACILITIES IN AREAS FREQUENTED BY CHILDREN/YOUTH, PARENT(S), AND LEGAL GUARDIAN(S) AND CUSTODIAN(S).

B. THE FOLLOWING RIGHTS APPLY TO ALL CHILDREN/YOUTH WHO ARE PLACED IN FACILITIES. THESE RIGHTS MAY NOT BE LIMITED OR DENIED BY THE FACILITY UNLESS LIMITED OR DENIED IN ACCORDANCE WITH SECTIONS 7.714.31.C THROUGH 7.713.31.E. ~~These rights may not be restricted or denied by the facility.~~ THESE RIGHTS ~~AND~~ INCLUDE:

1. Every child/YOUTH has the right to enjoy freedom of thought, conscience, cultural and ethnic practice, and religion~~.~~;

2. Every child/YOUTH has the right to a reasonable degree of privacy~~.~~;

3. Every child/YOUTH has the right to have ~~his or her~~ THEIR opinions heard and considered, to the greatest extent possible, when any decisions are being made affecting ~~his or her~~ THEIR life~~.~~;

4. Every child/YOUTH has the right to receive appropriate and reasonable adult guidance, support, and supervision~~.~~;

5. Every child/YOUTH has the right to be free from physical abuse or neglect and inhumane treatment. Every child/YOUTH has the right to be protected from all forms of ~~sexual~~ exploitation~~.~~;

6. Every child/YOUTH has the right to receive adequate and appropriate medical, ~~and~~ mental health, AND BEHAVIORAL HEALTH ~~and psychiatric~~ care in the least restrictive setting possible, suited to meet THEIR individual needs~~.~~;

7. Every child/YOUTH has the right to receive adequate and appropriate food, clothing, and housing~~.~~;

8. Every child/YOUTH has the right to live in clean, safe surroundings~~.~~;

9. Every child/YOUTH has the right to participate in an educational program that will maximize ~~his/her~~ THEIR potential in accordance with existing law~~.~~;

10. Every child/YOUTH has the right to communicate with ~~"significant others" outside of the facility, such as~~ a parent or LEGAL guardian OR CUSTODIAN, caseworker, attorney, ~~or~~ guardian ad litem, ~~and/or~~ counsel for youth, ~~current~~ therapist, physician, religious advisor, ~~and, if appropriate,~~ probation officer, OTHER SIGNIFICANT MEMBERS OF THE CHILD'S/YOUTH'S TEAM OUTSIDE OF THE FACILITY, AND/OR OTHER SIGNIFICANT APPROVED CONNECTIONS~~.~~;

11. No ~~foster~~ child/YOUTH ~~shall~~ MAY be fingerprinted for the purpose of a criminal background check unless required by law enforcement~~.~~;

12. A child/YOUTH may be photographed upon admission for identification and administrative purposes of the facility ~~pursuant to Section 19-3-306, C.R.S~~. Such photographs must be confidential and must not be released by the facility except pursuant to court order. No other non-medical photographs or videotaping may 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 OR FOR USE BY A MEDICAL PROFESSIONAL~~.~~;

13. Every child/YOUTH has the right to the same consideration for care and treatment as anyone regardless of race, color, national origin, religion, age, sex, GENDER IDENTITY, gender expression, political affiliation, sexual orientation, financial status, or disability~~.~~;

14. Every child/youth has the right to be given the names and professional status of the staff members responsible for ~~his/her~~ THEIR care~~.~~;

15. Every child/YOUTH has the right to receive assistance from the CHILD'S/YOUTH'S CLIENT ~~resident~~ representative in filing a grievance OR MAKING COMPLAINTS and to receive copies of the grievance OR COMPLAINT procedure~~.~~;

16. Every child/YOUTH fifteen (15) years of age and older has the right to request ~~his or her~~ THEIR own medical records, to see the records at reasonable times, and to be given written reasons if the request is denied~~.~~;

17. NOTWITHSTANDING ANY OTHER PROVISION OF LAW, A CHILD WHO IS ~~Every child~~ fifteen (15) years of age OR~~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~~ - WHETHER WITH OR WITHOUT THE CONSENT OF A PARENT OR LEGAL GUARDIAN OR CUSTODIAN, MAY CONSENT TO RECEIVE MENTAL HEALTH SERVICES RENDERED BY A FACILITY, A PROFESSIONAL PERSON, OR MENTAL HEALTH PROFESSIONAL ~~pursuant to section 27-65-104, C.R.S.~~ LICENSED PURSUANT TO PART 3, 4, 5, 6, OR 8 OF ARTICLE 245 OF TITLE 12 IN ANY PRACTICE SETTING. A LICENSED MENTAL HEALTH PROFESSIONAL MAY PROVIDE PSYCHOTHERAPY SERVICES, AS DEFINED IN SECTION 12-245-202(14)(A), TO A CHILD WHO IS TWELVE (12) YEARS OF AGE OR OLDER, WITHOUT THE CONSENT OF A PARENT OR LEGAL GUARDIAN OR CUSTODIAN, IF THE MENTAL HEALTH PROFESSIONAL DETERMINES THAT THE MINOR IS KNOWINGLY AND VOLUNTARILY SEEKING SUCH SERVICES AND THE PROVISION OF PSYCHOTHERAPY SERVICES IS CLINICALLY INDICATED AND NECESSARY TO THE MINOR'S WELL-BEING;

18. EVERY CHILD/YOUTH HAS THE RIGHT TO RECEIVE CULTURALLY RESPONSIVE CARE, TREATMENT, AND SERVICES;

19. EVERY CHILD/YOUTH HAS THE RIGHT TO RECEIVE TRAUMA-RESPONSIVE CARE, TREATMENT, AND SERVICES; AND

20. EVERY CHILD/YOUTH HAS THE RIGHT TO HAVE CONTACT AND CORRESPONDENCE WITH THEIR SIBLINGS, UNLESS RESTRICTED BY A COURT ORDER.

21. EVERY CHILD HAS THE RIGHT TO CONSENT TO SUBSTANCE USE TREATMENT IN ACCORDANCE WITH SECTION 13-22-102, C.R.S. ALL YOUTH OVER THE AGE OF EIGHTEEN (18) YEARS OLD HAVE THE RIGHT TO CONSENT TO SUBSTANCE USE TREATMENT PURSUANT TO SECTION 13-22-101, C.R.S.

~~C. PURSUANT TO SECTION 19-7-101(7), C.R.S., FOR CHILDREN/YOUTH RESIDING IN FOSTER CARE OR PARTICIPATING IN THE FOSTER YOUTH IN TRANSITION PROGRAM:~~

~~1. A JUVENILE COURT SHALL NOT LIMIT OR DENY THE RIGHTS ENUMERATED IN SUBSECTION (2) OF 19-7-101, C.R.S. UNLESS THE COURT FINDS BY CLEAR AND CONVINCING EVIDENCE THAT THERE ARE EXTRAORDINARY CIRCUMSTANCES AND THE LIMITATION OR DENIAL IS NECESSARY FOR THE SAFETY OF THE CHILD OR YOUTH IN FOSTER CARE;~~

~~2. THIS IS APPLICABLE TO ONLY THE RIGHTS ENUMERATED IN 19-7-101(2), C.R.S. AND DOES NOT ALTER THE HEARING REQUIREMENTS OR STANDARDS OTHERWISE ESTABLISHED IN TITLE 19.~~

~~B~~DC. ~~FOR OTHER CHILDREN/YOUTH NOT RESIDING IN FOSTER CARE OR NOT PARTICIPATING IN THE FOSTER YOUTH IN TRANSITION PROGRAM, ANY LIMITATIONS OR DENIALS OF THE CHILD'S/YOUTH'S RIGHTS AS LISTED IN SECTION 7.714.31.B MUST BE IN COMPLIANCE WITH THE WRITTEN POLICY AND PROCEDURE OF THE FACILITY. THE WRITTEN POLICY AND PROCEDURE OF THE FACILITY REGARDING LIMITATIONS OR DENIALS OF THE CHILD'S/YOUTH'S RIGHTS MUST INCLUDE THE FOLLOWING REQUIREMENTS:~~ The following children's/YOUTH'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/YOUTH, staff, and program from unreasonable and unnecessary intrusions and disruptions and from health and safety hazards. ALL FACILITIES ARE RESPONSIBLE TO ADHERE TO THE RIGHTS OF THE CHILDREN/YOUTH AND MUST ALSO TAKE REASONABLE STEPS TO ENSURE SAFETY OF ALL INVOLVED, AS IDENTIFIED IN WRITTEN POLICIES OF THE FACILITY.

1. Every child/YOUTH has the right to have access to letter-writing materials, including postage, and to have staff members of the facility assist ~~him/her~~ THEM if unable to write, prepare, and mail correspondence. EVERY CHILD/YOUTH HAS THE RIGHT TO RECEIVE AND SEND SEALED CORRESPONDENCE, INCLUDING EMAIL IF MADE AVAILABLE. NO INCOMING OR OUTGOING CORRESPONDENCE SHALL BE OPENED, DELAYED, HELD, OR CENSORED BY THE PERSONNEL OF THE FACILITY.

2. Every child/YOUTH has the right to have access to telephones to both make and receive calls in privacy.

3. Every child/YOUTH has the right to have convenient opportunities to meet with visitors.

4. Every child/YOUTH has the right to wear ~~his/her~~ THEIR own clothes, INCLUDING SHOES, keep and use ~~his/her~~ THEIR own personal possessions, and keep and be allowed to spend a reasonable sum of ~~his/her~~ THEIR 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/YOUTH'S rights as listed at Section 7.714.31,~~B~~C, the facility must, in compliance with the written policy and procedure of the facility:

1. Inform the child/YOUTH, ~~and~~ the child's/YOUTH'S PARENT(S), ~~family and~~ custodian(S), or legal guardian(S), in a language or mode of communication the child/YOUTH, PARENT(S), LEGAL GUARDIAN(S), and their custodian(s) can understand, of the conditions of and reasons for LIMITATIONS OR DENIALS ~~restriction or termination~~ of ~~his/her~~ THEIR rights AND DOCUMENT THE NOTIFICATION IN THE CHILD'S/YOUTH'S FILE.

2. Place a written report summarizing the conditions of and reasons for THE LIMITATIONS OR DENIALS ~~restriction, denial, or termination~~ of the child's/YOUTH'S rights in that child's/YOUTH'S FILE. ~~case record or treatment record.~~ Information pertaining to LIMITATIONS OR DENIALS ~~a restriction, denial, or termination of a child's/youth's rights~~ contained in the child's/YOUTH'S FILE ~~treatment or case record~~ must be made available, upon request, to the child/YOUTH or the child's/YOUTH'S guardian ad litem (GAL) or counsel for YOUTH (CFY).

3. When a LIMITATION OR DENIAL ~~restriction~~ of a child's/YOUTH'S rights affects another individual, the individual ~~shall~~ MUST be informed, in a language or mode of communication the individual can understand, of the conditions of and reasons for the action. ALL LIMITATIONS OR DENIALS MUST BE DOCUMENTED IN THE CHILD/YOUTH FILE AND MADE AVAILABLE TO THE DEPARTMENT UPON REQUEST.

4. ENSURE AN ADMINISTRATOR, CASE MANAGER OR LICENSED MENTAL HEALTH PROFESSIONAL CONDUCTS A DOCUMENTED REVIEW OF THE RESTRICTION AT LEAST EVERY SEVEN (7) DAYS. WRITTEN DOCUMENTATION OF THE REASON FOR CONTINUING THE RESTRICTION MUST BE MAINTAINED IN THE CHILD'S/YOUTH'S CASE FILE. IF A REVIEW CAN NOT BE OBTAINED WITHIN THE STATED TIME FRAME, THEN THE RESTRICTION MUST BE DISCONTINUED.

7.714.32 Children's/YOUTH'S Grievance Procedure ~~[Rev. eff. 7/2/06]~~

~~A. FOR CHILDREN/YOUTH RESIDING IN FOSTER CARE OR PARTICIPATING IN THE FOSTER YOUTH IN TRANSITION PROGRAM, A NOTICE MUST BE PROVIDED CONTAINING CONTACT INFORMATION FOR THE CHILD'S/YOUTH'S APPOINTED ATTORNEY; THE OFFICE OF THE CHILD PROTECTION OMBUDSMAN; THE APPROPRIATE COUNTY DEPARTMENT OF HUMAN OR SOCIAL SERVICES; AND THE DEPARTMENT OF HUMAN SERVICES.~~

1. ~~THE NOTICE MUST INCLUDE AN EXPLANATION THAT SUCH CHILDREN/YOUTH MAY SPEAK WITH THE PARTIES LISTED IN SECTION 7.714.32.A IF THEY HAVE ANY QUESTIONS, CONCERNS, OR GRIEVANCES RELATED TO THE CHILD/YOUTH RIGHTS.~~

~~B~~A. ~~FOR CHILDREN/YOUTH WHO ARE NOT RESIDING IN FOSTER CARE OR NOT PARTICIPATING IN THE FOSTER YOUTH IN TRANSITION PROGRAM,~~ 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/YOUTH, THEIR PARENT(S), CUSTODIAN(S), ~~and parent(s) or~~ LEGAL guardian(s) are entitled to report any grievance and shall not be subject to any adverse action as a result of filing ~~the~~ A grievance. IF REQUESTED, A CHILD/YOUTH SHALL HAVE A SUPPORT PERSON TO HELP THEM WRITE AND FILE A GRIEVANCE.

1. The facility must follow grievance procedures without alteration or interference and must respond IN WRITING to any grievance filed within SEVENTY-TWO (72) hours. THE FACILITY'S DOCUMENTED WRITTEN RESPONSE MUST INCLUDE WHETHER THE GRIEVANCE WAS APPROVED OR DENIED AND THE SPECIFIC REASONS FOR THE DECISION. THE RESPONSE MUST ALSO BE REVIEWED AND COMMUNICATED WITH THE CHILD/YOUTH IN THEIR PREFERRED LANGUAGE OR MODE OF COMMUNICATION.

2. This grievance procedure shall be made available to all children/YOUTH. ~~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/YOUTH's FILE~~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/YOUTH WITHIN SEVEN (7) BUSINESS DAYS. A copy of the child's/YOUTH'S grievance ~~may~~ MUST be sent to the parent OR LEGAL GUARDIAN(S) OR CUSTODIAN(S) AND THE PLACING AUTHORITY. UPON REQUEST, A COPY MUST BE PROVIDED TO THE CHILD'S/YOUTH'S GUARDIAN AD LITEM OR COUNSEL FOR YOUTH. ~~with the child's permission.~~

4. A list of the ~~resident~~ CHILDREN'S/YOUTH'S rights MAY ~~shall~~ be prominently posted in all facilities in areas frequented by children/YOUTH and legal guardians OR CUSTODIAN(S). ~~These rights shall include~~ THE CHILD/YOUTH MUST ALSO RECEIVE the grievance procedure; the name, address, and telephone number of their ~~resident~~ DESIGNATED CLIENT representative; as well as a list of agencies where complaints may be filed. GRIEVANCE FORMS MUST BE AVAILABLE TO CHILDREN/YOUTH WITHOUT REQUIRING ASSISTANCE FROM A STAFF MEMBER TO ACCESS AND SUBMIT THE FORM.

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.

C. THE CHILD/YOUTH HAS THE RIGHT TO FILE A COMPLAINT WITH THE CHILD PROTECTION OMBUDSMAN'S (CPO'S) OFFICE, THE DEPARTMENT, THE PLACING AUTHORITY, AND, IF APPLICABLE, THE APPOINTED LEGAL COUNSEL.

7.714.33 CHILDREN'S/YOUTH'S RIGHTS PURSUANT TO SECTION 19-7-101, C.R.S.

A. IN ADDITION TO THE RIGHTS DESCRIBED IN SECTION 7.714.31, CHILDREN/YOUTH IN FOSTER CARE OR PARTICIPATING IN THE FOSTER YOUTH IN TRANSITION PROGRAM MUST RECEIVE THE FOLLOWING RIGHTS DESCRIBED IN SECTION 19-7-101(2), C.R.S.:

1. FAIR AND EQUAL ACCESS, INCLUDING:

A. FREEDOM FROM DISCRIMINATION OR HARASSMENT ON THE BASIS OF ACTUAL OR PERCEIVED RACE OR ANCESTRY, ETHNIC GROUP, NATIONAL ORIGIN, RELIGION, SEX, SEXUAL ORIENTATION, GENDER IDENTITY, GENDER EXPRESSION, DISABILITY, MARITAL STATUS, FAMILIAL STATUS, SOURCE OF INCOME, MILITARY STATUS, OR HIV STATUS;

B. FREEDOM OF THOUGHT, CONSCIENCE, CULTURAL AND ETHNIC PRACTICE, AND RELIGION, INCLUDING THE RIGHT TO ATTEND OR REFUSE TO ATTEND CULTURAL, ETHNIC, AND RELIGIOUS SERVICES AND ACTIVITIES;

C. EXPRESSION OF THE CHILD'S OR YOUTH'S GENDER IDENTITY AND TO BE REFERRED TO BY THE CHILD'S OR YOUTH'S PREFERRED NAME OR GENDER PRONOUNS;

D. FREEDOM FROM THREATS, PUNISHMENT, OR RETALIATION FOR ASKING QUESTIONS, STATING CONCERNS, OR MAKING COMPLAINTS ABOUT A VIOLATION OF THE RIGHTS AND PROTECTIONS ESTABLISHED IN ARTICLE 7 OF TITLE 19, C.R.S.;

E. ACCESS TO SERVICES, PLACEMENT, AND STATE AND FEDERAL PROGRAMS AND SERVICES FOR WHICH THE CHILD OR YOUTH IS ELIGIBLE;

F. DEVELOPMENTALLY APPROPRIATE NOTIFICATION OF ANY BENEFITS FOR WHICH THE CHILD OR YOUTH IS ELIGIBLE OR RECEIVING, INCLUDING WRITTEN NOTIFICATION OF WHO IS SERVING AS A REPRESENTATIVE PAYEE, WHEN APPLICABLE, AND;

G. IF THERE IS A REPRESENTATIVE PAYEE WHO ACCEPTS PAYMENTS FOR A CHILD OR YOUTH, AN ACCOUNTING OF THE USE OF THOSE PAYMENTS WHEN REQUESTED BY THE CHILD OR YOUTH AND ON AN ANNUAL BASIS.

2. APPROPRIATE PLACEMENT AND CARE, INCLUDING:

A. APPROPRIATE ADULT GUIDANCE, SUPPORT, AND SUPERVISION IN A SAFE, HEALTHY, AND COMFORTABLE ENVIRONMENT IN WHICH THE CHILD OR YOUTH IS TREATED WITH FAIRNESS, RESPECT, AND DIGNITY;

B. CONSIDERATION OF THE CHILD'S OR YOUTH'S PREFERENCE REGARDING THE CHILD'S OR YOUTH'S PLACEMENT;

C. FREEDOM FROM PHYSICAL, SEXUAL, EMOTIONAL, OR OTHER ABUSE; CORPORAL PUNISHMENT; NEGLECT; OR ANY OTHER FORM OF INHUMANE TREATMENT, SUCH AS EXPLOITATION OR TRAFFICKING;

D. PLACEMENT IN THE LEAST RESTRICTIVE SETTING THAT IS APPROPRIATE TO THE CHILD'S OR YOUTH'S NEEDS, AND RECEIPT OF THE SERVICES AND SUPPORTS NECESSARY TO MAINTAIN THAT PLACEMENT;

E. FREEDOM FROM ABANDONMENT OR BEING LOCKED IN A ROOM, BUILDING, OR PREMISES, OR BEING SUBJECTED TO ISOLATION OR OTHER PHYSICAL OR MEDICAL RESTRAINT, UNLESS OTHERWISE AUTHORIZED BY STATUTE;

F. PLACEMENT WITH A FOSTER CARE PROVIDER WHO IS AWARE OF AND UNDERSTANDS THE CHILD'S OR YOUTH'S UNIQUE HISTORY AS IT RELATES TO THE CHILD'S OR YOUTH'S CARE AND WHO POSSESSES THE APPROPRIATE KNOWLEDGE AND SKILLS TO PROVIDE FOR THE CHILD'S OR YOUTH'S NEEDS;

G. APPLICATION OF THE REASONABLE AND PRUDENT PARENT STANDARD AS REQUIRED BY FEDERAL LAW;

H. RETURN TO THE CUSTODY OF A PARENT OR LEGAL GUARDIAN, CONSISTENT WITH APPLICABLE LEGAL STANDARDS AND CONSIDERING THE PREFERENCES OF THE CHILD OR YOUTH;

I. TIMELY COURT PROCEEDINGS AND DETERMINATIONS ABOUT THE CHILD'S OR YOUTH'S PLACEMENT;

J. EFFECTIVE CASE MANAGEMENT AND PLANNING THAT PRIORITIZES THE SAFE RETURN OF THE CHILD OR YOUTH TO THE CHILD'S OR YOUTH'S PARENTS, LEGAL GUARDIANS, RELATIVES, OR KIN, OR MOVING THE CHILD OR YOUTH TO OTHER FORMS OF PERMANENT PLACEMENT, IF NECESSARY;

K. A REQUIREMENT THAT THE REPRESENTATIVE PAYEE FOR THE CHILD OR YOUTH, INCLUDING THE DEPARTMENT OF HUMAN SERVICES IF IT IS ACTING AS THE REPRESENTATIVE PAYEE, USE ANY BENEFITS THE CHILD OR YOUTH RECEIVES TO MEET THE CHILD'S OR YOUTH'S INDIVIDUAL NEEDS AFTER THE REPRESENTATIVE PAYEE MEETS WITH THE CHILD OR YOUTH TO ASCERTAIN THE CHILD'S OR YOUTH'S CURRENT AND FORESEEABLE NEEDS; AND

L. TIMELY NOTIFICATION TO THE SOCIAL SECURITY ADMINISTRATION TO INITIATE THE TRANSFER OF BENEFITS FROM A REPRESENTATIVE PAYEE WHEN A CHILD OR YOUTH WHO IS RECEIVING BENEFITS LEAVES THE CUSTODY OF THE DEPARTMENT OF HUMAN SERVICES.

3. ACCESS AND COMMUNICATION, IN A SETTING THAT PROVIDES PRIVACY FOR IN-PERSON OR OTHER METHODS OF CONTACT, WITH PROFESSIONALS AND OTHER SUPPORTS, INCLUDING:

A. PERSONS WORKING ON THE CHILD'S OR YOUTH'S BEHALF, INCLUDING, BUT NOT LIMITED TO, CASEWORKERS, THE CHILD'S OR YOUTH'S GUARDIAN AD LITEM OR COUNSEL FOR YOUTH AND THEIR LEGAL TEAMS, MENTAL HEALTH PROFESSIONALS, TRIBE, FOSTER YOUTH ADVOCATES AND SUPPORTERS, COURT-APPOINTED SPECIAL ADVOCATES, EDUCATION RIGHTS HOLDERS, AND PROBATION OFFICERS. THE CHILD'S OR YOUTH'S CONTACT WITH THE CHILD'S OR YOUTH'S GUARDIAN AD LITEM, COUNSEL FOR YOUTH, OTHER ATTORNEYS, AND MEMBERS OF THE CHILD'S OR YOUTH'S LEGAL TEAM MUST PROTECT THE APPLICABLE LEGAL PRIVILEGES AND CONFIDENTIALITY;

B. THE CHILD'S OR YOUTH'S GUARDIAN AD LITEM OR COUNSEL FOR YOUTH, THE CHILD PROTECTION OMBUDSMAN, COUNTY DEPARTMENTS OF HUMAN/~~ OR~~ SOCIAL SERVICES, OR THE DEPARTMENT OF HUMAN SERVICES REGARDING ANY QUESTIONS, CONCERNS, OR VIOLATIONS OF THE RIGHTS AND PROTECTIONS ESTABLISHED IN ARTICLE 7 OF TITLE 19, C.R.S.; AND

C. CONNECTIONS TO THE CHILD'S OR YOUTH'S COMMUNITY AND SUPPORTS, INCLUDING COMMUNICATION AND CONTACT WITH PEOPLE OUTSIDE THE FOSTER CARE SYSTEM WHO ARE IMPORTANT TO THE CHILD OR YOUTH, UNLESS OTHERWISE LIMITED BY LAW OR COURT ORDER.

4. CONFIDENTIALITY AND PRIVACY, INCLUDING:

A. CONFIDENTIALITY OF ALL JUVENILE COURT RECORDS, CONSISTENT WITH EXISTING LAW;

B. FREEDOM FROM UNREASONABLE SEARCHES, LIMITATION OF USE, OR TAKING OF PERSONAL BELONGINGS OR OTHER UNREASONABLE INVASIONS OF PRIVACY; AND

C. REASONABLE EXPECTATIONS OF PRIVACY TO MAKE AND RECEIVE TELEPHONE CALLS AND SEND AND RECEIVE TEXT MESSAGES, E-MAIL, AND POSTAL MAIL.

5. EDUCATION, INCLUDING:

A. RECEIPT OF A FREE AND APPROPRIATE EDUCATION, ACCESS TO TRANSPORTATION TO EDUCATIONAL INSTITUTIONS, AND AN OPPORTUNITY TO PARTICIPATE IN SPORTS AND EXTRACURRICULAR, CULTURAL, PERSONAL ENRICHMENT, AND SOCIAL ACTIVITIES CONSISTENT WITH THE CHILD'S OR YOUTH'S AGE AND DEVELOPMENTAL LEVEL, INCLUDING ACCESS TO COMPUTER TECHNOLOGY AND THE INTERNET AS NECESSARY FOR THE CHILD'S OR YOUTH'S EDUCATION; AND

B. SCHOOL STABILITY THAT PRESUMES THE CHILD OR YOUTH WILL REMAIN IN THE SCHOOL OF ORIGIN, AS DEFINED IN SECTION 22-32-138, C.R.S., IN WHICH THE CHILD OR YOUTH IS ENROLLED AT THE TIME OF PLACEMENT, UNLESS

REMAINING IN THAT SCHOOL IS NOT IN THE CHILD'S OR YOUTH'S BEST INTERESTS.

6. BASIC ESSENTIALS, INCLUDING:

   A. ADEQUATE AND GENDER AND CULTURALLY AFFIRMING FOOD, CLOTHING, HYGIENE PRODUCTS, AND NECESSARY HYGIENE SERVICES;

   B. PERSONAL ALLOWANCE OR EMPLOYMENT OPPORTUNITIES APPROPRIATE TO THE CHILD'S OR YOUTH'S AGE AND DEVELOPMENTAL LEVEL, INCLUDING APPROPRIATE OPPORTUNITIES TO EXPERIENCE THE USE AND VALUE OF MONEY BY MAKING PURCHASES FOR ITEMS ACCORDING TO THE CHILD'S OR YOUTH'S CHOICE; AND

   C. PERSONAL BELONGINGS, INCLUDING WEARING THE CHILD'S OR YOUTH'S OWN CLOTHING, HAVING A SAFE PLACE TO STORE PERSONAL BELONGINGS, AND HAVING PERSONAL BELONGINGS TRANSPORTED IN APPROPRIATE LUGGAGE WITH THE CHILD OR YOUTH DURING OR SHORTLY AFTER A CHANGE OF PLACEMENT. PERSONAL BELONGINGS STORED AND TRANSPORTED AFTER A CHANGE OF PLACEMENT MUST BE MAINTAINED IN THE SAME OR BETTER CONDITION.

7. HEALTH CARE, INCLUDING:

   A. ADEQUATE AND APPROPRIATE MEDICAL, DENTAL, VISION, MENTAL HEALTH, AND SUBSTANCE USE DISORDER SERVICES;

   B. REPRODUCTIVE AND SEXUAL HEALTH CARE CONSISTENT WITH COLORADO STATE LAW;

   C. FREEDOM FROM THE ADMINISTRATION OF PRESCRIPTION MEDICATION OR OTHER CHEMICAL SUBSTANCES, UNLESS AUTHORIZED BY A PHYSICIAN OR, WHEN NECESSARY, COURT ORDER, AFTER AN INDIVIDUALIZED ASSESSMENT OF THE CHILD OR YOUTH, INCLUDING A CONSULTATION WITH THE CHILD OR YOUTH, AND WITH THE CHILD'S OR YOUTH'S CONSENT, CONSISTENT WITH COLORADO STATE LAW;

   D. ACCESS TO PRESCRIBED MEDICATIONS DURING A PLACEMENT CHANGE OR SIMILAR TRANSITION SO THE CHILD OR YOUTH DOES NOT EXPERIENCE A DISRUPTION IN THE AVAILABILITY OF NECESSARY PRESCRIPTION MEDICATION; AND

   E. NOTIFICATION OF THE MEDICATIONS THAT WERE PRESCRIBED TO THE CHILD OR YOUTH AND THE PURPOSE FOR EACH MEDICATION FOR THE CHILD OR YOUTH.

8. PARTICIPATION IN LEGAL AND CASE PLANNING, INCLUDING:

   A. APPOINTMENT OF A GUARDIAN AD LITEM OR COUNSEL FOR YOUTH PURSUANT TO SECTIONS 19-3-203 AND 19-7-308, C.R.S.

   B. ATTENDING AND FULLY PARTICIPATING IN ALL HEARINGS RELATED TO THE CHILD'S OR YOUTH'S CASE, INCLUDING ACCESS TO APPROPRIATE TRANSPORTATION FOR THE CHILD'S OR YOUTH'S COURT PROCEEDINGS, AND THE OPPORTUNITY TO BE HEARD SEPARATELY WHEN DEEMED NECESSARY BY THE COURT PURSUANT TO SECTION 19-1-106(5), C.R.S.;

   C. AT THE CHILD'S OR YOUTH'S REQUEST, ALLOWING CERTAIN PEOPLE TO BE PRESENT FOR THE CHILD'S OR YOUTH'S COURT PROCEEDINGS THAT TAKE PLACE PURSUANT TO SECTION 19-1-106, C.R.S.;

   D. CONSULTING WITH THE COURT REGARDING THE CHILD'S OR YOUTH'S PERMANENCY GOALS PURSUANT TO SECTION 19-3-702(1)(A), C.R.S.; AND

E. AS APPROPRIATE TO A CHILD'S OR YOUTH'S AGE AND DEVELOPMENTAL LEVEL, BEING INFORMED OF AND PARTICIPATING IN THE DEVELOPMENT OF THE CHILD'S OR YOUTH'S CASE PLAN, CONSISTENT WITH STATE AND FEDERAL LAW; AND

F. AS APPROPRIATE TO A CHILD'S OR YOUTH'S AGE AND DEVELOPMENTAL LEVEL, PARTICIPATION IN AND ACCOMPANIMENT OF SUPPORTS TO MEETINGS ABOUT THE CHILD'S OR YOUTH'S COURT PROCEEDINGS.

9. THE NECESSITIES TO BE SELF-SUFFICIENT DURING THE TRANSITION TO ADULTHOOD, INCLUDING:

A. CONSISTENT WITH THE CHILD'S OR YOUTH'S DEVELOPMENTAL LEVEL, ASSISTANCE WITH ESTABLISHING A BANK ACCOUNT, INCLUDING IDENTIFYING INSTITUTIONS WHERE A CHILD OR YOUTH MAY OPEN A BANK ACCOUNT, OBTAINING DOCUMENTS NECESSARY TO OPEN AN ACCOUNT, LEARNING HOW TO SPEND A REASONABLE AMOUNT OF MONEY, AND MANAGING PERSONAL INCOME. THIS DOES NOT CREATE AN OBLIGATION TO FUND THE CHILD'S OR YOUTH'S BANK ACCOUNT IF ONE IS CREATED;

B. HAVING ACCESS TO INFORMATION REGARDING THE WORK AND EDUCATIONAL OPTIONS AVAILABLE TO THE CHILD OR YOUTH, INCLUDING, BUT NOT LIMITED TO, INFORMATION REGARDING AVAILABLE FINANCIAL AID AND POSTSECONDARY EDUCATION SUPPORT CONSISTENT WITH STATE LAW;

C. BEING ALLOWED TO WORK AND DEVELOP JOB SKILLS, CONSISTENT WITH STATE LAW AND THE CHILD'S OR YOUTH'S AGE AND DEVELOPMENTAL LEVEL;

D. OBTAINING OR RECEIVING A FREE ANNUAL CREDIT REPORT FROM THE DEPARTMENT OF HUMAN SERVICES OR A COUNTY DEPARTMENT OF HUMAN/ ~~OR~~SOCIAL SERVICES AND THE ADDITIONAL CREDIT-RELATED AND IDENTITY THEFT PROTECTIONS PROVIDED IN SECTION 19-7-102, C.R.S. IF THE CHILD OR YOUTH IS IN THE LEGAL CUSTODY OF A COUNTY DEPARTMENT OF HUMAN/ ~~OR~~ SOCIAL SERVICES AND IS FOURTEEN (14) YEARS OF AGE OR OLDER;

E. WHEN THE YOUTH IS EIGHTEEN (18) YEARS OF AGE OR OLDER AND LEAVING FOSTER CARE, BEING PROVIDED WITH THE YOUTH'S BIRTH CERTIFICATE, SOCIAL SECURITY CARD, IMMIGRATION DOCUMENTS, HEALTH INSURANCE INFORMATION, MEDICAL RECORDS, EDUCATION RECORDS, EITHER A DRIVER'S LICENSE OR A STATE-ISSUED IDENTIFICATION CARD, WRITTEN INFORMATION CONCERNING THE YOUTH'S FAMILY HISTORY AND CONTACT INFORMATION FOR SIBLINGS, IF APPROPRIATE, AND PROOF OF FOSTER CARE PURSUANT TO SECTION 19-3-702(4)(D), C.R.S.;

F. NOTIFYING A YOUTH WHO IS TURNING SIXTEEN (16) YEARS OF AGE OF THE YOUTH'S ELIGIBILITY FOR THE FOSTER YOUTH IN TRANSITION PROGRAM;

G. ASSISTING A YOUTH IN APPLYING FOR BENEFITS THE YOUTH IS ELIGIBLE FOR OR CURRENTLY RECEIVING, TO ENSURE THAT BENEFITS CONTINUE ONCE THE YOUTH TURNS EIGHTEEN (18) YEARS OF AGE OR TRANSITIONS OUT OF FOSTER CARE, INCLUDING REDETERMINATION FOR THE PURPOSES OF SOCIAL SECURITY BENEFITS; AND

H. DRIVING INSTRUCTION FOR YOUTH FIFTEEN (15) YEARS OF AGE AND OLDER PURSUANT TO SECTION 26-5-115, C.R.S.

B. A JUVENILE COURT SHALL NOT LIMIT OR DENY THE RIGHTS ENUMERATED IN SECTION 19-7-101(2), C.R.S. UNLESS THE COURT FINDS BY CLEAR AND CONVINCING EVIDENCE THAT THERE ARE EXTRAORDINARY CIRCUMSTANCES AND THE LIMITATION OR DENIAL IS NECESSARY FOR THE SAFETY OF THE CHILD/YOUTH IN FOSTER CARE.

1. THIS IS APPLICABLE TO ONLY THE RIGHTS ENUMERATED IN SECTION 19-7-101(2), C.R.S. AND DOES NOT ALTER THE HEARING REQUIREMENTS OR STANDARDS OTHERWISE ESTABLISHED IN TITLE 19, C.R.S.

7.714.34 CHILDREN'S/YOUTH'S GRIEVANCE PROCEDURE PURSUANT TO SECTION 19-7-101, C.R.S.

A. ACCORDING TO SECTION 19-7-101(5), C.R.S., THE COUNTY DEPARTMENT OF HUMAN/SOCIAL SERVICES SHALL PROVIDE EACH CHILD OR YOUTH WHO IS FIVE (5) YEARS OF AGE OR OLDER WITH THE WRITTEN NOTICE DEVELOPED PURSUANT TO SUBSECTION 3 OF PART 7 OF TITLE 19, C.R.S. AT THE TIME OF THE CHILD'S OR YOUTH'S INITIAL PLACEMENT IN FOSTER CARE, AT EACH PLACEMENT CHANGE, AND AT LEAST ANNUALLY. THE NOTICE MUST BE IN THE CHILD'S OR YOUTH'S PRIMARY LANGUAGE.

B. THE NOTICE FORM REQUIRED BY SECTION 19-7-101(3), C.R.S., MUST BE PROVIDED TO CHILDREN/YOUTH RESIDING IN FOSTER CARE OR PARTICIPATING IN THE FOSTER YOUTH IN TRANSITION PROGRAM.

7.714.3~~3~~5 Religio~~n~~US AND SPIRITUAL PRACTICES ~~[Rev. eff. 7/2/06]~~

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

A. A child/YOUTH in care at the facility shall be allowed and encouraged to celebrate ~~his/her~~ THEIR religious AND/OR SPIRITUAL holidays.

B. Opportunity and assistance shall be provided for each child/YOUTH to practice theIR chosen/preferred religious AND/OR SPIRITUAL 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/YOUTH at the appropriate religious institution, SPIRITUAL CEREMONY, or at a study group for religious instruction.

C. A child/YOUTH may be invited to participate in the religious OR SPIRITUAL activities of the facility/AGENCY. PARTICIPATION IN ANY RELIGIOUS AND/OR SPIRITUAL ACTIVITIES OF A FACILITY ARE OPTIONAL AND NOT REQUIRED.

D. A child/YOUTH shall not be coerced or forced to participate in the religious AND/OR SPIRITUAL activities of the facility or to attend religious AND/OR SPIRITUAL services.

E. Prior to placement of the child/YOUTH at the facility, THE CHILD/YOUTH, theIR parent(s), LEGAL guardian(s), CUSTODIAN(S), and~~/or~~ placing agencY~~ies~~ SHALL ~~must~~ be notified of the practices, philosophy, and religious OR SPIRITUAL affiliation of the facility. DOCUMENTATION OF SUCH NOTIFICATION MUST BE MAINTAINED IN THE CHILD'S/YOUTH'S FILE.

F. ~~Any form of r~~Religious OR SPIRITUAL intervention SHALL NOT BE used by the facility IN ANY FORM to control or change a child's/YOUTH'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, DENTAL, BEHAVIORAL, OR MENTAL HEALTH care to a child/YOUTH because of the religious AND/OR SPIRITUAL ~~beliefs~~ AFFILIATIONS of the facility.

~~H. The child's/YOUTH'S PARENT(S)family, PLACING AUTHORITY, and/or LEGAL guardian(S) AND CUSTODIAN(S) must SHALL be consulted NOTIFIED prior to any planned OF ANY change in religious OR SPIRITUAL affiliation made by the child/YOUTH while he/she is THEY ARE in care at the facility, UNLESS INVOLVING THE PARENT(S) IS CONTRAINDICATED BY THE INDIVIDUAL CHILD'S/YOUTH'S PLAN.~~

7.714.4 ~~PROGRAM DESCRIPTION AND~~ COMPREHENSIVE ASSESSMENT AND INDIVIDUAL CHILD'S/YOUTH'S PLAN ~~[Rev. eff. 6/1/12]~~

~~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, physical management, restraint, and seclusion 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 face to face interaction 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 ninety (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 extremities.

~~6. Any treatment intervention that deprives a child of the use of his/her senses, including sight, hearing, touch, taste, or smell.~~

~~7. Physical management, restraint, and seclusion except as described at Section 7.714.53.~~

~~8. 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.~~

THE FOLLOWING SECTION APPLIES TO THE FOLLOWING LICENSE TYPES: CERTIFYING ~~SPONSORING~~ CHILD PLACEMENT AGENCIES OR COUNTIES FOR SPECIALIZED GROUP FACILITIES, RESIDENTIAL CHILD CARE FACILITIES (RCCFS), PSYCHIATRIC RESIDENTIAL TREATMENT FACILITIES (PRTFS), AND QUALIFIED RESIDENTIAL TREATMENT PROGRAMS (QRTPS). QRTPS MUST ALSO COMPLETE AN ASSESSMENT AS REQUIRED IN SECTIONS 7.705.208, 7.705.210, 7.705.211, AND 7.705.212.

A. COMPREHENSIVE ASSESSMENT

~~C.~~1. Within seven (7) calendar days of admitting a child/YOUTH inTO ~~care~~ A FACILITY, ~~a~~ THE facility OR PROVIDER shall begin a comprehensive assessment/evaluation of the child/YOUTH.

~~1~~2. The COMPREHENSIVE ASSESSMENT ~~assessment/evaluation~~ shall be conducted by a ~~planning~~ MULTIDISCIPLINARY team. This team shall include persons responsible for implementing the plan on a daily basis, WHICH INCLUDES PERSONS WHO SUPERVISE THE CHILD/YOUTH, PERSONS WHO DOCUMENT THE OUTCOMES OF THE ASSESSMENT OR EVALUATION AND PROVIDE TREATMENT INTERVENTIONS, and persons who have had direct interaction with and observation of the child/YOUTH. FOR THOSE FACILITIES THAT PROVIDE CLINICAL SERVICES, THE MULTIDISCIPLINARY TEAM SHALL INCLUDE LICENSED OR PROVISIONALLY LICENSED CLINICAL PROFESSIONALS AND/OR MEDICAL PROFESSIONALS WHERE REQUIRED AND AS OUTLINED IN SECTIONS 7.705.204 THROUGH 7.705.206.

3. THE COMPREHENSIVE ASSESSMENT SHOULD ASSESS FOR THE NEED OF A SPECIALIST TO INCLUDE, BUT NOT LIMITED TO, THE FOLLOWING: PSYCHIATRIC SERVICES, SPEECH THERAPY SERVICES, AND/OR PHYSICAL THERAPY SERVICES.

4. THE COMPREHENSIVE ASSESSMENT MUST BE COMPLETED BY THE FOURTEENTH (14TH) CALENDAR DAY AFTER ADMISSION.

5~~2~~. The ~~planning~~ MULTIDISCIPLINARY team shall GATHER HISTORICAL AND CURRENT INFORMATION TO assess and evaluate ~~the needs and strengths of~~ the child/YOUTH in at least the following areas ~~where information is available~~:

A. NAME, BIRTHDATE, AND DEMOGRAPHIC DATA;

B. REASON FOR REFERRAL;

C. IMMEDIATE SAFETY CONCERNS;

D. LEGAL GUARDIANSHIP AND CUSTODY;

E. CULTURAL FACTORS THAT MAY IMPACT PLACEMENT OR TREATMENT, INCLUDING AGE, ETHNICITY, LINGUISTIC/COMMUNICATION NEEDS, GENDER IDENTITY, SEXUAL ORIENTATION, RELATIONAL ROLES, SPIRITUAL BELIEFS, SOCIO-ECONOMIC STATUS, PERSONAL VALUES, LEVEL OF ACCULTURATION AND/OR ASSIMILATION, AND COPING SKILLS;

F~~a~~. Medical, health, and dental care, including ALLERGIES AND a health history of the child/YOUTH and family, and if ~~appropriate~~ APPLICABLE, health information regarding speech therapy, occupational therapy, and physical therapy needs of the child/YOUTH;

G~~b~~. Mental ~~and psychological~~ health~~, including~~ AND treatment history~~;~~, INCLUDING ALL CURRENT AND PAST ~~PSYCHOTROPIC~~ MEDICATIONS, HISTORICAL AND CURRENT INFORMATION ON DIAGNOSES, WHERE APPLICABLE; AND PREVIOUS PLACEMENTS IN TREATMENT FACILITIES;

H. TRAUMA HISTORY;

~~I. HISTORICAL AND CURRENT INFORMATION ON DIAGNOSES, WHERE APPLICABLE;~~

I~~J~~~~c~~. Education/vocation;

J~~K~~~~d~~. Personal/social development;

K~~L~~~~e~~. Family STRUCTURE and community relationships;

L~~M~~~~f~~. Vocational training, if ~~appropriate;~~APPLICABLE;

M~~N~~~~g~~. Recreation;

N~~O~~~~h~~. CAPACITY FOR SELF-CARE AND ACTIVITIES OF DAILY LIVING, INCLUDING ~~L~~Life skills development;

O~~P~~~~i~~. ~~Emancipation~~ INDEPENDENT LIVING skills, if ~~appropriate;~~APPLICABLE;

P~~Q~~~~j~~. Legal ISSUES ~~status~~ and history TO INCLUDE ALL ~~OF~~ ADJUDICATIONS AND~~/OR~~ CRIMINAL CHARGES AND CONVICTIONS;

Q~~R~~~~k~~. ~~Treatment/~~ OUT-OF-HOME placement history;

R~~S~~~~l~~. SUBSTANCE USE ~~Alcohol/substance abuse~~ history;

S~~T~~. STRENGTHS, ABILITIES, SKILLS, AND INTERESTS; AND

T~~U~~. THE NEEDS OF THE CHILD/YOUTH THAT MUST BE RESOLVED FOR THE CHILD/YOUTH TO MOVE TO A LESS RESTRICTIVE SETTING AND/OR SUCCESSFULLY DISCHARGE FROM THE FACILITY.

~~3~~6. All direct assessments~~/evaluations~~ of the child/YOUTH shall be conducted in the child's/YOUTH'S dominant language or mode of communication, including augmented or facilitated communication, if necessary.~~, and shall take into consideration t~~The child's/YOUTH'S age, ~~disability~~ DEVELOPMENTAL STAGE AND ABILITY TO UNDERSTAND, and cultural and religious OR SPIRITUAL background MUST BE TAKEN INTO CONSIDERATION.

B. INDIVIDUAL CHILD'S/YOUTH'S PLAN

~~D.~~1. On the basis of ~~this~~THE COMPREHENSIVE assessment~~/evaluation~~, and within fourteen (14) calendar days of admission, ~~a~~ THE facility shall develop an individual plan that is written, time-limited, strength-focused, outcome-based, and goal-oriented. The plan must support the Family Services Plan, IF APPLICABLE.

~~1.~~2. ~~A~~THE facility must provide an opportunity for the following persons to participate in the planning/evaluation process:

a. The primary caregiver for the child/YOUTH;

b. The child/YOUTH, CONSISTENT WITH STATE AND FEDERAL LAWS AND AS APPROPRIATE TO THE CHILD'S/YOUTH'S AGE AND DEVELOPMENTAL LEVEL~~unless contraindicated~~;

c. ~~His/her~~ P~~p~~arent(s) ~~or~~, LEGAL guardian(s), OR CUSTODIAN(S) unless contraindicated OR PROHIBITED BY LAW OR COURT ORDER;

d. Representatives of the placing agency;

e. School personnel;

f. Other persons significant in the child's/YOUTH'S life, such as a ~~GAL~~ GUARDIAN AD LITEM, COUNSEL FOR YOUTH, RESPONDENT attorney, religious advisor, COURT APPOINTED SPECIAL ADVOCATE (CASA), ~~and~~ therapist, OR OTHERS IDENTIFIED BY THE CHILD/YOUTH AND/OR FAMILY, UNLESS CONTRAINDICATED;~~.~~

g. When any of the above persons do not participate, the facility ~~shall~~ MUST have documentation of its efforts to involve the person~~s~~(s). When the involvement of THE CHILD/YOUTH, parent~~s~~(s) ~~or~~ LEGAL guardian(s), OR CUSTODIAN(S) of the child/YOUTH is deemed contraindicated OR INAPPROPRIATE by the agency or individual holding legal custody of the child/YOUTH, the reasons ~~for contraindication shall~~ MUST be documented. ANY DECISION TO NOT INVOLVE THE CHILD/YOUTH, PARENT(S), LEGAL GUARDIAN(S), OR CUSTODIAN(S) MUST BE APPROVED BY THE REFERRAL/PLACING AGENCY.

~~2.~~3. The individual CHILD'S/YOUTH'S plan ~~shall~~ MUST include the following components:

a. The findings of the COMPREHENSIVE assessment~~/evaluation.~~, INCLUDING THE STRENGTHS AND NEEDS OF THE CHILD/YOUTH.

B. DISCHARGE CRITERIA FOR THE CHILD/YOUTH TO SUCCESSFULLY MOVE TO A LESS RESTRICTIVE SETTING.

~~b~~C. ~~A statement of specific, measurable goals to be achieved or worked toward for the child and his/her family.~~ DOCUMENTATION SUPPORTING THE NEED FOR THE CURRENT LEVEL OF CARE.

D. GOALS FOR THE CHILD/YOUTH AND FAMILY THAT ADDRESS THE IDENTIFIED AREAS OF CONCERN RELATED TO THE CURRENT DIAGNOSIS, WHERE APPLICABLE; AND ADDRESS THE CURRENT AREAS OF FOCUS IDENTIFIED IN THE COMPREHENSIVE ASSESSMENT.

E. OBJECTIVES THAT ARE SPECIFIC, MEASURABLE, ACHIEVABLE, RELEVANT, AND TIME-LIMITED. THE OBJECTIVES MUST SUPPORT AND MEASURE THE CHILD'S/YOUTH'S PROGRESS TOWARD MEETING THE GOALS.

F. PRIOR TO PLACEMENT AND INCORPORATED INTO THE CHILD'S/YOUTH'S PLAN, A STATEMENT OF THE PLAN FOR SUPERVISION OF THE CHILD/YOUTH DURING THEIR PLACEMENT AT THE FACILITY WHEN THE INDIVIDUAL SUPERVISION PLAN DEVIATES FROM THE OVERALL SUPERVISION POLICIES AS STATED IN SECTIONS 7.705.47 AND 7.709.25.

G.~~c.~~ A PLAN ~~Strategy~~ for fostering, maintaining, and enhancing positive family relationships with the child/YOUTH and ~~his/her~~ THEIR family, including siblings~~, or~~ other individuals considered like family, or guardian(s) AND CUSTODIAN(S), and including GOALS FOR the development of a permanent home for the child/YOUTH.

H.~~d.~~ A PLAN ~~Strategy~~ for fostering, maintaining, and enhancing active community involvement for the child/YOUTH.

~~e. Specification of the daily activities intended to achieve the stated goals including, but not limited to, educational, vocational, and recreational activities.~~

I.~~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/YOUTH'S ongoing program activities.

J. A PLAN FOR BEHAVIOR SUPPORT OF THE CHILD/YOUTH. STAFF MEMBERS WHO ARE RESPONSIBLE FOR THE CARE OF THE CHILD/YOUTH MUST BE FAMILIAR WITH THE BEHAVIOR SUPPORT AND/OR INTERVENTION PLAN FOR EACH CHILD/YOUTH.

~~g. Long-term and short-term goals and the method to be used for evaluating the child's progress toward meeting the goals.~~

K.~~h.~~ ~~Goals and preliminary plans for~~ A PLAN FOR discharge, aftercare, MEDICATION MANAGEMENT, REFERRALS TO COMMUNITY RESOURCES, and moving to a less restrictive setting.

L.~~i.~~ Identification of all persons responsible for implementing or coordinating implementation of the plan.

M.~~j.~~ Signature, OR WRITTEN DOCUMENTATION OF PARTICIPATION AND REVIEW, by a representative of the facility, a representative of the placing agency, the child/YOUTH, ~~if indicated,~~ and the child's/YOUTH'S parent(s)~~ or~~, LEGAL guardian(s) AND CUSTODIAN(S). IF AN INDIVIDUAL CHILD'S/YOUTH'S PLAN IS NOT REVIEWED AND/OR SIGNED BY A MEMBER OF THE MULTIDISCIPLINARY TEAM, AN EXPLANATION AS TO WHY THE MEMBER DID NOT REVIEW AND/OR SIGN THE PLAN MUST BE DOCUMENTED IN THE CHILD'S/YOUTH'S FILE.

N.~~k.~~ ~~Assurance~~ WRITTEN DOCUMENTATION by the facility that the plan and any subsequent revisions are DEVELOPED IN CONSULTATION WITH THE CHILD/YOUTH WHEN THAT CHILD/YOUTH HAS ATTAINED FOURTEEN (14) YEARS OF AGE, explained to the child/YOUTH in care and ~~his/her~~THEIR parent(s),~~ or~~ LEGAL guardian(s), AND CUSTODIAN(S) in a language or manner of communication the child/YOUTH,~~ and~~ parent(s),~~ or~~ LEGAL guardian(s), AND CUSTODIAN(S) can understand.

O.~~l.~~ ~~Quarterly~~ R~~r~~eview of each plan~~,~~ MUST BE COMPLETED EVERY THIRTY (30) DAYS to evaluate the progress ~~which~~ TOWARD ACHIEVING the ~~short-term~~ GOALS AND OBJECTIVES~~ and long-term goals have been achieved and not achieved~~. The parties listed in Section 7.714.4~~,~~.~~D,~~B.~~1,~~2 ~~shall~~ MUST have a~~n~~ DOCUMENTED opportunity to participate in the reviews. The plan ~~shall~~ MUST support the Family ServiceS Plan, WHEN AVAILABLE.

P. THE INDIVIDUAL CHILD'S/YOUTH'S PLAN MUST INCLUDE A FAMILY SUPPORT GOAL ADDRESSING SERVICES AND/OR INTERVENTIONS TO BE PROVIDED BY THE PROGRAM, AS INFORMED BY THE STATE-APPROVED ASSESSMENT. THE INDIVIDUAL CHILD'S/YOUTH'S PLAN MUST INCORPORATE THE FINDINGS OF THE COMPREHENSIVE ASSESSMENT, TO INCLUDE ANY GOALS AS DETERMINED IN THE ASSESSMENT, IF AVAILABLE OR APPROPRIATE.

~~E~~4. If the~~ assessment/evaluation process or the~~ INDIVIDUAL CHILD'S/YOUTH'S plan requires the services of a specialist, such as a psychiatrist, psychologist, speech therapist, occupational therapist, or physical therapist, the specialist ~~shall~~ MUST be currently certified or licensed according to State law.

~~F. In addition to A-E, the following is required for an Individual Child's Plan in a Residential Child Care Facility that provides mental health services:~~

~~1. The licensed mental health professional responsible for providing care shall develop the mental health component of the Individual Child's Plan.~~

~~2. The multidisciplinary team shall include the Individual Child's Plan within its child-specific case file.~~

~~3. The multidisciplinary team shall develop and finalize a comprehensive Individual Child's Plan of care (as covered in Section 7.714.4,D,1, a-g) within fourteen (14) calendar days after the determination that mental health services are required. The plan shall be signed and dated by the child , the referral agency, the licensed mental health professional, and the parent/guardian. If a provisionally licensed mental health professional is providing the services, that person and his/her licensed supervisor shall also sign the Individual Child's Plan of care. The plan of care shall:~~

~~a. Address all areas listed at Section 7.714.4,C, together with mental health services and other needs including the child's presenting problems, physical health, emotional status, behavior, support system in the community, available resources, and discharge plan.~~

~~b. Include specific goals and measurable objectives, expected dates of achievement, specific discharge and transitional/aftercare and follow-up services, criteria to be met for termination of treatment, and specific treatment goals, including, but not limited to:~~

~~1) Expected resolution of the problem that necessitated mental health services and the specific functional achievement to be obtained in measurable terms.~~

~~2) Indications that planned services can reasonably be expected to improve the client's condition.~~

~~c. Specify the type, frequency, and duration of mental health 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 mental health service goals.~~

~~d. Specify that all RCCF mental health services are necessary to meet the needs of the child and that the mental health services are necessary to treat the child's current diagnosis.~~

~~e. Identify the provision of, or the referral for, services other than RCCF mental health services and shall document any court ordered treatment, including identifying the agency responsible for providing the court ordered treatment.~~

~~f. Be provided in all situations except emergency situations.~~

~~4. The RCCF shall ensure that the child and the legal guardian participate in the formulation, review, and revision of the Individual Child's Plan of care including, but not limited to, the mental health services portion of the plan. If the child or legal guardian is unable to participate or when his or her participation is clinically contraindicated, the RCCF 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.~~

~~5. 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.~~

~~6. There shall be documentation of the client's response to treatment approaches and changes in the Individual Child's Plan of care with the reasons for such changes.~~

~~G. The facility shall have a written plan for each individual in residence. Prior to the placement of the child in seclusion, the conditions for use of the seclusion 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.~~

7.714.5 ~~SAFETY, DISCIPLINE,~~ CONTRABAND, PHYSICAL ~~MANAGEMENT,~~ RESTRAINT, AND SECLUSION ~~[Rev. eff. 6/1/12]~~

~~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.~~

7.714.51 SEARCHES AND CONTROL OF CONTRABAND

A. THE FACILITY MUST HAVE A WRITTEN POLICY AND PROCEDURES FOR CONDUCTING SEARCHES AND CONTROL OF CONTRABAND REGARDING CHILDREN/YOUTH, STAFF MEMBERS, OR VISITORS. SEARCHES INVOLVING CHILDREN/YOUTH MUST BE COMPLETED UPON ADMISSION TO THE FACILITY OR WHEN IT IS SUSPECTED THAT A CHILD/YOUTH HAS CONTRABAND IN THEIR POSSESSION. SEARCHES MUST BE CONDUCTED IN THE LEAST INTRUSIVE MANNER POSSIBLE FOR THE REASON THE SEARCH WAS BEING CONDUCTED. ALL CONTRABAND MUST BE DISPOSED OF IN ACCORDANCE WITH THE FACILITY'S WRITTEN POLICY AND PROCEDURES. ALL SEARCHES MUST BE DOCUMENTED, INCLUDING THE REASON FOR THE SEARCH, THE PERSON(S) CONDUCTING THE SEARCH, AND THE RESULTS. THE POLICIES AND PROCEDURES AT A MINIMUM MUST INCLUDE:

1. PERSON SEARCHES OF CHILDREN/YOUTH MAY ONLY BE CONDUCTED WHEN THE FACILITY DEEMS IT NECESSARY TO DISCOURAGE INTRODUCTION OF CONTRABAND OR TO PROMOTE THE SAFETY AND SECURITY OF OTHER CHILDREN/YOUTH, STAFF MEMBERS, AND THE FACILITY. PERSON SEARCHES SHALL BE CONDUCTED AS FOLLOWS:

   A. THE CHILD/YOUTH MUST BE TOLD THEY ARE ABOUT TO BE SEARCHED IN A LANGUAGE OR MODE OF COMMUNICATION THE CHILD/YOUTH UNDERSTANDS AND PREFERS.

   B. THE CHILD/YOUTH MUST REMOVE OUTERWEAR (E.G. SWEATER, JACKET, COAT, GLOVES, HAT, AND SHOES) AND EMPTY ALL POCKETS.

   C. PERSON SEARCHES MUST BE PERFORMED IN AN AREA AND IN A MANNER THAT MAINTAINS THE DIGNITY AND PRIVACY OF THE CHILD/YOUTH.

   D. STAFF MEMBERS MUST BE TRAINED IN PROPER SEARCH TECHNIQUES PRIOR TO CONDUCTING SEARCHES.

   E. WHEN CONDUCTING A SEARCH OF A CHILD/YOUTH, STAFF MAY ONLY PHYSICALLY TOUCH CHILDREN/YOUTH WHEN IT IS REASONABLE TO SUSPECT THE CHILD/YOUTH POSSESSES AN ITEM(S) THAT POSES A SAFETY RISK TO THE CHILD/YOUTH, OTHER CHILDREN/YOUTH, OR STAFF. WHEN A SAFETY RISK IS NOT SUSPECTED, STAFF CONDUCTING SEARCHES OF CHILDREN/YOUTH MUST NOT PHYSICALLY TOUCH THE CHILD/YOUTH, BUT MAY SEARCH THE CHILD'S/YOUTH'S PROPERTY AND CLOTHING. ALL SEARCHES, WHETHER IT

INVOLVES PHYSICAL TOUCH OR NOT, MUST BE CONDUCTED IN A MANNER THAT PROTECTS AND RESPECTS THE CHILD'S/YOUTH'S PRIVACY. ~~CHILDREN/YOUTH MUST NOT BE TOUCHED BY STAFF MEMBERS DOING SEARCHES. SEARCHES MUST BE LIMITED TO THE CHILD/YOUTH'S PROPERTY AND CLOTHING.~~

~~F~~E. WHENEVER POSSIBLE, PERSON SEARCHES SHOULD ~~MUST~~ BE PERFORMED BY TWO (2) STAFF MEMBERS WITH AT LEAST ONE (1) STAFF MEMBER CONDUCTING THE PERSON SEARCH OF THE SAME GENDER IDENTITY THE CHILD/YOUTH BEING SEARCHED IDENTIFIES WITH.

~~G~~F STAFF MEMBERS MUST SEARCH THE CHILD/YOUTH'S REMOVED OUTER LAYER OF CLOTHING AND RETURN IT TO THE CHILD/YOUTH OR NOTIFY THE LEGAL GUARDIAN(S), CUSTODIAN(S), AND GUARDIAN AD LITEM AND/OR COUNSEL FOR YOUTH (IF ANY), IF ~~IT~~ CONTRABAND IS FOUND AND ~~IS~~ CONFISCATED.

~~H~~G. IF A STAFF MEMBER DETECTS ANYTHING THAT APPEARS TO BE DRUG PARAPHERNALIA, CONTRABAND, OR A WEAPON ~~UNUSUAL~~, THE STAFF MEMBER MUST CONTACT LAW ENFORCEMENT'S NON-EMERGENCY LINE TO CONFISCATE THE ITEM(S). THE CHILD'S/YOUTH'S NAME AND OTHER IDENTIFYING INFORMATION MUST NOT BE DISCLOSED DURING THE CALL TO LAW ENFORCEMENT. HOWEVER, IF A WEAPON IS DETECTED OR SUSPECTED, THE CHILD/YOUTH'S NAME AND OTHER IDENTIFYING INFORMATION MAY BE DISCLOSED DURING THE CALL TO LAW ENFORCEMENT IN ACCORDANCE WITH HIPAA, AS INCORPORATED BY REFERENCE IN SECTION 7.701.14.

~~I~~H. ~~PERSON~~ SEARCHES OF A PERSON THAT INCLUDE THE REMOVAL OF CLOTHING TO INSPECT A CHILD/YOUTH'S PRIVATE AREAS OF THEIR BODY, STRIP SEARCHES, BODY CAVITY SEARCHES, OR FRISK/PAT SEARCHES ARE PROHIBITED. IF A FACILITY HAS REASONABLE CAUSE TO SUSPECT A CHILD/YOUTH MAY HAVE HIDDEN AN OBJECT ON THEIR BODY OR IN THEIR BODY CAVITY, FACILITIES ~~ARE RESPONSIBLE FOR FOLLOWING THEIR POLICIES AND PROCEDURES, AND, IF NEEDED,~~ MUST CONTACT MEDICAL PERSONNEL.

J~~I~~. THE USE OF METAL DETECTION WANDS MAY BE USED UNLESS CONTRAINDICATED.

K~~J~~. IF THE CHILD/YOUTH REFUSES TO COMPLY, THE ADMINISTRATOR OR DESIGNEE MUST BE NOTIFIED IMMEDIATELY AND BE RESPONSIBLE FOR RESOLVING THE MATTER.

L~~K~~ THE PARENT(S), LEGAL GUARDIAN(S), CUSTODIAN(S), THE CHILD/YOUTH, AND PLACEMENT AGENCY MUST BE NOTIFIED IN WRITING AND PROVIDE AUTHORIZATION FOR SEARCH PRACTICES CONDUCTED BY THE FACILITY.

M~~L~~. ANY ADDITIONAL STEPS REGARDING SEARCHES MUST BE ADDED TO THE CHILD/YOUTH'S INDIVIDUAL PLAN. THE CHILD/YOUTH, PARENT(S), LEGAL GUARDIAN(S), CUSTODIAN(S), AND PLACEMENT AGENCY MUST BE NOTIFIED OF SUCH STEPS DURING QUARTERLY UPDATES TO THE INDIVIDUAL CHILD/YOUTH PLAN OR AS NEEDED.

2. ~~WHEN THERE IS DOCUMENTED EVIDENCE OF~~ IF THE PRESENCE OF CONTRABAND ~~THAT~~ POSES AN IMMINENT RISK TO THE CHILDREN/YOUTH IN CARE, THE USE OF LAW ENFORCEMENT AND/OR DRUG SNIFFING ANIMALS MAY BE USED AFTER SAFETY HAS BEEN ASSESSED.

3. IF DRUGS, DRUG PARAPHERNALIA, OR OTHER ILLEGAL SUBSTANCES ARE FOUND ON THE CHILD/YOUTH AT THE TIME OF THE SEARCH, THE FACILITY MUST CONFISCATE AND TURN THE CONTRABAND ~~THEM~~ IN TO LAW ENFORCEMENT AND DOCUMENT IF LAW ENFORCEMENT WAS NOT ABLE TO PICK THEM UP. A NOTIFICATION MUST THEN BE MADE TO THE CHILD'S/YOUTH'S TEAM, INCLUDING THE CHILD'S/YOUTH'S GUARDIAN AD LITEM AND/OR COUNSEL FOR YOUTH (IF ANY), AND THE DEPARTMENT. IF THE SITUATION RISES TO THE NEED OF A CRITICAL INCIDENT REPORT, ONE MUST BE FILED IN ACCORDANCE

WITH SECTION 7.701.52~~, AND THE STATE ABUSE AND NEGLECT HOTLINE MUST BE CALLED~~.

~~**7.714.52 Discipline**~~

~~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.~~

~~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) and/or counsel FOR YOUTH 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. Use of physical management, restraint or seclusion as discipline for a child.~~

7.714.53 PHYSICAL ~~MANAGEMENT,~~ RESTRAINT~~,~~ AND SECLUSION ~~[Rev. eff. 6/1/12]~~

A. IN ACCORDANCE WITH THE FOLLOWING RULES, ONLY FACILITIES AUTHORIZED BY THE DEPARTMENT MAY USE PHYSICAL RESTRAINT OR SECLUSION AS OUTLINED BY SPECIFIC FACILITY/LICENSE TYPE. THE FACILITY SHALL USE PHYSICAL RESTRAINT ONLY IN ACCORDANCE WITH THE FOLLOWING RULES.

B. ALL FACILITIES MUST COMPLY WITH ALL APPLICABLE STATUTES REFERENCED IN AND INCLUDING SECTION 26-20-103, C.R.S. REGARDING PROTECTION OF PERSONS FROM RESTRAINT.

C. FOSTER CARE PROVIDERS MAY NOT UTILIZE PHYSICAL RESTRAINT ~~OR SECLUSION~~ UNLESS APPROVED BY APPEAL WAIVER IN ACCORDANCE WITH SECTION 7.701.13. ~~IN ANY CAPACITY OR UNDER ANY CIRCUMSTANCES.~~

~~If a facility is authorized to use physical management, restraint or seclusion at the facility, the facility shall use physical management, restraint or seclusion only in accordance with the following rules unless the specific rules prohibit, limit or modify the requirements placed upon the facility.~~

7.714.531 Authorization OF PHYSICAL RESTRAINT ~~[Ref. eff. 6/1/12]~~

A. At the time of admission to the facility, the PARENT(S), legal GUARDIAN(S) OR custodian(S) of the ~~individual~~ CHILD/YOUTH ~~shall~~ MUST be notified that physical ~~management~~ RESTRAINT ~~or seclusion~~ may BE performed in ~~certain circumstances~~ ACCORDANCE WITH SECTION 26-20-103(1), C.R.S. For a facility to perform physical ~~management~~ RESTRAINT ~~or seclusion~~, the legal GUARDIAN(S) OR custodian(S) must give written consent for physical ~~management~~ RESTRAINT ~~and/or seclusion~~ to be performed on the ~~individual~~ CHILD/YOUTH. No physical ~~management or~~ RESTRAINT ~~seclusion shall~~ MAY be performed on an individual without the specific written permission of the ~~individual's~~ CHILD'S/YOUTH'S legal GUARDIAN(S) OR custodian(S). YOUTH EIGHTEEN (18) YEARS OF AGE OR OLDER MAY CONSENT FOR THEMSELVES.

B. UPON A CHILD'S/YOUTH'S ADMISSION TO A FACILITY AND AT LEAST ANNUALLY THEREAFTER, THE FACILITY OR PROVIDER MUST OBTAIN INFORMATION AND DOCUMENTS RELEVANT TO THE USE OF REACTIVE STRATEGIES FROM A VARIETY OF SOURCES FOR THE CHILD'S/YOUTH'S RECORDS. APPROPRIATE SOURCES INCLUDE THE CHILD/YOUTH, THEIR FAMILY MEMBERS, TREATING MEDICAL PROFESSIONALS, AND OTHERS FAMILIAR WITH THE CHILD/YOUTH.

1. THE CHILD'S/YOUTH'S RECORDS MUST INCLUDE THE FOLLOWING DOCUMENTATION:

A. A PHYSICIAN'S REPORT OF MEDICAL CONDITIONS OR PHYSICAL LIMITATIONS THAT WOULD PLACE THEM AT RISK OF PHYSICAL INJURY DURING RESTRAINT OR SECLUSION OR OTHERWISE PRECLUDE THE USE OF ONE (1) OR MORE EMERGENCY STRATEGIES;

B. DOCUMENTATION OF ANY HISTORY OF TRAUMA, SUCH AS A HISTORY OF SEXUAL OR PHYSICAL ABUSE THAT THE CHILD/YOUTH, FACILITY, OR PROVIDERS BELIEVE TO BE RELEVANT TO THE USE OF EMERGENCY STRATEGIES;

C. MEDICAL CONDITIONS OR PHYSICAL LIMITATIONS THAT MIGHT CREATE A RISK TO THE INDIVIDUAL, INCLUDING, BUT NOT LIMITED TO:

1. OBESITY;

2. CARDIAC CONDITIONS;

3. PREGNANCY;

4. ASTHMA OR OTHER RESPIRATORY CONDITIONS;

5. BACK CONDITIONS OR SPINAL PROBLEMS;

6. SEIZURE DISORDERS;

7. DEAFNESS;

8. BLINDNESS;

9. LIMITATIONS ON RANGE OF MOTION;

10. OSTEOPOROSIS;

11. OSTEOPENIA; AND

12. HEMOPHILIA.

2. IN ADDITION TO THE ANNUAL REVIEW:

A. THE CHILD'S/YOUTH'S FILE INFORMATION MUST BE UPDATED WHENEVER THERE IS A CHANGE IN THE CHILD'S/YOUTH'S PHYSICAL OR PSYCHOLOGICAL CONDITION THAT MIGHT AFFECT THEIR TOLERANCE OF PHYSICAL RESTRAINT TECHNIQUES.

B. THE CHILD'S/YOUTH'S FILE MUST ALSO BE UPDATED IN COMPLIANCE WITH ANY STATE-APPROVED ASSESSMENTS.

7.714.532 Uses Of Physical ~~Management,~~ Restraint ~~and Seclusion [Rev. eff. 6/1/12]~~

A. ~~Facility staff, including pre-approved family foster care home providers, may only use:~~ PURSUANT TO SECTION 26-20-103, C.R.S., FACILITY STAFF MAY ONLY USE RESTRAINT IN CASES OF EMERGENCY, AS DEFINED IN SECTION 26-20-102(3), C.R.S., AND AFTER A DETERMINATION THAT SUCH ALTERNATIVES WOULD BE INAPPROPRIATE OR INEFFECTIVE.

B. PRIOR TO THE USE OF RESTRAINT, THE FACILITY MUST HAVE TRIED ALL POSITIVE AND CONSTRUCTIVE METHODS OF MANAGING THE CHILD'S/YOUTH'S BEHAVIOR, BASED ON POLICIES AND PROCEDURES OF THE FACILITY AND COMPONENTS OF THE INDIVIDUAL CHILD'S/YOUTH'S PLAN, INCLUDING BUT NOT LIMITED TO, THE IMPLEMENTATION OF A STRUCTURED AND CONSISTENT BEHAVIOR MANAGEMENT PROGRAM, PHYSICAL STRUCTURING OF THE ENVIRONMENT, TALKING WITH THE CHILD/YOUTH, PRAISE FOR APPROPRIATE BEHAVIOR, SKILL TRAINING AND DEVELOPMENT, ASSISTING THE CHILD/YOUTH WITH THE EXPRESSION OF FEELINGS, AND DE-ESCALATION OF THE SITUATION.

C. ONLY FACILITY STAFF THAT HAVE BEEN APPROPRIATELY TRAINED OR CERTIFIED IN ACCORDANCE WITH A RESTRAINT MODEL THAT INCLUDES NATIONALLY-RECOGNIZED CRITERIA THAT IS EVIDENCE, PERFORMANCE, AND COMPETENCY BASED MAY USE RESTRAINT.

D. RESTRAINT MUST ONLY BE USED FOR THE PERIOD OF TIME NECESSARY TO ACCOMPLISH ITS PURPOSE. THE CHILD/YOUTH MUST BE RELEASED FROM A RESTRAINT WITHIN FIFTEEN (15) MINUTES AFTER THE INITIATION OF THE RESTRAINT, EXCEPT WHEN PRECLUDED FOR SAFETY

REASONS PURSUANT TO SECTION 26-20-104(4), C.R.S., WHICH MUST BE DOCUMENTED IN THE INDIVIDUAL FILE. REPEATED APPLICATION AND RELEASE OF THE RESTRAINT IN ORDER TO CIRCUMVENT THE FIFTEEN (15) MINUTES IS PROHIBITED.

E. THE FOLLOWING REACTIVE STRATEGIES ARE PROHIBITED:

1. PHYSICAL RESTRAINT OR RESTRICTIVE PROCEDURES INVOLVING NOXIOUS OR PAINFUL STIMULI;

2. UNTESTED OR EXPERIMENTAL PROCEDURES;

3. ANY PHYSICAL CRISIS MANAGEMENT TECHNIQUE THAT MIGHT RESTRICT OR OBSTRUCT A CHILD'S/YOUTH'S AIRWAY OR IMPAIR BREATHING, INCLUDING TECHNIQUES WHEREBY STAFF PERSONS USE THEIR HANDS OR BODY TO PLACE PRESSURE ON THE CHILD'S/YOUTH'S HEAD, NECK, BACK, CHEST, ABDOMEN, OR JOINTS;

4. RESTRAINT OF A CHILD'S/YOUTH'S HANDS WITH OR WITHOUT A MECHANICAL DEVICE, BEHIND THEIR BACK MUST ONLY BE USED IN ACCORDANCE WITH THE APPROVED RESTRAINT MODEL USED BY THE FACILITY;

5. PHYSICAL HOLDS RELYING ON THE INDUCEMENT OF PAIN FOR BEHAVIORAL CONTROL;

6. MOVEMENT THAT RESULTS IN HYPEREXTENSION OR TWISTING OF BODY PARTS;

7. ANY MANEUVER THAT CAUSES A LOSS OF BALANCE WITHOUT PHYSICAL SUPPORT (SUCH AS TRIPPING OR PUSHING) FOR THE PURPOSE OF CONTAINMENT;

8. ANY PHYSICAL RESTRAINT PROCEDURE IN WHICH A PILLOW, BLANKET, OR OTHER ITEM IS USED TO COVER THE CHILD'S/YOUTH'S FACE AS A PART OF THE RESTRAINT PROCESS;

9. ANY PHYSICAL RESTRAINT PROCEDURE THAT MAY EXACERBATE A KNOWN MEDICAL OR PHYSICAL CONDITION OR ENDANGER THE CHILD'S/YOUTH'S LIFE;

10. USE OF ANY RESTRAINT ~~CONTAINMENT~~ TECHNIQUE MEDICALLY CONTRAINDICATED FOR A CHILD/YOUTH;

11. RESTRAINT ~~CONTAINMENT~~ WITHOUT CONTINUOUS MONITORING AND DOCUMENTATION OF VITAL SIGNS AND STATUS WITH RESPECT TO RELEASE CRITERIA;

12. RESTRAINT SHOULD NEVER PLACE ANY WEIGHT ON THE CHEST, ABDOMEN, HEAD, NECK, BACK, OR ON ANY JOINTS OF A CHILD/YOUTH;

13. IF THERE ARE ANY CIRCUMSTANCES THAT MAY POSE A THREAT TO THE HEALTH AND SAFETY OF A CHILD/YOUTH ON THE GROUNDS OF THE LICENSED FACILITY, INCLUDING, BUT NOT LIMITED TO, SOFT, PLIABLE SURFACES, CONCRETE, ASPHALT, FOREIGN OBJECTS, OR AREAS INCLUDING BROKEN GLASS, OR OUTSIDE IN INCLEMENT WEATHER, STAFF MUST REFRAIN FROM RESTRAINING THE CHILD/YOUTH. STAFF MAY ONLY UTILIZE RESTRAINT IF THE CHILD/YOUTH IS ABLE TO BE POSITIONED AWAY FROM THE CIRCUMSTANCES THAT POSE A HEALTH/SAFETY HAZARD AND ONLY IN CASES OF EMERGENCY, AS DEFINED IN SECTION 26-20-102(3), C.R.S. ~~AND CALL LAW ENFORCEMENT.~~

14. STAFF MUST MAKE EVERY EFFORT TO NOT USE PHYSICAL RESTRAINT IN ANY SETTING OUTSIDE OF THE LICENSED FACILITY. IF THERE IS NO OTHER ALTERNATIVE AND THE SITUATION CANNOT BE CONTROLLED BY THE STAFF MEMBER(S) PRESENT THROUGH THE USE OF RESTRAINT TECHNIQUES THAT ARE DESCRIBED WITHIN THE FACILITY'S APPROVED RESTRAINT MODEL, STAFF MUST CALL LAW ENFORCEMENT. ~~AND USE~~

PHYSICAL RESTRAINT SHALL BE USED ONLY IN ACCORDANCE WITH AN EMERGENCY SITUATION, AS DEFINED IN SECTION 26-20-102(3), C.R.S.

15. RESTRAINT MUST NEVER BE USED AS PUNISHMENT OR DISCIPLINARY SANCTION, AS PART OF A TREATMENT PLAN OR BEHAVIOR MODIFICATION PLAN, FOR THE PURPOSE OF RETALIATION BY STAFF OR FOR THE PURPOSE OF PROTECTION UNLESS ORDERED BY THE COURT OR IN AN EMERGENCY.

~~A. Restraint or seclusion in an emergency after the failure of less restrictive alternatives or after a determination that such alternatives would be inappropriate or ineffective under the circumstances.; and,~~

~~B. Restraint if prior to the use of restraint:~~

~~1. Staff have been appropriately trained or certified in accordance with a model that includes nationally recognized criteria; and,~~

~~2. The facility tried all positive and constructive methods of dealing with the individual, including, but not limited to, implementation of a structured and consistent behavior management program, physical REstructuring of the environment, talking with the individual, praise for appropriate behavior, skill training and development, assisting the individual with the expression of feelings, and de-escalation of the situation.~~

~~In addition to the circumstances delineated in these rules, Seclusion may be used pursuant to a valid court order that the individual is kept separate from the general population.~~

7.714.533 ~~Facility Policies And/Or Procedures~~ IMPLEMENTATION OF PHYSICAL RESTRAINT ~~[Rev. eff. 6/1/12]~~

Facility ~~policies and/or~~ procedures shall, at a minimum, include and comply with the following:

A. The use of prone restraint is prohibited. Momentary (as quickly as possible, but not to exceed five (5) minutes) utilization of a prone position is permissible only during the transitional measure portion of a physical RESTRAINT ~~management~~. REPEATED APPLICATION AND RELEASE OF THE PRONE POSITION IN ORDER TO CIRCUMVENT THE FIVE (5) MINUTE CRITERIA IS PROHIBITED.

B. ~~When using a physical or mechanical restraint method,~~ I~~i~~n the course of a physical RESTRAINT ~~management~~, trained ~~or~~ AND certified staff ~~shall~~ MUST be positioned within arm's length of the ~~individual~~ CHILD/YOUTH and continuously monitor ~~the person~~ to assure that the ~~individual~~ CHILD/YOUTH is properly positioned, that the i~~ndividual~~ CHILD/YOUTH's blood circulation is not restricted, that the ~~individual~~ CHILD/YOUTH's BREATHING AND/OR airway is not HINDERED OR obstructed, and that the ~~individual~~ CHILD/YOUTH's other physical needs are met. Staff ~~shall~~ MUST not place ~~excessive~~ WEIGHT OR pressure on the chest, abdomen or back of a~~n individual~~ CHILD/YOUTH or inhibit or impede the ~~individual~~ CHILD/YOUTH's ability to breathe. Staff ~~shall~~ MUST continuously monitor to ensure that the breathing of the ~~individual~~ CHILD/YOUTH in such restraint is not compromised. If the ~~individual~~ CHILD/YOUTH is exceedingly agitated, staff may move ~~further~~ FARTHER from the ~~individual~~ CHILD/YOUTH, but must still be able to effectively OBSERVE, assess, and respond as necessary, to the ~~individual~~ CHILD/YOUTH's physical condition. If breathing is RESTRICTED OR compromised in any way, the restraint ~~shall~~ MUST be discontinued immediately and a physical assessment ~~shall~~ MUST occur to determine if medical attention is needed.

1. A transitional measure may be used during an episode of physical RESTRAINT ~~management~~ to effectively gain initial physical control of an individual in order to prevent harm to self or others. A transitional measure may result in a restraint to maintain prolonged physical control or containment of an individual.

2. THE FACILITY SHALL PROVIDE ADEQUATE NUMBERS OF STAFF TO ASSURE THE HEALTH AND SAFETY AND THE PROPER CARE AND TREATMENT OF THE CHILDREN/YOUTH IN CARE AS OUTLINED IN SECTION 7.705.46 AND SECTION 7.714.91.A.

C. THE RESTRAINT MUST BE USED ONLY FOR THE PURPOSE OF PREVENTING THE CONTINUATION OR RENEWAL OF AN EMERGENCY; ONLY FOR THE PERIOD OF TIME NECESSARY TO ACCOMPLISH

ITS PURPOSE; AND IN THE CASE OF PHYSICAL RESTRAINT, ONLY IF NO MORE FORCE THAN IS NECESSARY TO LIMIT THE INDIVIDUAL'S FREEDOM OF MOVEMENT IS USED.

D. RESTRAINT MAY BE UTILIZED ONLY IF CERTIFIED STAFF PERSONS ARE AVAILABLE IN SUFFICIENT NUMBER TO ENSURE ITS SAFE IMPLEMENTATION AND THAT THERE ARE ENOUGH STAFF TO MEET THE INDIVIDUAL NEEDS OF EACH CHILD/YOUTH IN CARE. THE STAFF MUST USE NO MORE FORCE THAN IS NECESSARY TO LIMIT THE CHILD'S/YOUTH'S FREEDOM OF MOVEMENT.

E. THE PHYSICAL RESTRAINT REQUIRES CONTINUOUS STAFF MONITORING TO INCLUDE, BUT NEED NOT BE LIMITED TO, ENSURING BREATHING IS NOT RESTRICTED OR COMPROMISED AND THE NEED TO TERMINATE THE RESTRAINT IF THERE IS A MEDICAL EMERGENCY FOR THE SAFETY OF THE CHILD/YOUTH AND STAFF INVOLVED.

~~2. When mechanical restraints are used, staff shall provide relief periods, except when the individual is sleeping, of at least ten minutes as often as every two hours, so long as relief from the mechanical restraint is determined to be safe. During such relief periods, the staff shall ensure proper positioning of the individual and provide movement of limbs, as necessary. In addition, during such relief periods, staff shall provide assistance with toileting, as necessary. The individual's dignity and safety shall be maintained during relief periods. Staff shall note the relief periods granted in the record of the individual being restrained.~~

~~3. An individual in physical restraint shall be released from such restraint within fifteen minutes after physical control of the individual is gained, except when precluded for safety reasons and documented accordingly.~~

~~C. Chemical restraint is prohibited.~~

~~D. When seclusion is utilized:~~

~~1. Relief periods shall be provided for reasonable access to toilet facilities. While in seclusion, staff shall be physically present and individuals shall be visually observed no less than every fifteen (15) minutes.~~

~~2. When a facility utilizes seclusion, there shall be a seclusion room supervisor who is a full-time facility staff member, is a Colorado Licensed Clinical Social Worker (LCSW), a 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 seclusion and the seclusion room. If the seclusion room supervisor is not a psychiatrist or a licensed psychologist, there shall be such a person contracted to provide consultation with the seclusion room supervisor and staff. Staff will obtain authorization from the seclusion room supervisor prior to utilizing the seclusion room.~~

~~E. Each program choosing to use physical management restraint and/or seclusion is to have a written policy, and practices consistent with these rules and the written policy. The program's written policy must include at a minimum the following information:~~

~~1. Documentation of the physical management model used. The physical management model shall comport with the requirements provided in section 7.714.53, et seq.~~

~~2. Documentation of the type of behavior management system utilized by the program.~~

~~3. The training, which satisfies the requirements of section 7.714.53, et seq., provided to staff members approved to use physical management and seclusion, and the type and number of hours of training each staff member is required to take as required by the model.~~

~~4. Which staff members will be approved by the program to use physical management and seclusion. Staff members authorized to perform seclusion shall be from one or more of the following positions: administrator, assistant administrator, child care staff, social worker, teacher, psychologist, psychiatrist, or nurse.~~

5. ~~The preventive and de-escalation techniques and positive behavioral intervention that must be attempted by staff prior to the use of physical management and seclusion.~~

6. ~~How the facility continuously monitors physical management, how the facility will be physically present, such that the staff member is able to immediately respond to the needs of the individual in seclusion, and how the individual in seclusion shall be visually observed no less than every fifteen (15) minutes.~~

7. ~~The philosophy and use of the seclusion room, the intake process, the evaluation of an individual while in the room, emergency procedure while an individual is in seclusion and method for a resident's grievance regarding the use of the room.~~

8. ~~The type of written documentation the facility maintains of each physical management or seclusion. The record shall be prepared by each staff member involved in the physical management and/or seclusion and shall contain all of the following:~~

   a. ~~A description of the incident including the name of the individual, date and time of day, the name of any witnesses to the incident, staff members involved, their position at the facility and their involvement in the physical management, and how long the physical management or seclusion lasted, the person who authorized the seclusion, those that visited the individual during the seclusion, the exact time of each seclusion fifteen (15)minute monitoring check and the behavior of the individual at each monitoring check, time and date of each seclusion counseling visit, the person who authorized the release from seclusion, and the time and date of the release.~~

   b. ~~The precipitating incident(s) and the individual's behavior before the restraint or seclusion.~~

   c. ~~What specific actions were attempted and/or taken to de-escalate the situation and control, calm, or contain the individual and the effect of these de-escalating actions upon the individual.~~

   d. ~~The staff's decision-making process to perform a physical management and/or seclusion, A description of the physical management and/or seclusion including the individual's physical, emotional and behavioral condition prior to, during and after the physical management, including, but not limited to, breathing, pulse, color, and signs of choking or respiratory distress, and in the case of seclusion, the time the individual was last given access to restroom facilities, the time the individual had opportunity for exercise if exercise is required under the individual child plan, when and what type of medications were given and by whom, when the individual's last staff contact occurred, and the stated reasons and/or authorization to continue any seclusion.~~

   e. ~~A description of the debriefing and evaluation with the individual and with the staff following the physical management to address other options that may have been successful in de-escalating the individual.~~

   f. ~~An indication of review by the neutral reviewer as to the appropriateness of the physical management or seclusion.~~

   g. ~~Verification that notification of the use of physical management or seclusion was made to the legal custodian.~~

9. ~~Evaluation by an objective, internal professional of the documentation of each physical management to determine appropriateness and effectiveness of the preventive and de-escalation techniques used and the physical management performed, as well as assessing carefully any injuries, bruising, or death.~~

10. ~~The requirement that staff not restrain an individual in physical areas that may pose a threat to the health and safety of the individual including, but not limited to, soft, pliable surfaces, concrete, asphalt, or areas including broken glass.~~

11. ~~All facilities shall ensure that staff are trained to explain, at time of admission, the use of physical management, restraint and/or seclusion to the individual, legal custodian, and if appropriate, to the individual's family. The explanation provided to the legal custodian and individual will occur in a~~

~~language or communication understandable to him/her and will include the purpose of physical management, the physical management model used, and the circumstances when a physical management may occur.~~

~~12. Notification to the legal custodian of each use of physical management, restraint and/or seclusion, no later than the end of the day that the physical management, restraint or seclusion occurred with a written report completed and given to the legal custodian by the next business day.~~

~~13. Emergency procedures, including First Aid, that will be used if an individual or staff member is seriously injured during a physical management.~~

~~14. The requirement of staff to report any critical incident, or child abuse or neglect pursuant to Colorado state law and Sections 7.701.52 and 7.701.53.~~

~~15. If seclusion is performed, the purpose of the seclusion room, evaluation of the individual while in the room, the emergency procedures for an individual in seclusion, and the method for the resident's right to grieve the use of the room.~~

~~7.714.534 SECLUSION [Rev. eff. 6/1/12]~~

~~A. Seclusion may only occur for the period of time necessary to accomplish its purpose. The individual shall be released from seclusion when state of emergency has ceased. Seclusion shall not exceed two (2) hours per incident unless required by the individual's treatment plan or individual child plan.~~

~~B. At the time of placement of the individual in seclusion, the neutral reviewer shall be notified in person or by telephone. Leaving a message is not notification, and if the neutral reviewer cannot be contacted in person or by telephone, the individual may not be placed in a seclusion room.~~

~~C. There must be notification of another staff member, who is currently on duty, that an individual has been placed in seclusion.~~

~~D. A staff member must be physically present, at all times when an individual is locked inside the room.~~

~~E. Physical Requirements for a Seclusion Room~~

~~1. The seclusion room shall be located in reasonable proximity to the living unit or other areas of activity.~~

~~2. The seclusion room shall be a minimum of eighty (80) square feet in size.~~

~~3. The seclusion room shall be kept in a clean and sanitary condition.~~

~~4. 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.~~

~~5. There shall be no features by which an individual might injure him or her self within the seclusion room such as utility pipes, cleaning equipment and materials, or mirrors.~~

~~6. Exterior windows are not recommended, but if there are window panes they shall be of shatter-resistant material and have psychiatric screening.~~

~~7. 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.~~

~~8. The seclusion room shall have a lighted, soothing environment. The individual 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.~~

~~9. There shall be no more than one locked door between the individual and the staff member.~~

~~10. If the seclusion room is soundproof, there must be an intercom system which is activated when an individual is in the room.~~

~~F. Approvals Necessary to Operate a Seclusion Room~~

~~1. The written approval of the local fire department and the Colorado Department of Human Services must be received prior to the initial use of the seclusion room.~~

~~2. The licensee shall request such an inspection and 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.~~

~~3. If it is found, at the time of inspection by the State Department of Human Services, 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 facility shall cease secluding any individual in the locked room until corrections are completed and authorization is given by the Colorado Department of Human Services.~~

7.714.53~~5~~4 STAFF TRAINING ~~[Rev. eff. 6/1/12]~~

A. Staff utilizing any physical RESTRAINT ~~management~~ in facilities or programs shall be trained in the appropriate use and implementation of a model that includes nationally-recognized criteria AND A CULTURALLY-SENSITIVE, TRAUMA-INFORMED CARE COMPONENT THAT IS EVIDENCE, PERFORMANCE, AND COMPETENCY BASED, prior to any staff being approved to use physical RESTRAINT ~~management~~. The model ~~shall~~ MUST include, at a minimum, the following:

1. ~~Annual~~ ~~S~~staff training and/or certification, to include training upon hire, and ongoing (at least every six (6) months) refresher training or practice exercises for each staff member trained or certified in restraint, to review and refresh skills RELATED TO EARLY WARNING SIGNS, PREVENTION STRATEGIES, ~~involved in~~ positive behavior intervention, ~~prevention,~~ de-escalation, and physical RESTRAINT ~~management~~, in accordance with the model. VERIFICATION OF COMPETENCY (E.G. PASSING POST TEST SCORE, CERTIFICATE, ETC.) MUST BE KEPT IN THE STAFF FILE AND MADE AVAILABLE TO THE DEPARTMENT UPON REQUEST;

   a. Staff will be ~~periodically~~ observed QUARTERLY when performing ~~a~~ physical RESTRAINT ~~management~~ by a supervisor, TRAINED PROFESSIONAL, OR MEDICAL STAFF of the facility who has been trainED~~ing~~ in physical RESTRAINT ~~management~~ AND WILL BE INVOLVED IN A DEBRIEFING PROCESS TO IDENTIFY WHAT CHANGES IN PRACTICE CAN OCCUR TO REDUCE THE USE OF PHYSICAL RESTRAINT. If a supervisor of the facility determines a staff member did not correctly perform a physical RESTRAINT ~~management~~, the staff member must be immediately retrained or be restricted from performing further physical RESTRAINT ~~management~~ until retraining can occur.~~, and;~~

   ~~b. If available, the staff person shall complete any competency tests offered as part of the training prior to being approved to use physical management.~~

2. THE HEALTH AND BEHAVIORAL EFFECTS OF RESTRAINT ON CHILDREN/YOUTH, INCLUDING THOSE WITH BEHAVIORAL OR MENTAL HEALTH DISORDERS OR INTELLECTUAL AND DEVELOPMENTAL DISABILITIES;

3. How to assess the signs of physical distress in a person in restraint~~.~~;

4~~3~~. A restraint prevention and de-escalation component, to include identifying antecedents INCLUDING ENVIRONMENTAL FACTORS that may cause an individual to escalate, NON-PHYSICAL CRISIS INTERVENTION TECHNIQUES, and/or development of behavior management plans that are in alignment with individual treatment plans if necessary~~.~~, TO INCLUDE THE VALUE OF POSITIVE REINFORCEMENT OVER PUNISHMENT ~~NEGATIVE REINFORCEMENT~~ IN WORKING WITH CHILDREN/YOUTH AND METHODS FOR IMPLEMENTING POSITIVE BEHAVIOR INCENTIVES PRIOR TO RESTRAINT ~~SECLUSION~~ BEING UTILIZED;

5~~4~~. A physical RESTRAINT ~~management~~ process that prohibits or provides alternatives to a prone position, and includes identifying primary control techniques that emphasize utilizing only the minimum amount of force necessary to gain control and keep the CHILD/YOUTH ~~individual~~ safe~~.~~; AND

6~~5~~. A debriefing process which includes a review of physical RESTRAINT ~~management~~, to determine the appropriateness and effectiveness of preventive/de-escalation INTERVENTIONS ~~techniques~~ used, the appropriateness of physical RESTRAINT ~~management~~, AWARENESS OF INTENTIONAL AND UNINTENTIONAL STAFF PROVOCATION, SITUATIONAL OR ENVIRONMENTAL FACTORS, and how, or if, physical RESTRAINTS ~~managements~~ are preventable. THE DEBRIEFING PROCESS MUST ALSO INCLUDE THE NEUTRAL REVIEWER WHO WAS NOT INVOLVED IN THE PHYSICAL RESTRAINT.

~~B. Persons specified to place an individual in the seclusion shall have ongoing training and supervision which shall include at least the following:~~

~~1. The safety of the individual and staff and emergency procedures including First Aid and fire protection;~~

~~2. The purpose and policy, legal ramifications of placing the individual in seclusion;~~

~~3. The role of the neutral reviewer;~~

~~4. The dynamics of the behavior of individuals when in seclusion;~~

~~5. Safe methods of getting the individual to the seclusion room;~~

~~6. Methods of searching an individual when placing the individual in the seclusion room; and,~~

~~7. The protection of keys for the seclusion room.~~

7.714.53~~6~~5 DOCUMENTATION FOLLOWING UTILIZATION OF PHYSICAL RESTRAINT ~~[Rev. eff. 6/1/12]~~

IF A PHYSICAL RESTRAINT OCCURS, THE FOLLOWING MUST BE DOCUMENTED:

~~Each facility shall have processes in place to document the reason for the physical management and/or seclusion, alternative methods attempted, and the type and duration of physical management and/or seclusion in the record of the individual. Each physical management or seclusion shall be recorded as required by section 7.714.533,.E.7.~~

A. A DESCRIPTION OF THE INCIDENT, INCLUDING THE NAME OF THE CHILD/YOUTH, DATE AND TIME OF THE INCIDENT, THE NAME OF ALL WITNESSES TO THE INCIDENT, STAFF MEMBERS INVOLVED, THEIR POSITION AT THE FACILITY AND THEIR INVOLVEMENT IN THE PHYSICAL RESTRAINT, THE LOCATION OF THE RESTRAINT, AND THE DATE AND EXACT TIME THE RESTRAINT WAS IMPLEMENTED AND THE EXACT TIME THE RESTRAINT WAS TERMINATED.

B. A DESCRIPTION OF THE OBSERVED PRECIPITATING INCIDENT(S) AND/OR THE REPORTED ANTECEDENT BY THE CHILD/YOUTH AND THE CHILD'S/YOUTH'S BEHAVIOR BEFORE THE PHYSICAL RESTRAINT OCCURRED.

C. A DESCRIPTION OF WHAT SPECIFIC PREVENTION STRATEGIES AND TRAUMA-INFORMED INTERVENTIONS WERE ATTEMPTED AND/OR TAKEN TO PREVENT OR DE-ESCALATE THE SITUATION AND THE EFFECT OF ANY SUCH INTERVENTION ON THE CHILD/YOUTH. DOCUMENTATION OF THE INDIVIDUALIZED PREVENTIVE AND DE-ESCALATION INTERVENTIONS, TRAUMA-INFORMED PRACTICES, OR INTERVENTIONS CONSIDERED OR UTILIZED AND POSITIVE BEHAVIORAL INTERVENTION THAT MUST BE ATTEMPTED BY STAFF PRIOR TO THE USE OF PHYSICAL RESTRAINT.

D. A DETAILED DESCRIPTION OF THE PHYSICAL RESTRAINT MUST INCLUDE:

1. A CLEAR RATIONALE FOR THE DECISION TO INITIATE THE PHYSICAL RESTRAINT.

2. THE SPECIFIC EMERGENCY, UNSAFE SITUATION, OR IMMINENT THREAT THAT LED TO THE STAFF'S UTILIZATION OF PHYSICAL RESTRAINT.

3. A DESCRIPTION OF THE PHYSICAL RESTRAINT INCLUDING THE CHILD'S/YOUTH'S PHYSICAL, EMOTIONAL AND BEHAVIORAL CONDITION PRIOR TO, DURING, AND AFTER THE PHYSICAL RESTRAINT, INCLUDING, BUT NOT LIMITED TO, BREATHING, PULSE, CHANGE IN SKIN COLORING, AND SIGNS OF CHOKING OR RESPIRATORY DISTRESS. IF THE RESTRAINT LASTS MORE THAN FIFTEEN (15) MINUTES DUE TO SAFETY REASONS, THE JUSTIFICATION MUST BE DOCUMENTED WITHIN THE REPORT.

4. STAFF MUST ALSO DOCUMENT ANY NEGATIVE OUTCOMES OF THE PHYSICAL RESTRAINT AND ~~OR~~ ANY OBSERVATIONS OF BEHAVIORS OR PROCEDURES THAT WERE NOT CONDUCTED IN ACCORDANCE WITH PROPER USE OF PHYSICAL RESTRAINT TRAINING.

E. A DESCRIPTION OF THE DEBRIEFING AND EVALUATION WITH THE CHILD/YOUTH AND STAFF FOLLOWING THE PHYSICAL RESTRAINT AND/OR TO ADDRESS OTHER OPTIONS THAT MAY HAVE BEEN SUCCESSFUL IN DE-ESCALATING THE CHILD/YOUTH.

1. THE DEBRIEF MUST BE INFORMED BY THE CHILD'S/YOUTH'S SAFETY PLAN TO DETERMINE APPROPRIATE STAFF, LOCATION, AND MANNER OF DEBRIEF.

2. STAFF INVOLVED IN THE PHYSICAL RESTRAINT MUST BE INVOLVED IN THE DEBRIEF WITH THE CHILD/YOUTH, EXCEPT WHEN THE PRESENCE OF A PARTICULAR STAFF MAY JEOPARDIZE THE WELLBEING OF THE CHILD/YOUTH.

3. A REASONABLE AMOUNT OF TIME MUST BE PERMITTED TO ALLOW THE CHILD/YOUTH TO SELF-REGULATE AFTER THE PHYSICAL RESTRAINT AND THE BEGINNING OF THE DEBRIEF. EFFORTS TO DEBRIEF WITH THE CHILD/YOUTH MUST BE DOCUMENTED AND KEPT IN THE CHILD'S/YOUTH'S FILE.

4. THE DEBRIEF MUST TAKE INTO CONSIDERATION THE NEEDS OF THE CHILD/YOUTH, PRIORITIZE CLEAR, SIMPLE LANGUAGE, ALLOW AMPLE TIME FOR RESPONSES, FOCUS ON POSITIVE REINFORCEMENT, WITH QUESTIONS TAILORED TO THE CHILD'S/YOUTH'S INDIVIDUAL UNDERSTANDING, AND MUST ENSURE A SUPPORTIVE AND NON-JUDGMENTAL ENVIRONMENT THAT RESPECTS THE CHILD'S/YOUTH'S AGENCY AND ABILITY TO CONTRIBUTE TO THE DISCUSSION. THE DEBRIEF MUST ALSO BE IN ALIGNMENT WITH SECTION 7.714.531.B.

F. DOCUMENTATION OF REVIEW BY THE NEUTRAL REVIEWER, AS DEFINED IN SECTION 7.701.2, OF WHETHER THE PHYSICAL RESTRAINT WAS IN ACCORDANCE WITH THE FACILITY OR MODEL TRAINING, RULES AND REGULATIONS, AGENCY POLICY, AND IN THE BEST INTERESTS OF SAFETY OF THE CHILD/YOUTH AND OTHERS.

G. VERIFICATION THAT NOTIFICATION OF THE USE OF PHYSICAL RESTRAINT WAS MADE TO THE LEGAL GUARDIAN(S), CUSTODIAN(S), PARENT(S), AND GUARDIAN AD LITEM OR COUNSEL FOR YOUTH (IF ANY) OF THE CHILD/YOUTH AS SOON AS POSSIBLE.

7.714.53~~7~~6 REVIEW ~~[Eff. 6/1/12]~~

A. Each facility shall include physical ~~management,~~ restraint ~~and/or seclusion~~ in its critical incident review process and/or quality management program.

1. Review the Use of Physical RESTRAINT ~~Management~~

a. Records of each physical RESTRAINT ~~management~~ shall be reviewed by a supervisor of the facility within forty-eight (48) hours of each restraint.

B. EVERY MONTH, THE FACILITY MUST REVIEW IN DETAIL ALL RESTRAINTS THAT OCCURRED AT THE FACILITY THE MONTH PRIOR TO IDENTIFY TRENDS THAT WILL BE USED BY THE FACILITY TO DETERMINE HOW TO REDUCE THE USE OF RESTRAINTS, BASED ON EMPIRICALLY-VALIDATED VARIABLES, SUCH AS, BUT NOT LIMITED TO, STAFF INVOLVED IN THE RESTRAINT, WHETHER THE

RESTRAINT WAS JUSTIFIED IN ACCORDANCE WITH APPLICABLE REGULATIONS, AND LOCATION. THE REVIEWS MUST INCORPORATE QUALITY ASSURANCE RECOMMENDATIONS AND SAFETY MEASURES TO BE IMPLEMENTED WITHIN POLICIES AND STAFF TRAINING. REVIEWS OF THE RESTRAINTS MUST BE DOCUMENTED AND MADE AVAILABLE TO THE DEPARTMENT UPON REQUEST.

C~~b~~. According to the policies and procedures of the facility, the entire CHILD'S/YOUTH'S ~~individual's~~ behavior management or THE INDIVIDUAL CHILD'S/YOUTH'S PLAN ~~treatment plan~~ must be reviewed if it appears that the CHILD/YOUTH ~~individual~~ is being physically managed MORE THAN TWO (2) TIMES IN SEVENTY-TWO (72) HOURS, MORE THAN THREE (3) TIMES IN SEVEN (7) DAYS, OR MORE THAN THREE (3) TIMES BY THE SAME STAFF MEMBER IN FOURTEEN (14) DAYS. THE CHILD'S/YOUTH'S INDIVIDUAL PLAN MUST BE EVALUATED TO RECONSIDER NEW BEHAVIORS, TRIGGERS, REWARDS, AND DE-ESCALATION TECHNIQUES TO REDUCE ACTING OUT BEHAVIORS. ~~an excessive number of times, frequently in a short period of time, or frequently by the same staff member.~~

~~D. IF A CHILD/YOUTH EXHIBITS BEHAVIOR REQUIRING A PHYSICAL RESTRAINT MORE THAN TWO (2) TIMES IN ANY THIRTY (30) DAY PERIOD OR SIX (6) TIMES IN ANY TWELVE (12) MONTH PERIOD, THEN THE FACILITY OR PROVIDER MUST SUBMIT A REQUEST FOR BEHAVIOR ANALYSIS SERVICES FOR THAT CHILD/YOUTH. THE REQUEST MUST INCLUDE DOCUMENTATION OF THE FREQUENCY OF PHYSICAL RESTRAINT.~~

DE~~.e.~~ If any particular de-escalation technique appears to be causing an escalation in the behavior of a~~n~~ CHILD/YOUTH ~~individual~~ or a group of CHILDREN/YOUTH ~~individuals~~, the use of the technique ~~shall~~ MUST be evaluated for its effectiveness. De-escalation techniques that are not effective or are counter-productive must be terminated at the earliest opportunity.

EF~~.d.~~ If either the CHILD/YOUTH ~~individual~~ or a staff member was seriously injured or died during a physical RESTRAINT ~~management~~, a thorough review of the physical RESTRAINT ~~management~~ and injuries must be instituted immediately. ADDITIONALLY, REPORTS MUST BE MADE TO THE STATE CHILD ABUSE AND NEGLECT HOTLINE, AND NOTIFICATION MUST BE SENT TO THE DEPARTMENT IN ACCORDANCE WITH SECTION 7.701.52. Based on the findings of the review, the staff members involved in the physical RESTRAINT ~~management~~ must be retrained, be restricted from performing further physical RESTRAINT ~~management~~, and/or corrective personnel action must be taken.

FG~~.e~~. If a staff member appears to be involved in a larger number of physical RESTRAINTS ~~managements~~ DUE TO INTENTIONAL OR UNINTENTIONAL PROVOCATION 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/YOUTH ~~individuals~~ in care, prior physical RESTRAINT ~~management~~ training, and need for further training or corrective personnel action as required by THE FACILITY'S ~~program's~~ policies.

~~C~~B. Pursuant to Section 26-6-~~106(2)(k)~~914(2)(K), C.R.S. ~~of the Colorado Revised Statutes~~, a license can be suspended or revoked for A WILLFUL OR DELIBERATE failure to comply with the rules governing RESTRAINT ~~seclusion~~.

~~2. Review the Use of Seclusion~~

~~a. The record of use of the seclusion room shall be reviewed daily by the seclusion room supervisor and weekly by the facility administrator. If one individual is placed in the seclusion room more than three times in 72 hours or a maximum of 5 hours in 72 hours, the entire plan for the individual shall be reviewed, and a person, who meets the requirements of consultant to the seclusion room supervisor, and staff shall authorize any further use of the seclusion room or other treatment for the individual.~~

~~b. If the same staff member places an individual in the seclusion room repeatedly, this shall be investigated by the seclusion room supervisor.~~

~~c. The facility which operates a seclusion room shall appoint a neutral reviewer. The neutral reviewer shall not be the seclusion room supervisor or the person who placed the individual in the seclusion room. The reviewer shall determine if the situation resulting in the seclusion of an individual in a seclusion room merits such a decision. The reviewer 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.~~

~~B. All agencies shall have an administrative oversight component, to include, at a minimum, tracking and reviewing episodes of seclusion, physical management and restraint data such as through a quality assurance or performance improvement process.~~

7.714.54 SECLUSION

THESE RULES ARE SPECIFIC TO PSYCHIATRIC RESIDENTIAL TREATMENT FACILITIES (PRTFS) AND ANY OTHER FACILITIES AUTHORIZED TO UTILIZE SECLUSION THROUGH THE APPEAL/WAIVER PROCESS IN ACCORDANCE WITH SECTION 7.701.13. THE PURPOSE OF SECLUSION IS TO TEMPORARILY ISOLATE A CHILD/YOUTH IN A DESIGNATED ROOM, DURING AN EMERGENCY, TO MANAGE POTENTIALLY DANGEROUS OR AGGRESSIVE BEHAVIOR WITH THE GOAL OF PREVENTING HARM TO SELF OR OTHERS AND TO DE-ESCALATE A CRISIS SITUATION WHEN LESS-RESTRICTIVE MEASURES HAVE FAILED.

7.714.541 AUTHORIZATION FOR SECLUSION

A. AT THE TIME OF ADMISSION, THE CHILD/YOUTH'S LEGAL GUARDIAN(S) AND CUSTODIAN(S) MUST BE NOTIFIED OF THE FACILITY'S USE OF SECLUSION AND MUST GIVE WRITTEN CONSENT FOR THE CHILD/YOUTH TO BE SECLUDED IN CONJUNCTION WITH FACILITY POLICY. NO CHILD/YOUTH MAY BE SECLUDED WITHOUT THE SPECIFIC WRITTEN PERMISSION OF THEIR LEGAL GUARDIAN(S) AND CUSTODIAN(S). IF THE LEGAL GUARDIAN(S) AND CUSTODIAN(S) DO NOT GIVE AUTHORIZATION FOR SECLUSION, THEN SECLUSION CANNOT BE UTILIZED IN ANY FORM. YOUTH EIGHTEEN (18) YEARS OF AGE OR OLDER MAY CONSENT FOR THEMSELVES.

B. ALL FACILITIES MUST ENSURE THAT STAFF ARE TRAINED TO EXPLAIN, AT TIME OF ADMISSION, THE USE OF SECLUSION TO THE CHILD/YOUTH, LEGAL GUARDIAN(S), CUSTODIAN(S), AND IF APPROPRIATE, TO THE CHILD'S/YOUTH'S PARENT(S). THE EXPLANATION PROVIDED TO THE LEGAL GUARDIAN(S), CUSTODIAN(S), AND CHILD/YOUTH MUST OCCUR IN A LANGUAGE OR COMMUNICATION UNDERSTANDABLE TO THEM AND WILL INCLUDE THE PURPOSE OF SECLUSION AND THE EMERGENCY CIRCUMSTANCES WHEN A SECLUSION MAY OCCUR.

7.714.542 USE OF SECLUSION

A. FACILITY STAFF MUST ONLY USE SECLUSION IN CASES OF EMERGENCY, AS DEFINED IN SECTION 26-20-102(3), C.R.S.; AND AFTER THE FAILURE OF LESS RESTRICTIVE ALTERNATIVES OR AFTER A DETERMINATION THAT SUCH ALTERNATIVES WOULD BE INAPPROPRIATE OR INEFFECTIVE UNDER THE CIRCUMSTANCES.

B. A CHILD/YOUTH WHO IS PLACED IN SECLUSION MUST BE EXPERIENCING AN EMERGENCY, MEANING A SERIOUS, PROBABLE, IMMINENT THREAT OF BODILY HARM TO SELF OR OTHERS WHERE THERE IS THE PRESENT ABILITY TO EFFECT SUCH BODILY HARM.

C. THE CHILD/YOUTH MAY BE PHYSICALLY GUIDED DURING A TRANSPORT TO THE SECLUSION ROOM FOR UP TO TWO (2) MINUTES. IF IT REQUIRES MORE THAN TWO (2) MINUTES, THIS IS CONSIDERED A PHYSICAL RESTRAINT AND MUST BE DOCUMENTED IN ACCORDANCE WITH SECTION 7.714.535.

D. PRIOR TO THE USE OF SECLUSION, THE FACILITY MUST HAVE TRIED ALL POSITIVE AND CONSTRUCTIVE METHODS OF DE-ESCALATING ~~DEALING WITH~~ A CHILD/YOUTH, INCLUDING BUT NOT LIMITED TO, IMPLEMENTATION OF A STRUCTURED AND CONSISTENT BEHAVIOR MANAGEMENT PROGRAM, PHYSICAL STRUCTURING OF THE ENVIRONMENT, TALKING WITH THE CHILD/YOUTH, PRAISE FOR APPROPRIATE BEHAVIOR, SKILL TRAINING AND DEVELOPMENT,

ASSISTING THE CHILD/YOUTH WITH THE EXPRESSION OF FEELINGS, AND DE-ESCALATION OF THE SITUATION.

E. FACILITY STAFF MAY ONLY USE SECLUSION IF, PRIOR TO THE USE OF PLACING THE CHILD/YOUTH IN SECLUSION, THE STAFF HAS ~~HAVE~~ BEEN APPROPRIATELY TRAINED IN ACCORDANCE WITH SECTION 7.714.544 AND 42 CFR ~~PART~~ SECTION 483.376 OF THE CONDITIONS OF PARTICIPATION FOR THE USE OF RESTRAINT OR SECLUSION, AS INCORPORATED BY REFERENCE IN SECTION 7.705.101.D .

F. SECLUSION MUST NEVER BE USED AS PUNISHMENT OR DISCIPLINARY SANCTION, AS PART OF A TREATMENT PLAN OR BEHAVIOR MODIFICATION PLAN, FOR THE PURPOSE OF RETALIATION BY STAFF, FOR THE PURPOSE OF PROTECTION UNLESS ORDERED BY THE COURT OR IN AN EMERGENCY.

G. SECLUSION SHALL ONLY BE USED ONLY FOR THE PURPOSE OF PREVENTING THE CONTINUATION OR RENEWAL OF AN EMERGENCY AND ONLY FOR THE PERIOD OF TIME NECESSARY TO ACCOMPLISH ITS PURPOSE.

7.714.543 FACILITY PROCEDURES WHEN UTILIZING SECLUSION

A. WHEN SECLUSION IS UTILIZED, RELIEF PERIODS MUST BE PROVIDED FOR REASONABLE ACCESS TO TOILET FACILITIES. WHILE IN SECLUSION, STAFF MUST BE PHYSICALLY PRESENT OUTSIDE OF THE ROOM FOR CONTINUOUS OBSERVATION PURPOSES, AND STAFF MUST DOCUMENT THOSE OBSERVATIONS OF CHILDREN/YOUTH ~~MUST BE VISUALLY OBSERVED~~ NO LESS THAN EVERY FIFTEEN (15) MINUTES. A STAFF MEMBER MUST BE PHYSICALLY PRESENT WITHIN HEARING AND SIGHT DISTANCE OF THE SECLUSION ROOM AT ALL TIMES WHEN A CHILD/YOUTH IS LOCKED INSIDE THE ROOM.

B. SECLUSION MUST ONLY OCCUR FOR THE PERIOD OF TIME NECESSARY TO ACCOMPLISH ITS PURPOSE. THE CHILD/YOUTH MUST BE RELEASED FROM SECLUSION WHEN THE STATE OF EMERGENCY HAS CEASED. SECLUSION MUST NOT EXCEED TWO (2) HOURS PER INCIDENT FOR CHILDREN/YOUTH AGES NINE (9) AND OLDER AND MUST NOT EXCEED ONE (1) HOUR FOR CHILDREN/YOUTH UNDER AGE NINE (9).

C. ORDERS FOR SECLUSION MUST BE BY A PHYSICIAN OR OTHER LICENSED PRACTITIONER IN THE FACILITY PERMITTED TO ORDER SECLUSION AND TRAINED IN THE USE OF SAFETY INTERVENTIONS, ACCORDING TO 42 CFR SECTION 483.358, AS INCORPORATED BY REFERENCE IN SECTION 7.705.101.D. IF THE PHYSICIAN IS AVAILABLE, ONLY THEY CAN ORDER THE SECLUSION. IF THE PHYSICIAN IS UNAVAILABLE, A VERBAL ORDER MUST BE RECEIVED BY A REGISTERED NURSE OR OTHER LICENSED PRACTITIONER WHILE THE EMERGENCY SAFETY INTERVENTION IS BEING INITIATED BY STAFF OR IMMEDIATELY AFTER THE EMERGENCY SAFETY INTERVENTION ENDS. THE PHYSICIAN MUST VERIFY THE VERBAL ORDER IN A SIGNED WRITTEN FORM IN THE CHILD'S/YOUTH'S FILE. THE PHYSICIAN MUST BE AVAILABLE TO STAFF FOR CONSULTATION, AT LEAST BY TELEPHONE, THROUGHOUT THE PERIOD OF THE EMERGENCY SAFETY INTERVENTION.

D. THERE MUST BE NOTIFICATION TO ANOTHER STAFF MEMBER ON DUTY, THAT A CHILD/YOUTH HAS BEEN PLACED IN SECLUSION. IF THE SECLUSION ROOM SUPERVISOR IS NOT IMMEDIATELY AVAILABLE, THE STAFF MUST CONTINUE TO MAINTAIN SAFETY AND MAKE ALL ATTEMPTS TO COMMUNICATE WITH THE SUPERVISOR VIA TELEPHONE OR FACE-TO-FACE AS SOON AS THE SITUATION IS SAFELY MANAGED.

7.714.544 REQUIRED SECLUSION TRAINING FOR STAFF

A. STAFF UTILIZING SECLUSION MUST HAVE ONGOING TRAINING AND SUPERVISION TO INCLUDE AT LEAST THE FOLLOWING:

1. THE HEALTH AND BEHAVIORAL EFFECTS OF RESTRAINT AND SECLUSION ON CHILDREN/YOUTH, INCLUDING THOSE WITH BEHAVIORAL OF MENTAL HEALTH DISORDERS OR INTELLECTUAL AND DEVELOPMENTAL DISABILITIES;

2. EMERGENCY PROCEDURES INCLUDING FIRST AID AND FIRE PROTECTION;

3. THE FACILITY'S PURPOSE, POLICIES, AND PROCEDURES FOR SECLUSION;

4. ANY LEGAL OR CLINICAL RAMIFICATIONS OF PLACING THE CHILD/YOUTH IN SECLUSION;

5. THE ROLE OF THE NEUTRAL REVIEWER;

6. THE DYNAMICS OF THE BEHAVIOR OF CHILDREN/YOUTH WHEN IN SECLUSION;

7. SAFE METHODS OF MOVING THE CHILD/YOUTH TO THE SECLUSION ROOM IN ALIGNMENT WITH SECTIONS 7.714.532, 7.714.533, AND 7.714.542;

8. METHODS OF SEARCHING A CHILD/YOUTH WHEN PLACING THE CHILD/YOUTH IN THE SECLUSION ROOM, ONLY IF IN ALIGNMENT WITH SECTION 7.714.51;

9. THE PROTECTION OF KEYS FOR THE SECLUSION ROOM, IF APPLICABLE;

10. TRAUMA-INFORMED CARE;

11. EFFECTIVE DE-ESCALATION TECHNIQUES FOR CHILDREN/YOUTH IN CRISIS;

12. THE VALUE OF POSITIVE OVER NEGATIVE REINFORCEMENT IN WORKING WITH CHILDREN/YOUTH;

13. METHODS FOR IMPLEMENTING POSITIVE BEHAVIOR INCENTIVES PRIOR TO SECLUSION BEING UTILIZED IN AN ATTEMPT TO REDUCE THE EMERGENCY;

14. CONSIDERATION OF AND HOW TO MINIMIZE TRAUMATIZATION OR RETRAUMATIZATION.

7.714.545 FACILITY STAFF REQUIREMENTS FOR SECLUSION

A. THERE MUST BE A SECLUSION ROOM SUPERVISOR WHO IS A FULL-TIME FACILITY STAFF MEMBER AND HOLDS ONE OF THE FOLLOWING LICENSE TYPES IN COLORADO: LICENSED CLINICAL SOCIAL WORKER (LCSW), LICENSED PROFESSIONAL COUNSELOR (LPC), LICENSED MARRIAGE AND FAMILY THERAPIST (LMFT), LICENSED PSYCHOLOGIST, OR A BOARD-ELIGIBLE PSYCHIATRIST LICENSED TO PRACTICE MEDICINE IN COLORADO. THIS STAFF MEMBER MUST BE DESIGNATED AND TRAINED TO BE RESPONSIBLE FOR THE USE OF THE SECLUSION ROOM. IF THE SECLUSION ROOM SUPERVISOR IS NOT A PSYCHIATRIST OR A LICENSED PSYCHOLOGIST, THERE MUST BE SUCH A PERSON CONTRACTED TO PROVIDE CONSULTATION WITH THE SECLUSION ROOM SUPERVISOR AND STAFF. SECLUSION ROOM SUPERVISORS MUST BE PRESENT AND ABLE TO BE AVAILABLE AT THE FACILITY AT ALL TIMES.

B. THE RESIDENTIAL CHILD CARE FACILITY WHICH OPERATES A SECLUSION ROOM MUST APPOINT A NEUTRAL REVIEWER. THIS NEUTRAL REVIEWER MUST NOT BE THE SECLUSION ROOM SUPERVISOR OR THE PERSON WHO PLACED THE CHILD/YOUTH IN THE SECLUSION ROOM. THE REVIEWER MUST DETERMINE IF THE SITUATION RESULTING IN THE CONFINEMENT OF A CHILD/YOUTH IN A SECLUSION ROOM MERITS SUCH A DECISION. THE NEUTRAL REVIEWER MUST BE A STAFF MEMBER OF THE FACILITY OR A PROFESSIONAL CONTRACTED BY THE FACILITY IN ONE (1) OF THE FOLLOWING POSITIONS: ADMINISTRATOR, ASSISTANT ADMINISTRATOR, SOCIAL WORKER, PSYCHOLOGIST, PSYCHIATRIST, NURSE, OR LAWYER.

C. THERE MUST BE SUFFICIENT STAFF ON THE MILIEU IN COMPLIANCE WITH SECTION 7.705.46 WHEN A CHILD/YOUTH IS PLACED IN SECLUSION. AT THE TIME OF PLACEMENT OF THE CHILD/YOUTH IN THE SECLUSION ROOM, THE NEUTRAL REVIEWER MUST BE NOTIFIED IN

PERSON OR BY TELEPHONE. LEAVING A MESSAGE IS NOT NOTIFICATION, AND IF THE NEUTRAL REVIEWER CANNOT BE CONTACTED IN PERSON OR BY TELEPHONE AND PRESENT FOR OBSERVATION PURPOSES, THE CHILD/YOUTH MUST NOT BE PLACED IN A SECLUSION ROOM.

D. THE FACILITY MUST DESIGNATE IN ITS STATEMENT OF PURPOSE AND POLICY FOR THE OPERATION OF THE SECLUSION ROOM, AS IDENTIFIED IN SECTION 7.705.68.A, WHICH STAFF MEMBERS MAY BE ABLE TO PLACE A CHILD/YOUTH WITHIN THE SECLUSION ROOM. IDENTIFIED STAFF MEMBERS MUST BE EMPLOYED OR CONTRACTED AS ONE (1) 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 SECLUSION ROOM.

7.714.546 DOCUMENTATION FOLLOWING UTILIZATION OF SECLUSION

THE FOLLOWING INFORMATION MUST BE DOCUMENTED:

A. A WRITTEN REPORT WHICH STATES THE CHILD'S/YOUTH'S NAME, THE TIME THE CHILD/YOUTH WAS PLACED IN THE SECLUSION ROOM, THE STAFF MEMBER WHO PLACED THE CHILD/YOUTH IN THE SECLUSION ROOM, THE STAFF MEMBER WHO WAS NOTIFIED, AND DESCRIBES THE FOLLOWING: THE PRECIPITATING INCIDENT AND THE CHILD'S/YOUTH'S BEHAVIOR BEFORE PLACEMENT IN THE SECLUSION ROOM, AND ACTIONS TAKEN BY STAFF MEMBERS OF A LESS RESTRICTIVE NATURE TO TRY TO CONTROL, CALM, OR CONTAIN THE CHILD/YOUTH AND A CLEAR RATIONALE FOR THE DECISION TO INITIATE THE SECLUSION.

B. DURING SECLUSION, THE FOLLOWING MUST BE DOCUMENTED, IF APPLICABLE:

1. AN INDICATION THAT THE CHILD/YOUTH WAS CHECKED CONTINUOUSLY FOR OBSERVATION PURPOSES ~~FREQUENTLY,~~ AND DOCUMENTATION OF THOSE OBSERVATIONS OF CHILDREN/YOUTH NO LESS THAN~~BUT AT LEAST ONCE~~ EVERY FIFTEEN (15) MINUTES, WITH THE FOLLOWING NOTATIONS: TIME, ONE-LINE DESCRIPTION OF WHAT THE CHILD/YOUTH WAS DOING, AND INITIALS OF THE PERSON SUPERVISING;

2. WHEN THE CHILD/YOUTH WAS LAST GIVEN ACCESS TO RESTROOM FACILITIES;

3. WHEN THE CHILD/YOUTH HAD OPPORTUNITY FOR EXERCISE, IF APPLICABLE;

4. WHEN AND WHAT TYPE OF MEDICATIONS WERE GIVEN AND BY WHOM; AND

5. WHEN THE CHILD'S/YOUTH'S LAST STAFF CONTACT OCCURRED.

C. DESCRIPTION OF THE RESOLUTION BETWEEN THE STAFF MEMBER AND THE CHILD/YOUTH AT THE TERMINATION OF THE USE OF THE SECLUSION ROOM AND THE BEHAVIOR OF THE CHILD/YOUTH AS A RESULT OF BEING IN THE SECLUSION ROOM.

D. THE OBSERVABLE PHYSICAL CONDITION OF THE CHILD/YOUTH WHEN ENTERING THE SECLUSION ROOM AND ANY CHANGE IN THE OBSERVABLE PHYSICAL CONDITION OF THE CHILD/YOUTH WHEN LEAVING THE SECLUSION ROOM.

E. AN INDICATION OF REVIEW BY THE NEUTRAL REVIEWER AS TO THE APPROPRIATENESS OF CONFINEMENT OF THE CHILD/YOUTH IN THE SECLUSION ROOM.

F. VERIFICATION THAT NOTIFICATION WAS MADE TO THE PLACING AUTHORITY BY THE NEXT DAY OF THE SECLUSION AND THE APPROPRIATENESS OF THE SECLUSION.

G. NOTIFICATION TO THE PARENT(S), LEGAL GUARDIAN(S), AND CUSTODIAN(S) OF EACH USE OF THE SECLUSION, NO LATER THAN THE END OF THE DAY THAT THE SECLUSION OCCURRED, WITH A WRITTEN REPORT COMPLETED AND GIVEN TO THE LEGAL GUARDIAN(S), CUSTODIAN(S), AND GUARDIAN AD LITEM OR COUNSEL FOR YOUTH BY THE NEXT DAY.

7.714.547 REVIEW OF THE USE OF SECLUSION

A. THE RECORD OF USE OF THE SECLUSION ROOM MUST BE REVIEWED DAILY BY THE SECLUSION ROOM SUPERVISOR AND WEEKLY BY THE FACILITY ADMINISTRATOR. IF ONE (1) CHILD/YOUTH IS PLACED IN THE SECLUSION ROOM MORE THAN THREE (3) TIMES IN SEVENTY-TWO (72) HOURS, THE ENTIRE PLAN FOR THE CHILD/YOUTH MUST BE REVIEWED. A PHYSICIAN MUST EVALUATE AND AUTHORIZE ANY FURTHER USE OF THE SECLUSION ROOM OR OTHER TREATMENT FOR THE CHILD/YOUTH.

B. IF THE SAME STAFF MEMBER PLACES A CHILD/YOUTH IN THE SECLUSION ROOM THREE (3) TIMES IN A THIRTY (30) DAY PERIOD, THIS MUST BE INVESTIGATED BY THE SECLUSION ROOM SUPERVISOR AND EVALUATED IN THE CHILD'S/YOUTH'S PLAN.

C. ALL AGENCIES MUST HAVE AN ADMINISTRATIVE OVERSIGHT COMPONENT, TO INCLUDE, AT A MINIMUM, TRACKING AND REVIEWING EPISODES OF SECLUSION AND PHYSICAL RESTRAINT DATA SUCH AS THROUGH A QUALITY ASSURANCE OR PERFORMANCE IMPROVEMENT PROCESS.

D. PURSUANT TO SECTION 26-6-914(2)(K), C.R.S., A LICENSE CAN BE SUSPENDED OR REVOKED FOR A WILLFUL OR DELIBERATE FAILURE TO COMPLY WITH THE RULES GOVERNING SECLUSION.

7.714.548 PHYSICAL REQUIREMENTS FOR SECLUSION

A. THE SECLUSION ROOM MUST BE LOCATED IN REASONABLE PROXIMITY TO THE LIVING UNIT OR OTHER AREAS OF ACTIVITY. AN ADULT STAFF MEMBER MUST STAY DIRECTLY OUTSIDE THE SECLUSION ROOM AT ALL TIMES WHEN A CHILD/YOUTH IS LOCKED INSIDE THE ROOM.

B. THE SECLUSION ROOM MUST BE A MINIMUM OF EIGHTY (80) SQUARE FEET IN SIZE.

C. THE SECLUSION ROOM MUST BE KEPT IN A CLEAN AND SANITARY CONDITION.

D. ALL SWITCHES FOR LIGHT, HEAT, AND VENTILATION, AS WELL AS OTHER ELECTRICAL OUTLETS, MUST BE OUTSIDE THE ROOM. ALL SWITCHES MUST BE AVAILABLE ONLY TO THE STAFF.

E. THERE MUST BE NO FEATURES BY WHICH A CHILD/YOUTH MIGHT INJURE THEMSELVES WITHIN THE SECLUSION ROOM SUCH AS UTILITY PIPES, CLEANING EQUIPMENT AND MATERIALS, OR MIRRORS.

F. EXTERIOR WINDOWS ARE NOT RECOMMENDED, BUT IF THERE ARE WINDOW PANES THEY MUST BE OF SHATTER-RESISTANT MATERIAL.

G. THERE MUST BE AN OBSERVATION WINDOW ON THE DOOR FROM WHICH ALL PARTS OF THE ROOM ARE VISIBLE FOR PURPOSES OF SUPERVISION. THE WINDOW MUST BE MADE OF SHATTER-RESISTANT MATERIALS.

H. THERE MUST BE AN APPROVED VENTILATING SYSTEM.

I. THERE MUST BE AN APPROVED SYSTEM WHICH DETECTS PRODUCTS OF COMBUSTION AND IS WIRED INTO A NO SWITCH ELECTRICAL OUTLET AND IS OUT OF THE REACH OF CHILDREN/YOUTH.

J. THE SECLUSION ROOM MUST BE CONSTRUCTED OF ONE (1) HOUR FIRE-RESISTANT MATERIAL. THE DOOR MUST BE OF ONE (1) HOUR FIRE-RESISTANT MATERIAL.

K. THE SECLUSION ROOM MUST HAVE A LIGHTED, SOOTHING ENVIRONMENT. THE CHILD/YOUTH MUST NOT BE SUBJECTED TO GLARING LIGHTS. ALL LIGHTS MUST BE RECESSED INTO THE CEILING AND MUST BE COVERED WITH A SHATTER-RESISTANT GUARD WHICH IS FLUSH WITH THE CEILING.

L. THERE MUST BE NO MORE THAN ONE (1) LOCKED DOOR BETWEEN THE CHILD/YOUTH AND THE STAFF MEMBER.

M. IF THE SECLUSION ROOM IS SOUNDPROOF, THERE MUST BE AN INTERCOM SYSTEM WHICH IS ACTIVATED WHEN A CHILD/YOUTH IS IN THE ROOM.

N. THERE MUST BE A LIGHT OVER THE ENTRANCE OF THE SECLUSION ROOM WHICH IS LIGHTED ANY TIME A CHILD/YOUTH IS LOCKED IN THE ROOM.

O. SECLUSION ROOMS MUST BE EXAMINED AFTER EACH USE TO DETERMINE ANY DAMAGE TO THE ROOM OR IDENTIFIED SAFETY ISSUES NEEDING TO BE CORRECTED.

7.714.549 APPROVALS NECESSARY TO OPERATE A SECLUSION ROOM

A. THE WRITTEN APPROVAL OF THE LOCAL FIRE DEPARTMENT AND THE DEPARTMENT MUST BE RECEIVED PRIOR TO THE INITIAL USE OF THE SECLUSION ROOM.

B. THE LICENSEE MUST REQUEST AN INSPECTION BY THE FIRE DEPARTMENT AT LEAST ANNUALLY. THE LICENSEE MUST RETAIN A COPY OF THE INSPECTION REPORT IN THE FACILITY FILE.

C. THE RECORDS OF THE USE OF THE SECLUSION ROOM, THE POLICY FOR OPERATION OF THE ROOM, THE CHILDREN/YOUTH'S RECORDS, STAFF RECORDS, AND THE ROOM MUST BE OPEN TO STAFF MEMBERS OF THE DEPARTMENT OF HUMAN SERVICES FOR INSPECTION AT ANY TIME.

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/YOUTH who are residents of the facility in accordance with the individual child~~'s~~/YOUTH'S plan, the Public School Finance Act OUTLINED IN ARTICLE 54.5 OF TITLE 22, C.R.S., and as required by the Exceptional Children's Educational Act OUTLINED IN ARTICLE 20 OF TITLE 22, C.R.S. and Rules and Regulations FOR THE ADMINISTRATION OF THE EXCEPTIONAL CHILDREN'S EDUCATIONAL ACT (1 CCR 301-8) (JUNE 30, 2024), HEREIN INCORPORATED BY REFERENCE. NO LATER EDITIONS OR AMENDMENTS ARE INCORPORATED.THE RULES AND REGULATIONS FOR THE ADMINISTRATION OF THE EXCEPTIONAL CHILDREN'S ACT ~~CAN BE FOUND AT~~ CAN BE FOUND AT HTTPS://WWW.SOS.STATE.CO.US/CCR/DISPLAYRULE.DO?ACTION=RULEINFO&RULEID=2027&DEPTID=4&AGENCYID=109&DEPTNAME=300&AGENCYNAME=301%20COLORADO%20STATE%20BOARD%20OF%20EDUCATION&SERIESNUM=1%20CCR%20301-8. COPIES ARE ALSO AVAILABLE FOR PUBLIC INSPECTION AND COPYING AT THE COLORADO DEPARTMENT OF HUMAN SERVICES, 1575 SHERMAN STREET, DENVER, CO 80203, DURING REGULAR BUSINESS HOURS.

1. Children/YOUTH shall attend educational/vocational programs in the most appropriate and least restrictive educational setting for the child/YOUTH AND FOLLOWING THE RULES OF A BEST INTEREST DETERMINATION (BID) MEETING AS OUTLINED IN SECTION 7.301.241. FACILITY SCHOOLS MUST NOT REQUIRE STUDENTS TO ATTEND THEIR EDUCATIONAL FACILITY UNLESS AND UNTIL THE COUNTY HAS DETERMINED THAT IT IS IN THE CHILD'S/YOUTH'S BEST INTEREST TO CHANGE SCHOOLS AND HAS SPECIFICALLY REQUESTED A CHANGE IN ENROLLMENT IN ACCORDANCE WITH SECTION 22-32-138(1)(G), C.R.S. AND SECTION 7.301.241.D.~~;~~ ~~including, but not limited to,~~ ANY SCHOOL ATTENDED WITHIN THE COMMUNITY MUST BE ACCREDITED BY THE STATE OF COLORADO. ONLINE EDUCATION OR HOME-BASED LEARNING PROGRAMS MUST: ~~attending regular classes conducted in accredited elementary, middle, and secondary schools within the community.~~

   A. BE ACCREDITED OR APPROVED BY THE STATE OF COLORADO.

   B. BE TAUGHT BY A TEACHER LICENSED IN THE STATE OF COLORADO.

   C. BE INCLUDED IN THE INDIVIDUAL CHILD'S/YOUTH'S PLAN AND APPROVED BY THE PLACING AGENCY.

   D. INCLUDE A WRITTEN PLAN FOR RECREATION, SOCIALIZATION, AND COMMUNITY INVOLVEMENT FOR THE CHILD/YOUTH.

E. INCLUDE A WRITTEN PLAN FOR SUPERVISION WHILE THE CHILD/YOUTH IS IN THE ONLINE EDUCATION PROGRAM.

2. HOMESCHOOLING IS PROHIBITED.

~~2~~3. Children/YOUTH attending school ~~shall~~ MUST be permitted to participate in school extracurricular activities to the extent of their interests and abilities and in accordance with each individual child's/YOUTH'S plan.

~~3~~4. The facility ~~shall~~ MUST develop assurances that the educational/vocational program is an integral part of the ~~total~~ CHILD'S/YOUTH'S 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~~ MUST ensure that adequate "child find" procedures are utilized. Such procedures ~~shall~~ MUST be developed cooperatively with local education agencies (LEA) in accordance with Exceptional Children's Educational Act rules and regulations and LEA procedures AND IN ACCORDANCE WITH THE INDIVIDUALS WITH DISABILITIES EDUCATION ACT (IDEA) (OCTOBER 2010), 20 U.S.C. SECTIONS 1400 THROUGH 1482, AND SECTION 504 OF THE REHABILITATION ACT OF 1973 (OCTOBER 2016), 29 U.S.C. SECTION 794, AS INCORPORATED BY REFERENCE IN SECTION 7.701.14. 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~~ MUST provide adequate space, staff, equipment, and educational materials as required in THE Exceptional Children's Educational Act Rules and Regulations OUTLINED IN 1 CCR 301-8, AS INCORPORATED BY REFERENCE IN SECTION 7.714.6.A.

D. School records ~~shall~~ MUST be transmitted according to State law, pursuant to Section 24-72-204, C.R.S., SECTION 504 OF THE REHABILITATION ACT OF 1973, (OCTOBER 2016), 29 U.S.C. SECTION 794, and the Individuals with Disabilities Education Act (IDEA) (OCTOBER 2010), 20 U.S.C. SECTIONS 1400 THROUGH 1482, AS INCORPORATED BY REFERENCE IN SECTION 7.701.14.

7.714.65 REQUIREMENTS OF A SPECIALIZED PROGRAM FOR CHILDREN/YOUTH AT RISK AND SURVIVORS OF SEX AND LABOR TRAFFICKING

A. THE FACILITY MUST HAVE WRITTEN POLICIES AND PROCEDURES THAT DESCRIBE THE ADMISSION REQUIREMENTS OF THE FACILITY, AN OVERVIEW OF THE FACILITY AND ITS PROGRAMMING, THE TRANSITIONAL PLANNING SERVICES PROVIDED, AND HOW TO SUPPORT THE LONG-TERM IMPACT OF TRAUMA ON SURVIVORS OF HUMAN TRAFFICKING.

B. THE WRITTEN POLICIES AND PROCEDURES OF THE FACILITY MUST ADDRESS CHILD/YOUTH UNAPPROVED LEAVE FROM THE CAMPUS, PEER RECRUITMENT FOR TRAFFICKING, EXTERNAL SAFETY THREATS, AND ANY OTHER KNOWN SAFETY RISK TO CHILDREN/YOUTH OR STAFF.

C. ALL STAFF MEMBERS MUST COMPLETE TRAINING IN THE FOLLOWING AREAS WITHIN NINETY (90) DAYS OF BEGINNING EMPLOYMENT AT THE FACILITY AND RENEW THE TRAINING ON AN ANNUAL BASIS.

1. INDICATORS OF HUMAN TRAFFICKING;
2. THE DIFFERENT TYPES OF TRAFFICKING;
3. THE IMPACT OF TRAUMA ON SURVIVORS OF HUMAN TRAFFICKING;
4. THE SERVICE NEEDS OF HUMAN TRAFFICKING SURVIVORS;
5. IDENTIFYING SECONDARY TRAUMA ;
6. SURVIVOR-INFORMED ACTIVE LISTENING;
7. INDIVIDUALIZED NEEDS ASSESSMENT; AND

8. GENDER IDENTITY, SPIRITUAL, CULTURAL, INTELLECTUAL, PHYSICAL, AND EMOTIONAL DYNAMICS RESULTING FROM THEIR TRAFFICKING EXPERIENCE.

D. IN ADDITION TO THE REQUIREMENTS IN SECTION 7.714.65.C, ALL STAFF MEMBERS MUST COMPLETE EIGHT (8) ADDITIONAL HOURS OF ANNUAL TRAINING IN HUMAN TRAFFICKING SUBJECT AREAS.

E. THE FACILITY MUST COMPLETE AN ASSESSMENT OF SERVICE NEEDS WITH EVERY CHILD/YOUTH IN THE FACILITY. THE NEEDS ASSESSMENT MUST BE CONDUCTED AT THE TIME OF INTAKE AND ON A MINIMUM OF A QUARTERLY BASIS, IN ORDER TO DEVELOP AND MAINTAIN A COMPREHENSIVE INDIVIDUAL PLAN. THE COMPREHENSIVE INDIVIDUAL PLAN MUST INCLUDE, BUT IS NOT LIMITED TO:

1. SAFETY PLANNING INCLUDING ONLINE SAFETY, HARM REDUCTION, AND SAFE/APPROVED CONTACTS;

2. LONG-TERM HOUSING;

3. IDENTIFYING AND BUILDING A NATURAL SUPPORT NETWORK;

4. IDENTIFYING AND BUILDING HEALTHY RELATIONSHIPS;

5. SPIRITUAL/RELIGIOUS SUPPORT;

6. CULTURAL SUPPORT;

7. IDENTIFYING AND ACCESSING LEGAL SERVICES;

8. MEDICAL AND MENTAL HEALTH SERVICES;

9. ACCESSING TRANSPORTATION;

10. EDUCATIONAL, VOCATIONAL, AND JOB SKILL TRAINING SERVICES;

11. JOB SEARCH, EMPLOYMENT, AND BUDGETING SERVICES;

12. THE IMPACT OF TRAUMA ON SURVIVORS OF HUMAN TRAFFICKING; AND

13. DISCHARGE PLANNING TO INCLUDE SAFE COMMUNITY RE-ENTRY, IDENTIFIED SUPPORTS OUTSIDE OF THE PROGRAM, AND ONGOING CASE MANAGEMENT SERVICES.

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

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

A. The facility ~~shall~~ MUST reflect consideration for, and sensitivity to, the racial, cultural, ethnic, and religious backgrounds of children/YOUTH in care. The facility ~~shall~~ MUST involve a child/YOUTH in cultural and/or ethnic activities appropriate to ~~his/her~~ THEIR cultural and/or ethnic background AND INVOLVE THE CHILD/YOUTH IN DETERMINING APPROPRIATE ACTIVITIES.

B. The facility ~~shall~~ MUST utilize available services, facilities, and activity programs of the community, and children/YOUTH ~~shall~~ MUST be given ~~op~~ 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/YOUTH IN FOSTER CARE OR PARTICIPATING IN A FOSTER CARE TRANSITION PROGRAM ~~shall~~ MUST be provided ACCESS TO INFORMATION REGARDING AVAILABLE work OPTIONS CONSISTENT WITH APPLICABLE LAWS AND SECTION 7.714.33. ~~PURSUANT TO SECTION 19-7-101(2)(I)(II), C.R.S. CHILDREN/YOUTH MUST BE PERMITTED TO WORK AND DEVELOP JOB SKILLS CONSISTENT WITH THE CHILD'S/YOUTH'S AGE AND DEVELOPMENTAL LEVEL AS DOCUMENTED IN THE INDIVIDUAL CHILD/YOUTH PLAN AND PURSUANT TO SECTION 19-7-101(2)(I)(II), C.R.S. CHILDREN/YOUTH HAVE A RIGHT TO AN ALLOWANCE OR WORK~~

~~OPPORTUNITIES APPROPRIATE TO THE CHILD'S/YOUTH'S AGE AND DEVELOPMENTAL LEVEL, INCLUDING THE USE AND VALUE OF MONEY BY MAKING PURCHASES FOR ITEMS ACCORDING TO THE CHILD'S/YOUTH'S CHOICE PURSUANT TO SECTION 19-7-101(2)(F)(II), C.R.S.~~

D. FACILITIES MUST ESTABLISH WRITTEN POLICIES REGARDING MONIES EARNED AND SPENT. SUCH POLICIES MUST INCLUDE: ~~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/YOUTH in care ~~shall~~ MUST be deemed to be that child's/YOUTH'S personal property. ~~The facility shall maintain a written record of all monies earned or given to a child.~~

2. FACILITIES MUST DOCUMENT ALL MONIES EARNED AND RECEIVED BY CHILDREN/YOUTH, THE PROCEDURE FOR REQUESTING MONEY, THE TIME FRAME IN WHICH REQUESTS WILL BE COMPLETED, AND ACCOUNTING FOR MONIES RECEIVED FROM AND DISTRIBUTED TO OR ON BEHALF OF THE CHILD/YOUTH. DOCUMENTATION OF SUCH TRANSACTIONS MUST BE MADE AVAILABLE TO THE CHILD/YOUTH AND THEIR LEGAL GUARDIAN(S) AND CUSTODIAN(S) UPON REQUEST AND AT TIME OF DISCHARGE. ANY MONIES REMAINING IN A CHILD'S/YOUTH'S ACCOUNT MUST BE GIVEN TO THE CHILD'S/YOUTH'S LEGAL GUARDIAN(S) AND CUSTODIAN(S) AT TIME OF DISCHARGE, UNLESS THE CHILD/YOUTH IS EIGHTEEN (18) YEARS OR OLDER, AT WHICH TIME THE MONEY MUST BE TRANSFERRED TO THEM DIRECTLY.

~~3. PURSUANT TO SECTION 19-7-101(7), C.R.S., FOR CHILDREN/YOUTH RESIDING IN FOSTER CARE OR PARTICIPATING IN THE FOSTER YOUTH IN TRANSITION PROGRAM:~~

~~A. A JUVENILE COURT SHALL NOT LIMIT OR DENY THE RIGHTS ENUMERATED IN SUBSECTION (2) OF SECTION 19-7-101, C.R.S. UNLESS THE COURT FINDS BY CLEAR AND CONVINCING EVIDENCE THAT THERE ARE EXTRAORDINARY CIRCUMSTANCES AND THE LIMITATION OR DENIAL IS NECESSARY FOR THE SAFETY OF THE CHILD OR YOUTH IN FOSTER CARE;~~

~~B. THIS IS APPLICABLE TO ONLY THE RIGHTS ENUMERATED IN SECTION 19-7-101(2), C.R.S. AND DOES NOT ALTER THE HEARING REQUIREMENTS OR STANDARDS OTHERWISE ESTABLISHED IN TITLE 19.~~

~~3~~4~~2~~. FOR OTHER CHILDREN/YOUTH NOT RESIDING IN FOSTER CARE OR NOT PARTICIPATING IN THE FOSTER YOUTH IN TRANSITION PROGRAM, limitations may be placed on the amount of money a child/YOUTH may possess or have access to AT ONE TIME when such limitations are ~~considered to be~~ in the child's/youth's best interests AS DOCUMENTED IN THE CHILD'S/YOUTH'S FILE.

~~4~~5~~3~~. ~~The facility may deduct reasonable sums from a child's allowance as restitution for damages done by the child.~~ RESTITUTION, OR COURT-ORDERED PAYMENT MADE BY A CRIMINAL OFFENDER TO A VICTIM TO COMPENSATE FOR LOSSES CAUSED BY A CRIME, CANNOT BE USED AS A MEANS OF DISCIPLINE UNLESS IT IS ORDERED BY A COURT BASED ON A CRIMINAL OFFENSE THAT WAS ISSUED PRIOR TO PLACEMENT IN THE FACILITY. ~~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.~~ MONIES RECEIVED AS GIFTS MUST NOT BE USED TOWARD RESTITUTION. A written record of ~~damages and~~ any restitution paid by a child/YOUTH must be maintained ~~by the facility~~ IN THE CASE FILE. AN ACCOUNTING OF ALL PAYMENTS MADE MUST BE MADE AVAILABLE TO CHILD/YOUTH OR THEIR LEGAL GUARDIAN(S) AND CUSTODIAN(S) UPON REQUEST AND AT TIME OF DISCHARGE.

E~~D~~. Chores at the facility are considered part of the participatory responsibility of living together. ~~They shall~~ ALL CHORES MUST provide constructive experiences in accordance with the age and ability of the child/YOUTH and ~~shall~~ MUST not substitute for the work of staff.

F~~E~~. All chores ~~shall~~ MUST be scheduled so as not to conflict with other essential scheduled activities.

G~~F~~. The facility shall comply with all child labor laws and regulations in making work assignments.

H~~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.~~

I~~H~~. A child/YOUTH ~~shall~~ MUST not be exploited in any manner. FACILITIES MAY NOT PERMIT A child/YOUTH ~~may not~~ TO participate in A solicitation on behalf of the facility for a fundraising activity without the written permission of the parent(s) ~~or,~~ LEGAL guardian(s), AND CUSTODIAN(S) for each specific activity, and the child/YOUTH must be willing to participate in the activity.

7.714.8 PERSONAL CARE OF THE CHILD/YOUTH

7.714.81 PREVENTATIVE, SUPPORTIVE, AND CORRECTIVE FEEDBACK AND DISCIPLINE

A. PREVENTATIVE AND SUPPORTIVE DISCIPLINE IS DESIGNED TO BE CONSTRUCTIVE AND EDUCATIONAL AND MAY INCLUDE DIVERSION, COUNSELING, PREDETERMINED CONSEQUENCES SUCH AS TEMPORARY LOSS OF PRIVILEGES, AND/OR INTERVENTIONS FROM THE TRAUMA BEHAVIOR SUPPORT PLAN DEVELOPED BY THE CHILD/YOUTH AND THEIR THERAPIST.

B. RIGHTS MUST NOT BE DENIED AS A DISCIPLINARY MEASURE.

C. SEPARATION WHEN USED AS DISCIPLINE MUST BE PROPERLY ASSESSED IF APPROPRIATE TO THE CHILD'S/YOUTH'S AGE, DEVELOPMENTAL LEVEL, HISTORY OF TRAUMA, AND CIRCUMSTANCES. THE CHILD/YOUTH MUST ALWAYS BE WITHIN HEARING OF AN ADULT IN A SAFE, CLEAN, WELL-LIT, WELL-VENTILATED ROOM IN THE FACILITY THAT CONTAINS AT LEAST EIGHTY (80) SQUARE FEET OF FLOOR SPACE. EXIT ROUTES FROM ANY ROOM WHICH A CHILD/YOUTH IS BEING SEPARATED MUST BE KEPT FREE OF BARRIERS TO ESCAPE. NO LOCK OR OTHER MECHANISM PREVENTING EGRESS FROM THE ROOM MAY BE INSTALLED. NO CHILD/YOUTH MAY BE ISOLATED IN A BATHROOM, CLOSET, ATTIC, PANTRY, OR GARAGE AS A MEANS OF DISCIPLINE.

D. CHILDREN/YOUTH IN CARE AT THE FACILITY MUST NOT DISCIPLINE OTHER CHILDREN/YOUTH. 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.

E. A FACILITY SHALL PROHIBIT ALL CORPORAL, INHUMANE, CRUEL, AND UNUSUAL DISCIPLINE INCLUDING, BUT NOT LIMITED TO, THE FOLLOWING:

1. ANY TYPE OF PHYSICAL PUNISHMENT INFLICTED IN ANY MANNER UPON THE BODY OF THE CHILD/YOUTH SUCH AS SPANKING, STRIKING, SWATTING, PUNCHING, SHAKING, BITING, HAIR PULLING, ROUGHLY HANDLING, STRIKING WITH AN INANIMATE OBJECT, OR DISCIPLINE THAT IS DESIGNED TO, OR LIKELY TO, CAUSE PHYSICAL PAIN.

2. ANY SHAMING, HUMILIATING, OR FRIGHTENING METHOD OF DISCIPLINE TO CONTROL THE ACTIONS OF ANY CHILD/YOUTH OR GROUP OF CHILDREN/YOUTH.

3. PHYSICAL EXERCISE 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 HARD WORK THAT COULD RESULT IN HARM TO THE CHILD/YOUTH.

5. REQUIRING OR FORCING A CHILD/YOUTH TO TAKE AN UNCOMFORTABLE POSITION SUCH AS SQUATTING OR BENDING OR REQUIRING A CHILD/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 CHILD/YOUTH 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, DEROGATORY REMARKS ABOUT THE CHILD/YOUTH, THEIR FAMILY, THEIR RACE, ANCESTRY, ETHNIC GROUP, NATIONAL ORIGIN, RELIGION, SEX, SEXUAL ORIENTATION, GENDER IDENTITY, GENDER EXPRESSION, DISABILITY, MARITAL STATUS, FAMILIAL STATUS, SOURCE OF INCOME, MILITARY STATUS, HIV STATUS, CULTURAL BACKGROUND, OR ANY OTHER COMPONENT OF THE CHILD'S/YOUTH'S IDENTITY, OR ANY INTERVENTION OR TYPE OF TREATMENT THAT SUBJECTS A CHILD/YOUTH TO VERBAL ABUSE, RIDICULE, HUMILIATION, OR THAT CAN BE EXPECTED TO CAUSE EXCESSIVE EMOTIONAL TRAUMA.

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 VISITS OR COMMUNICATION PRIVILEGES WITH FAMILY, CLERGY, ATTORNEY, GUARDIAN AD LITEM (GAL), COUNSEL FOR YOUTH (CFY), MENTAL HEALTH PROFESSIONALS, COURT-APPOINTMENT SPECIAL ADVOCATES, EDUCATION RIGHTS HOLDERS, PROBATION OFFICERS, AND/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/YOUTH'S FACE.

12. ANY INTERVENTION THAT DENIES A CHILD/YOUTH SLEEP, FOOD, WATER, SHELTER, ACCESS TO BATHROOM FACILITIES, ADEQUATE BEDDING, OR APPROPRIATE PHYSICAL COMFORT.

13. REQUIRING THE CHILD/YOUTH TO REMAIN SILENT FOR A PERIOD OF TIME AS A FORM OF PUNISHMENT.

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/YOUTH TO BED AS PUNISHMENT. THIS DOES NOT PROHIBIT A FACILITY FROM SETTING INDIVIDUAL BEDTIMES FOR CHILDREN/YOUTH.

18. FORCE FEEDING A CHILD/YOUTH.

19. USE OF EMERGENCY INTERVENTIONS (E.G. PHYSICAL RESTRAINT OR SECLUSION) AS DISCIPLINE FOR A CHILD/YOUTH, AS A PART OF THERAPY, OR AS A THREAT TO CONTROL OR GAIN COMPLIANCE OF A CHILD'S/YOUTH'S BEHAVIOR.

20. INTERVENTIONS THAT USE A DEVICE, MATERIAL, OR OBJECT THAT IS DESIGNED TO IMMOBILIZE THE CHILD/YOUTH.

21. ANY INTERVENTION THAT DEPRIVES A CHILD/YOUTH OF THE USE OF THEIR SENSES, INCLUDING SIGHT, HEARING, TOUCH, TASTE, OR SMELL.

22. USE OF "REBIRTHING THERAPY" OR ANY THERAPY TECHNIQUE THAT MAY BE CONSIDERED SIMILAR TO REBIRTHING THERAPY AS A THERAPEUTIC TREATMENT, AS DEFINED IN SECTION 12-245-224(1)(T)(IV), C.R.S.

23. USE OF "CONVERSION THERAPY" OR ANY THERAPY TECHNIQUE AIMED AT CHANGING A PERSON'S GENDER IDENTITY, SEXUAL ORIENTATION, OR GENDER EXPRESSION IN

OPPOSITION TO THE CHILD'S/YOUTH'S DOCUMENTED REQUESTS. CONVERSION THERAPY DOES NOT INCLUDE PRACTICES OR TREATMENTS THAT PROVIDE ACCEPTANCE, SUPPORT, AND UNDERSTANDING FOR THE FACILITATION OF AN INDIVIDUAL'S COPING, SOCIAL SUPPORT, AND IDENTITY EXPLORATION AND DEVELOPMENT, INCLUDING SEXUAL ORIENTATION-NEUTRAL INTERVENTIONS TO PREVENT OR ADDRESS UNLAWFUL CONDUCT OR UNSAFE SEXUAL PRACTICES, AS LONG AS THE COUNSELING DOES NOT SEEK TO CHANGE SEXUAL ORIENTATION OR GENDER IDENTITY IN ACCORDANCE WITH SECTION 12-245-224(1)(T)(V), C.R.S.

7.714.8~~1~~2 Medical and Health Services ~~[Rev. eff. 7/2/06]~~

A. The facility shall ensure the availability ~~of a~~ AND MAKE EVERY REASONABLE EFFORT TO OBTAIN A comprehensive program of preventive, routine, and emergency medical, MENTAL HEALTH, VISION, and dental care for each child/YOUTH 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 (1) person to be responsible for the coordination of medical care for the children/YOUTH residing in the facility.

2. Ongoing appraisal of the general health of each child/YOUTH, including ~~immunizations, in accordance with state law and regulations~~ DOCUMENTATION OF IMMUNIZATION STATUS OR EXEMPTION AS REQUIRED BY THE COLORADO DEPARTMENT OF PUBLIC HEALTH AND ENVIRONMENT (CDPHE). PROOF OF IMMUNIZATION MUST BE PROVIDED PRIOR TO OR ON THE FIRST DAY OF ADMISSION.

3. Procedures for obtaining diagnostic services; emergency care, including the availability of a physician or emergency medical facility on a TWENTY-FOUR (24)-hour, seven (7)-day-a-week basis; corrective care; recuperative care; and immunization updates.

4. Provision of AGE AND DEVELOPMENTALLY APPROPRIATE health education, which includes: SEXUAL HEALTH, ~~sex education~~ INCLUDING THE RISK OF SEXUALLY TRANSMITTED DISEASE, AND birth control information. ~~and education, age appropriate to the child.~~

5. Provision that any medical treatment administered will be explained to the child/YOUTH in a language or manner of communication understandable to ~~him/her~~ THEM.

6. The provision of dental care by a Colorado-licensed dentist, who is available to the facility.

7. Procedure for obtaining the VERBAL CONSENT BY A PHYSICIAN, IF IN AN EMERGENCY SITUATION, AND written ~~authorization~~ CONSENT from the child's/YOUTH'S legal guardian(S) or custodian(S) prior to any new psychotropic medication being ~~dispensed~~ ADMINISTERED.

   A. VERBAL CONSENT BY A PHYSICIAN SHALL ONLY BE UTILIZED IN AN EMERGENCY SITUATION. VERBAL CONSENT MUST BE COMMUNICATED ONLY THROUGH THE PHYSICIAN AND THE NURSE ON DUTY AND DOCUMENTED IN THE CHILD/YOUTH INDIVIDUAL FILE.

   B. WRITTEN CONSENT SHALL BE OBTAINED AFTER THE EMERGENCY HAS SUBSIDED AND WITHIN FORTY-EIGHT (48) HOURS OF ADMINISTRATION OF ANY NEW PSYCHOTROPIC MEDICATION.

   C. THE CHILD'S/YOUTH'S PARENT(S), LEGAL GUARDIAN(S), AND CUSTODIAN(S) SHALL BE NOTIFIED OF ANY CHANGE OF DOSAGE IN PSYCHOTROPIC MEDICATIONS PRIOR TO THE NEW DOSAGE BEING ADMINISTERED, INCLUDING THE REASON FOR THE CHANGE AND THE NEW DOSAGE ORDERED BY THE PRESCRIBING PROVIDER.

8. Procedures for ~~dispensing~~ NOTIFYING CHILDREN/YOUTH ABOUT PRESCRIBED MEDICATION AND THEIR PURPOSES; ADMINISTRATION OF medication; storage of medication; documentation of administration of all medication; disposing of medications when not needed or no longer in use; DOCUMENTING CURRENT OR UNUSED MEDICATIONS AT TIME OF DISCHARGE; ENSURING CHILDREN'S/YOUTH'S ACCESS TO PRESCRIBED MEDICATIONS

DURING PLACEMENT CHANGES AND SIMILAR TRANSITIONS; and notification to a primary physician in cases of medication errors and/or drug reactions.

B. A general medical examination for each child/YOUTH 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/YOUTH'S file. This exam shall include the following:

1. A REVIEW OF THE CHILD'S/YOUTH'S MEDICAL HISTORY, WHEN AVAILABLE, AT TIME OF EXAMINATION.

2. A REVIEW OF CURRENT MEDICATIONS THE CHILD/YOUTH IS TAKING AND MEDICATIONS THE CHILD/YOUTH HAS BEEN TAKING WITHIN THIRTY (30) DAYS PRIOR TO PLACEMENT.

~~1~~3. An examination for physical injury and ONGOING MEDICAL CONDITIONS ~~disease~~.

~~2~~4. Vision and hearing screening.

~~3~~5. A current assessment of the child's/YOUTH'S health, including immunizations.

C. Whenever indicated, a child/YOUTH ~~shall~~ MUST 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 LICENSED HEALTH CARE PROVIDER~~qualified health professional~~. ONGOING MEDICAL CONDITIONS MUST BE CONSIDERED BEFORE IMPLEMENTATION OF A TREATMENT STRATEGY.

E. Dental examinations for all children/YOUTH three (3) years of age or older, or at a younger age if recommended by a physician or dentist, must have been completed within four (4) months prior to placement or within eight (8) weeks following placement. The facility ~~or governing body~~ ~~shall~~ MUST ensure that each child/YOUTH receives a dental examination every six (6) 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~~ For every TWENTY (20) CHILDREN/YOUTH, AT least one (1) person ~~present at the facility and~~ supervising the children/YOUTH ~~for every 20 children present, who is~~ MUST BE certified in First Aid or the equivalent, ~~and~~ CPR, AND AED for all ages of children/YOUTH in care. WHEN CHILDREN/YOUTH ARE WITH A STAFF MEMBER AWAY FROM THE FACILITY, THE STAFF MEMBER MUST HAVE A CURRENT CERTIFICATION(S) IN FIRST AID, CPR, AND AED. THE FIRST AID, CPR, AND AED COURSE MUST BE FROM A NATIONALLY RECOGNIZED ORGANIZATION AND INCLUDE A FACE-TO-FACE DEMONSTRATION OF COMPETENCY WITH A CERTIFIED INSTRUCTOR IN BOTH CHILD/YOUTH AND ADULT COMPETENCIES.

G. The facility, in conjunction with the parent(s) ~~or~~, LEGAL guardian(s), AND CUSTODIAN(S) ~~shall~~ MUST make every effort to ensure that a child/YOUTH 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/YOUTH'S general health from a LICENSED HEALTH CARE PROVIDER~~medical examiner~~. In a potentially life-threatening situation, the facility ~~shall~~ MUST refer the child's/YOUTH'S care to the appropriate medical and legal authority. If a child/YOUTH wishes an exemption from a medical examination or medical treatment due to religious beliefs, the child/YOUTH ~~shall~~ MUST submit a written statement signed by ~~his/her~~ THEIR parent(s) ~~or~~, LEGAL guardian(s), AND CUSTODIAN(S) AT THE TIME OF ADMISSION which states the reasons for such an exemption. The facility has the right to refuse admission to a child/YOUTH whose parent(s) ~~or~~, LEGAL guardian(s), AND CUSTODIAN(S) refuses medical treatment or examination based upon religious convictions.

I. The facility ~~shall~~ MUST 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.~~ SUMMARY OF THE MEDICAL CARE RECEIVED BY THE CHILD/YOUTH WHILE AT THE FACILITY, INCLUDING THE DATES OF SERVICE; THE NAME AND CONTACT INFORMATION OF THE MEDICAL PROFESSIONAL WHO EXAMINED THE CHILD/YOUTH; THE

RESULTS OF THE EXAM; AND ANY MEDICATION THAT WAS PRESCRIBED OR HAD A CHANGE OF FREQUENCY OR DOSAGE. ~~If received, the original of~~ A COPY OF the document ~~shall~~ MUST be given to the caseworker upon the child's/YOUTH'S discharge so that it can be given to the facility where the child/YOUTH is being admitted or to the child's/YOUTH'S parent(s), LEGAL guardian(s), CUSTODIAN(S), or family member(s) with whom the child/YOUTH is placed. WHEN THE FACILITY HAS RECEIVED A SUMMARY OF MEDICAL CARE FROM A PREVIOUS PLACEMENT, THIS INFORMATION MUST BE INCLUDED IN THE DISCHARGE SUMMARY, AS OUTLINED IN SECTION 7.714.85, TO PROVIDE A CUMULATIVE HEALTH HISTORY TO SUBSEQUENT CAREGIVERS.

J. Medications shall be administered and stored in ~~the following manner~~ ACCORDANCE WITH THE MANNER DESCRIBED WITHIN THIS SUBSECTION J AND CDPHE REGULATIONS REGARDING MEDICATION ADMINISTRATION, STORAGE, AND DISPOSAL (JULY 1, 2017) WHICH ARE HEREIN INCORPORATED BY REFERENCE. NO LATER EDITIONS OR AMENDMENTS ARE INCORPORATED. THE REGULATIONS CAN BE FOUND AT 6 CCR 1011-1, CHAPTER 24 OR HTTPS://WWW.SOS.STATE.CO.US/CCR/DISPLAYRULE.DO?ACTION=RULEINFO&RULEID=3050&DEPTID=16&AGENCYID=144&DEPTNAME=DEPARTMENT%20OF%20PUBLIC%20HEALTH%20AND%20ENVIRONMENT&AGENCYNAME=HEALTH%20FACILITIES%20AND%20EMERGENCY%20MEDICAL%20SERVICES%20DIVISION%20(1011,%201015%20SERIES)&SERIESNUM=6%20CCR%201011-1%20CHAPTER%2024. THESE REGULATIONS ARE ALSO AVAILABLE FOR PUBLIC INSPECTION AT THE COLORADO DEPARTMENT OF HUMAN SERVICES, 1575 SHERMAN STREET, DENVER, CO 80203, DURING REGULAR BUSINESS HOURS:

1. When a child/YOUTH first comes into care, the facility ~~shall~~ MUST ascertain all medication the child/YOUTH is currently taking AND THE MEDICATIONS THAT ARRIVED WITH THE CHILD/YOUTH. MEDICATIONS ARRIVING WITH THE CHILD/YOUTH MUST ONLY BE ACCEPTED IF STORED IN THE ORIGINAL PHARMACY-LABELED CONTAINER WITH THE CHILD'S/YOUTH'S NAME AND PRESCRIBER. MULTIPLE MEDICATIONS COMBINED IN ONE (1) CONTAINER MUST NOT BE ACCEPTED. MEDICATIONS CURRENTLY PRESCRIBED FOR THE CHILD/YOUTH THAT DID NOT ARRIVE WITH THE CHILD/YOUTH MUST BE OBTAINED WITHIN TWENTY-FOUR (24) HOURS AFTER ADMISSION. WHEN A MEDICATION IS REQUIRED TO SUSTAIN LIFE, THE MEDICATION MUST BE OBTAINED BY THE NEXT SCHEDULED DOSE, EVEN IF THE NEXT DOSE IS DUE IN LESS THAN TWENTY-FOUR (24) HOURS.

2. All medication must be kept in a clean, locked storage area inaccessible to children/YOUTH and stored according to pharmacy instructions.

   A. MEDICATIONS MUST BE STORED IN THEIR ORIGINAL CONTAINER WITH PHARMACY LABEL AT ALL TIMES. THE USE OF "PILL BOXES" OR "REMINDER BOXES" OR PRE-POURING OF MEDICATIONS IS PROHIBITED UNLESS PREPARED AND ADMINISTERED BY AN APPROVED PHARMACY.

   B. MEDICATIONS THAT REQUIRE REFRIGERATION MUST BE STORED SEPARATE FROM FOOD. IF MEDICATIONS THAT REQUIRE REFRIGERATION ARE STORED IN THE SAME REFRIGERATOR AS FOOD, THEY MUST BE IN A SEALED CONTAINER, AWAY FROM FOOD, AND NOT ON A SHELF OVER ANY OTHER FOOD IN THE REFRIGERATOR.

   C. CONTAINERS OF OVER-THE-COUNTER MEDICATIONS USED OCCASIONALLY AS A "PRO RE NATA" (PRN) AND NOT PRESCRIBED AS AN ONGOING TREATMENT PROGRAM FOR AN INDIVIDUAL CHILD/YOUTH, DO NOT HAVE TO BE LABELED WITH THE NAME OF AN INDIVIDUAL CHILD/YOUTH FOR USE.

   D. MEDICATION MUST NOT BE STORED WITH DISINFECTANT, INSECTICIDES, BLEACHES, HOUSEHOLD CLEANING SOLUTIONS, OR POISONS.

   E. CONTROLLED MEDICATIONS MUST BE DOUBLE LOCKED, AND THE KEYS TO THE LOCKS MUST BE UNDER THE CONTROL OF THE STAFF MEMBER RESPONSIBLE FOR ADMINISTERING MEDICATIONS AT ALL TIMES.

3. All prescriptive medications shall be administered only upon the written prescription of a ~~physician or nurse practitioner~~ LICENSED HEALTH CARE PROVIDER. The facility ~~shall~~ MUST also obtain written authorization from the ~~prescribing physician or nurse practitioner~~ PRESCRIBING

PROVIDER to administer any ~~non-prescriptive~~ NON-PRESCRIPTION, PRO RE NATA (PRN), OR OVER-THE-COUNTER medication, including dietary supplements~~,~~ AND VITAMINS USED TO TREAT AN IDENTIFIED SYMPTOM.

A. ALL MEDICATIONS AND SUPPLEMENTS AUTHORIZED FOR USE BY THE CHILD/YOUTH MUST BE LABELED WITH THE CHILD'S/YOUTH'S NAME.

B. THE FACILITY MAY MAINTAIN ON SITE AND USE EPINEPHRINE INJECTORS IN ACCORDANCE WITH SECTION 25-47-103, C.R.S.

C. STAFF AUTHORIZED TO ADMINISTER EPINEPHRINE MUST BE TRAINED AS REQUIRED IN SECTION 25-47-104, C.R.S. ANY STAFF MEMBER WHO ADMINISTERS EPINEPHRINE MUST IMMEDIATELY ENSURE THE INJECTED INDIVIDUAL IS TRANSPORTED TO AN EMERGENCY ROOM.

4. THE FACILITY MUST OBTAIN CONSENT FROM THE CHILD'S/YOUTH'S PHYSICIAN, PARENT(S), AND LEGAL GUARDIAN(S) OR CUSTODIAN(S) FOR ANY CHANGES IN THE TYPE OR DOSE OF MEDICATION THE CHILD/YOUTH IS TAKING IN ACCORDANCE WITH SECTION 7.714.82.A.7. VERBAL CONSENT BY A PHYSICIAN IS ONLY ALLOWED IN AN EMERGENCY SITUATION. IN NON-EMERGENCY SITUATIONS, WRITTEN CONSENT FROM THE CHILD'S/YOUTH'S LEGAL GUARDIAN(S) AND CUSTODIAN(S) MUST BE OBTAINED PRIOR TO ANY NEW PSYCHOTROPIC MEDICATION BEING ADMINISTERED. THE FACILITY MUST IDENTIFY A PROCEDURE FOR OBTAINING VERBAL CONSENT FROM A PHYSICIAN IN AN EMERGENCY SITUATION PRIOR TO ANY NEW PSYCHOTROPIC MEDICATION BEING ADMINISTERED CONSISTENT WITH SECTION 7.714.82.A.7.

5. THE FACILITY MUST OBTAIN A MINIMUM OF VERBAL AUTHORIZATION FROM THE CHILD'S/YOUTH'S PHYSICIAN, PARENT(S), AND LEGAL GUARDIAN(S) OR CUSTODIAN(S) FOR ANY MEDICATION PRESCRIBED FOR EACH ACUTE ILLNESS OR INJURY. THIS MUST BE DOCUMENTED IN THE CHILD/YOUTH FILE.

~~4~~6. The facility ~~shall~~ MUST have a written medication schedule for each child/YOUTH to whom medication is prescribed, INCLUDING NON-PRESCRIPTIVE MEDICATIONS OR PROCEDURES ORDERED BY A PRESCRIBING PROVIDER, a copy of which ~~shall~~ MUST be available to staff. THE INFORMATION ON THE MEDICATION SCHEDULE AND THE MEDICATION ADMINISTRATION RECORD MUST INCLUDE THE REASON THE MEDICATION IS BEING PRESCRIBED AND MUST BE CONSISTENT WITH THE WRITTEN PRESCRIBING PROVIDER ORDER AND THE PHARMACY LABEL FOR EACH MEDICATION AND/OR PROCEDURE ORDERED.

~~5~~7. In an emergency situation, non-prescriptive medication may be administered on the verbal authorization of a ~~physician~~ PRESCRIBING PROVIDER. Written confirmation must then be obtained for the verbal authorization WITHIN FORTY-EIGHT (48) HOURS EXCLUDING WEEKENDS AND FEDERAL HOLIDAYS.

~~6~~8. The facility ~~shall~~ MUST maintain for each child/YOUTH a cumulative record of all medication, both prescriptive and non-prescriptive, ~~dispensed~~ ADMINISTERED to that child/YOUTH AND ANY PROCEDURES ORDERED BY THE PRESCRIBING PROVIDER including:

a. The name of the child/YOUTH~~.~~;

B. THE NAME OF THE PRESCRIBING PROVIDER;

C. THE REASON THE MEDICATION OR PROCEDURE WAS ORDERED;

~~b~~D. The name and dosage of medication~~.~~;

E. A DESCRIPTION OF THE PROCEDURE ADMINISTERED AND THE RESULTS, ALONG WITH ANY MEDICAL FOLLOW UP REQUIRED;

~~c~~F. The time and date the medication was ~~dispensed.~~ ADMINISTERED OR PROCEDURE WAS CONDUCTED; AND

~~d~~G. The name of the person administering the medication OR CONDUCTING THE PROCEDURE.

9. THE FACILITY MUST MAINTAIN A RECORD OF ALL CONTROLLED SUBSTANCES ON SITE, INCLUDING:

A. THE NAME OF THE LICENSED HEALTH CARE PROVIDER PRESCRIBING THE MEDICATION PROVIDER;

B. THE REASON THE MEDICATION WAS PRESCRIBED;

C. THE NAME OF THE MEDICATION;

D. THE DOSAGE OF THE MEDICATION;

E. THE NUMBER OF PILLS BROUGHT INTO THE FACILITY;

F. THE NAME OF THE CHILD/YOUTH FOR WHICH THE MEDICATION IS PRESCRIBED;

G. A STARTING COUNT AND ENDING COUNT FOR EACH SHIFT CONDUCTED BY TWO (2) DIFFERENT STAFF, ONE (1) ON EACH SHIFT;

H. THE INITIALS OF THE INDIVIDUAL(S) WHO CONDUCTED THE COUNT; AND

I. A PRINTED NAME / IDENTIFIER FOR THE INITIALS.

10. ALL CONTROLLED SUBSTANCES SHALL BE STORED UNDER DOUBLE LOCK AT ALL TIMES. KEYS THAT OPEN THE LOCKS TO THE CONTROLLED SUBSTANCES MUST BE UNDER THE CONTROL OF THE PERSON(S) RESPONSIBLE FOR ADMINISTERING THE MEDICATION OR SECURED IN AN ADDITIONAL LOCKED AREA AT ALL TIMES.

~~7~~11. The facility shall document the following information as it relates to handling ~~and dispensing~~ ADMINISTRATION OF, RETURN OF, AND DISPOSAL OF medication:

a. Documentation of:

1.~~)~~ ~~a~~All medication errors, INCLUDING FOLLOW-UP WITH THE STAFF MEMBER WHO WAS RESPONSIBLE FOR THE ERROR AND/OR THE PRESCRIBING PROVIDER, IF NECESSARY; and~~;~~

2.~~)~~ ~~drug reactions.~~ ADVERSE REACTIONS CAUSED BY THE MEDICATION ERROR OR AFTER THE ADMINISTRATION OF THE MEDICATION.

b. Documentation of all discontinued medication, MEDICATIONS THAT ARE REFUSED OR WASTED, and disposing of medications. MEDICATIONS MUST BE DISPOSED OF IN ACCORDANCE WITH CDPHE REGULATIONS REGARDING MEDICATION ADMINISTRATION, STORAGE, AND DISPOSAL, AS INCORPORATED BY REFERENCE IN SECTION 7.714.82.J.

~~8~~12. Only staff members WHO ARE QUALIFIED MANAGERS, AS DEFINED~~ AUTHORIZED BY STATE STATUTE~~ IN SECTION 25-1.5-301(4), C.R.S. OR ~~trained and~~ authorized BY PASSING THE QUALIFIED MEDICATION ADMINISTRATION PERSON (QMAP) TRAINING AND ASSESSMENT THROUGH THE COLORADO DEPARTMENT OF PUBLIC HEALTH AND ENVIRONMENT WITHIN THE LAST FIVE (5) YEARS ~~by State statute shall~~ ARE APPROVED TO administer medications. ~~All direct care staff shall be trained in the recognition of common side effects of medication.~~ THE APPROVED TRAINING ENTITY (ATE) MUST ALSO INCLUDE IN ITS COURSE CONTENT, THE EXPECTATIONS REGARDING MEDICATION ADMINISTRATION SET FORTH IN SECTION 7.714.82.J. VERIFICATION OF CURRENT QMAP TRAINING MUST CONFIRM THE DATE THE TRAINING WAS GIVEN. THE STAFF MEMBER MUST ALSO RECEIVE ADDITIONAL TRAINING SPECIFIC TO THE PROGRAM AS FOUND AT SECTION 7.714.82.J. VERIFICATION OF PASSING THE QMAP EVALUATION AND ANY OTHER ADDITIONAL PROGRAM-SPECIFIC

MEDICATION ADMINISTRATION TRAINING MUST BE MAINTAINED IN THE STAFF MEMBER'S PERSONNEL FILE.

A. A FACILITY MUST REQUIRE EACH QMAP OR QUALIFIED MANAGER, AS A CONDITION OF EMPLOYMENT OR PROMOTION TO A POSITION FOR WHICH THE INDIVIDUAL HAS ACCESS TO MEDICATIONS, TO SIGN A DISCLOSURE STATEMENT, UNDER PENALTY OF PERJURY, STATING THAT THEY HAVE NEVER HAD A PROFESSIONAL LICENSE TO PRACTICE NURSING, MEDICINE, OR PHARMACY REVOKED IN COLORADO OR ANY OTHER STATE FOR REASONS DIRECTLY RELATED TO THE ADMINISTRATION OF MEDICATIONS.

B. A MINIMUM OF ONE (1) STAFF CURRENTLY AUTHORIZED TO ADMINISTER MEDICATIONS MUST BE ON SITE AND AVAILABLE DURING ALL OPERATIONAL HOURS.

C. STAFF CURRENTLY TRAINED AS A QMAP MUST FOLLOW ALL REQUIREMENTS COVERED IN THE QMAP CERTIFICATION EXCEPT WHERE THESE PRACTICES ARE PROHIBITED OR DO NOT APPLY TO CHILDREN OR YOUTH IN CARE. PRACTICES MUST TAKE INTO CONSIDERATION THE COGNITIVE AND DEVELOPMENTAL LEVEL OF THE CHILD/YOUTH AND NOT INVADE A CHILD'S/YOUTH'S PRIVACY.

D. ANY MEDICATIONS THAT REQUIRE THE QMAP TO USE AN ADMINISTRATION ROUTE OTHER THAN TOPICAL OR ORAL, INCLUDING BUT NOT LIMITED TO, GASTROSTOMY TUBE OR ADMINISTRATION OF INSULIN BY SYRINGE, MUST BE SPECIFICALLY AUTHORIZED FOR ADMINISTRATION PER SECTION 12-255-131, C.R.S. OF THE NURSE AND NURSE AIDE PRACTICE ACT.

E. IN ADDITION TO THE CDPHE QMAP TRAINING, EACH FACILITY MUST PROVIDE ON-THE-JOB, EVIDENCE-BASED TRAINING THAT FOCUSES ON THE UNIQUE MEDICATION NEEDS OF THE POPULATION OF THE FACILITY.

F. ALL DIRECT CARE STAFF MUST BE TRAINED IN THE RECOGNITION OF COMMON SIDE EFFECTS OF MEDICATION.

13. STAFF CURRENTLY TRAINED AS A QMAP MUST FOLLOW THE SEVEN (7) RIGHTS OF THE ADMINISTRATION OF MEDICATIONS AS FOLLOWS:

A. RIGHT PERSON;

B. RIGHT MEDICATION;

C. RIGHT DOSE;

D. RIGHT TIME;

E. RIGHT ROUTE;

F. RIGHT DOCUMENTATION; AND

G. RIGHT TO REFUSE.

14. MEDICATIONS PREPARED FOR CHILDREN/YOUTH THAT WILL BE AWAY FROM THE FACILITY DURING THE TIME OF SCHEDULED ADMINISTRATION, MUST BE PREPARED IN COMPLIANCE WITH THE PHARMACEUTICAL PRACTICE ACT, SECTIONS 12-280-101 THROUGH 12-280-604, C.R.S.; THE UNIFORM CONTROLLED SUBSTANCES ACT OF 2013, SECTIONS 18-18-101 THROUGH 18-18-607, C.R.S.; AND THE STATE BOARD OF PHARMACY RULES AND REGULATIONS AT 3 CCR 719-1 (NOVEMBER 30, 2024), HEREIN INCORPORATED BY REFERENCE. NO LATER EDITIONS OR AMENDMENTS ARE INCORPORATED. THESE REGULATIONS ARE AVAILABLE AT NO COST FROM THE COLORADO STATE PHARMACY BOARD AT 1560 BROADWAY, DENVER, CO 80202 OR AT HTTPS://WWW.COLORADOSOS.GOV/CCR/GENERATERULEPDF.DO?RULEVERSIONID=11694&FILENAME=3%20CCR%20719-1. THESE REGULATIONS ARE ALSO AVAILABLE FOR PUBLIC

INSPECTION AND COPYING AT THE COLORADO DEPARTMENT OF HUMAN SERVICES, PROVIDER SERVICES UNIT, 1575 SHERMAN ST., DENVER, CO 80203, DURING REGULAR BUSINESS HOURS.

15. WHEN A CHILD'S/YOUTH'S INDIVIDUAL PLAN INCLUDES A PROVISION FOR THE CHILD/YOUTH TO LEARN ABOUT AND/OR MANAGE AN ONGOING HEALTH CONDITION, PER PRESCRIBING PROVIDER'S ORDERS, FOR THE PURPOSE OF CONTINUED LIFE SKILLS, AND SELF CARE, A QMAP STAFF MAY MONITOR THE YOUTH SELF-ADMINISTERING THE MEDICATION. MONITORING MEANS:

A. REMINDING THE CHILD/YOUTH TO TAKE MEDICATION(S) AT THE TIME ORDERED BY THE PRESCRIBING PROVIDER.

B. HANDING THE CHILD/YOUTH A CONTAINER OR PACKAGE OF MEDICATION THAT WAS LAWFULLY LABELED PREVIOUSLY BY A PHARMACIST FOR THE INDIVIDUAL CHILD/YOUTH.

C. VISUAL OBSERVATION OF THE CHILD/YOUTH SELF-ADMINISTERING THE MEDICATION TO ENSURE COMPLIANCE.

D. MAKING A WRITTEN RECORD OF THE CHILD'S/YOUTH'S COMPLIANCE WITH REGARD TO EACH MEDICATION, INCLUDING THE TIME TAKEN.

E. NOTIFYING THE PRESCRIBING PROVIDER IF THE CHILD/YOUTH REFUSES OR IS UNABLE TO COMPLY WITH THE PRESCRIBING PROVIDER'S INSTRUCTIONS REGARDING THE MEDICATION.

K. In all instances where a new prescription medication is to be ordered as a part of ~~a~~ AN ONGOING treatment program OR DUE TO AN ACUTE ILLNESS OR INJURY, the following information ~~shall~~ MUST be provided to the ~~client~~ CHILD/YOUTH, THEIR PARENT(S), CUSTODIAN(S), and ~~his/her custodian or~~ legal guardian(S):

1. THE NAME OF THE PRESCRIBING PROVIDER THAT ORDERED THE MEDICATION;

~~1~~2. The name of the medication being prescribed;

~~2~~3. The proper use of the medication;

~~3~~4. The reasons for ordering the medication for this ~~client~~ CHILD/YOUTH;

~~4~~5. A description of the benefits expected;

~~5~~6. The common side effects, if any;

~~6~~7. The major risks, if any;

~~7~~8. The probable consequences of not taking the medication explained in a language or mode of communication that is easily understood by the child/YOUTH, ~~his/her~~THEIR PARENT(S) ~~family~~, and/or legal guardian(S) OR CUSTODIAN(S).

L. No involuntary medications may be administered UNLESS THE FACILITY IS LICENSED AS A PRTF AND APPROVED THROUGH FACILITY POLICIES AND PROCEDURES TO ADMINISTER CHEMICAL RESTRAINTS.

~~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~~M. The child/YOUTH may refuse to take ~~his/her~~THEIR medication at any time. The facility must document the refusal in the medication log. THE FACILITY MUST HOLD A STAFFING WITH THE CHILD'S/YOUTH'S MULTIDISCIPLINARY TEAM FOR A CHILD/YOUTH WHO HAS REFUSED MEDICATION FOR MORE THAN FIVE (5) DAYS TO DETERMINE POSSIBLE SOLUTIONS AND EVALUATE CONTINUED

PLACEMENT. THE STAFFING MUST OCCUR WITHIN TWENTY-FOUR (24) HOURS IF THE CHILD/YOUTH IS REFUSING ANY LIFE-SAVING~~THREATENING~~ MEDICATIONS.

~~O~~N. No child/YOUTH shall be threatened with or experience ~~adverse~~ ANY behavioral consequences OR DISCIPLINARY ACTION by staff ~~action~~ due to refusal to take medication.

O. THE FACILITY MUST HAVE NALOXONE AVAILABLE ONSITE AND IN FACILITY VEHICLES AT ALL TIMES. ALL STAFF MUST BE TRAINED ON HOW TO USE NALOXONE. CERTIFICATES FOR NALOXONE TRAINING MUST BE KEPT IN EACH STAFF MEMBER'S FILE.

~~**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/YOUTH receive training in good habits of personal care, hygiene, and grooming appropriate to their age, gender IDENTITY, race, and culture.

1. FACILITY STAFF ~~There shall~~ MUST ~~be supervision~~ SUPERVISE CHILDREN/YOUTH to provide for proper grooming and physical cleanliness of the children/YOUTH.

2. The facility ~~shall~~ MUST ensure that children/YOUTH ~~are provided with~~ HAVE ACCESS TO necessary and appropriately maintained toiletry items, individual towels and washcloths, toothbrush, toothpaste, comb, ~~and~~ shampoo, AND OTHER GENDER AND CULTURALLY AFFIRMING HYGIENE PRODUCTS DURING DAILY HYGIENE ROUTINE TIMES AND OTHER TIMES HYGIENE IS NECESSARY FOR THE CHILD/YOUTH.

B. The facility ~~shall~~ MUST have a plan of basic daily routines for children/YOUTH in care.

1. Daily routines ~~shall~~ MUST not be allowed to conflict with the implementation of a child's/YOUTH'S plan.

2. Daily routines ~~shall~~ MUST be established for mealtimes, waking, and bedtimes.

3. Opportunity for physical ~~exercise~~ ACTIVITY ~~shall~~ MUST be planned for each child/YOUTH.

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

A. THE FACILITY SHALL MAKE PROVISIONS FOR THE STORAGE AND PROTECTION OF CHILDREN'S/YOUTH'S PROPERTY WHEN ADMITTED INTO THE FACILITY. THE FACILITY/AGENCY IS RESPONSIBLE FOR CREATING A WRITTEN POLICY OR ACKNOWLEDGEMENT, AS IDENTIFIED IN SECTION 7.705.63.C, THAT IDENTIFIES THE LENGTH OF TIME CHILDREN'S/YOUTH'S PROPERTY WILL BE STORED AT THE FACILITY/AGENCY.

~~A~~B. The facility shall allow a child/YOUTH in care to bring ~~his/her~~ THEIR personal belongings to the program~~, as defined by the facility policy,~~ and to acquire belongings of ~~his/her~~ THEIR own AS APPROPRIATE TO THEIR AGE AND DEVELOPMENTAL LEVEL ~~in accordance with the child's plan~~. However, the facility shall, as necessary, ~~limit or~~ supervise the use of these items while the child/YOUTH is in care. CHILDREN/YOUTH RESIDING IN FOSTER CARE OR PARTICIPATING IN THE FOSTER YOUTH IN TRANSITION PROGRAM HAVE A RIGHT TO BASIC ESSENTIALS INCLUDING PERSONAL BELONGINGS AS OUTLINED IN SECTION 19-7-101(2)(F)(III), C.R.S. THAT SHALL ONLY BE LIMITED OR DENIED BY COURT ORDER. FOR OTHER CHILDREN WHO ARE NOT RESIDING IN FOSTER CARE OR NOT PARTICIPATING IN THE FOSTER YOUTH IN TRANSITION PROGRAM, THE FACILITY SHALL, AS NECESSARY FOR THE SAFETY OF THE CHILD/YOUTH, LIMIT THE USE OF THESE ITEMS WHILE THE CHILD/YOUTH IS IN CARE.~~,~~ Where extraordinary limitations are imposed, the child/YOUTH shall be informed of the reasons, in a language or manner of communication the child/YOUTH can understand. The decision and reasons shall be recorded in the child's/YOUTH'S FILE ~~case record~~. Provisions shall be made for the protection of the child's/YOUTH'S property.

~~B~~C. The facility shall ensure that each child/YOUTH in care has adequate clean, proper-fitting, ~~attractive~~ SUITABLE, and seasonable clothing as required for health, comfort, and physical well-being and as appropriate to age, gender IDENTITY, individual needs, culture, and ethnicity.

1. Each child's/YOUTH'S clothing shall be distinguished as ~~his/hers~~ THEIR own in accordance with the facility's policies.

2. A child's/YOUTH'S clothing shall be kept clean and in good repair. The child/YOUTH shall be involved, as appropriate, in the care and maintenance of ~~his/her~~ THEIR clothing. As appropriate, laundering, ironing, and sewing facilities MUST ~~shall~~ be accessible to ~~tic~~ THE child/YOUTH AND SUPERVISED BY STAFF WHILE IN USE.

~~C~~D. The facility shall ensure that discharge plans make provisions for clothing needs at time of discharge. The wardrobe for each child/YOUTH MUST ~~shall~~ go with ~~him/her~~ THEM at time of discharge IN APPROPRIATE LUGGAGE.

E. SHOULD THERE BE BELONGINGS LEFT AT THE TIME OF THE CHILD'S/YOUTH'S DISCHARGE, THE FACILITY IS RESPONSIBLE FOR FOLLOWING THEIR POLICY FOR STORAGE AND DISPOSAL OF BELONGINGS, AS IDENTIFIED IN SECTION 7.705.63.F.

7.714.85 DISCHARGE AND AFTERCARE PLAN

A. WITHIN FORTY-FIVE (45) CALENDAR DAYS OF ADMITTING A CHILD/YOUTH INTO CARE, THE FACILITY MUST DEVELOP A DISCHARGE AND AFTERCARE PLAN IN COLLABORATION WITH THE COUNTY DEPARTMENT OF HUMAN/SOCIAL SERVICES OR PLACING ENTITY, THE CHILD/YOUTH, AND THE FAMILY ENGAGEMENT AND PERMANENCY TEAM.

B. THE AFTERCARE PLAN MUST DESCRIBE THE SERVICES AND RESOURCES NEEDED BY THE SUBSEQUENT CARE PROVIDER TO MEET THE NEEDS OF THE CHILD/YOUTH AND HOW THOSE SERVICES AND RESOURCES WILL BE PROVIDED.

C. IF A CHILD/YOUTH IS DISCHARGED DURING THE FIRST SEVENTY-TWO (72) HOURS OF ADMISSION, THE FACILITY MUST ASSURE THAT AVAILABLE MENTAL HEALTH INFORMATION IS INCLUDED IN THE DISCHARGE SUMMARY PURSUANT TO SECTION 7.714.85.H.

D. ~~THE FACILITY MUST PROVIDE FAMILY BASED AFTERCARE SUPPORT FOR AT LEAST SIX (6) MONTHS POST DISCHARGE AS DETERMINED IN THE PLAN. THE AFTERCARE SUPPORT MUST UTILIZE THE SAME CLINICIAN, IF POSSIBLE, AND DOCUMENT EFFORTS IF UNABLE TO COORDINATE CARE WITH THE SAME CLINICIAN.~~

D~~E~~. THE PLAN MUST BE REVIEWED AND/OR MODIFIED BY THE LICENSED CLINICIAN OR PROVISIONALLY LICENSED CLINICIAN WITH REVIEW AND SIGNATURE BY THE SUPERVISING LICENSED CLINICIAN NO LESS THAN MONTHLY DURING THE CHILD'S/YOUTH'S PLACEMENT AND DURING AFTERCARE SERVICES. CHANGES TO THE PLAN MUST BE DOCUMENTED IN THE CHILD'S/YOUTH'S INDIVIDUAL FILE.

E~~F~~. THE FACILITY MUST INCORPORATE THE PLAN INTO THE DISCHARGE SUMMARY AS OUTLINED AT SECTION 7.714.85.H.

F~~G~~. THE FACILITY MAY REVISE THE TERMS OF AFTERCARE SUPPORT AND SERVICES WITH THE PLACING ENTITY OF ANY CHILD/YOUTH NOT PLACED BY A COUNTY DEPARTMENT OF HUMAN/SOCIAL SERVICES OR THE DIVISION OF YOUTH SERVICES (DYS) AND MUST PROVIDE AFTERCARE SUPPORT IN ACCORDANCE WITH THE CONTRACT ESTABLISHED WITH THE PLACING ENTITY.

G~~H~~. FACILITIES MAY REFER TO OTHER ENTITIES TO PROVIDE AFTERCARE SERVICES AND MUST CLEARLY DOCUMENT IN THE AFTERCARE PLAN WHOM THEY REFERRED TO, CONTACT INFORMATION, AND THE SPECIFIC SERVICES TO BE PROVIDED.

H~~I~~. WITHIN FIVE (5) BUSINESS DAYS OF WHEN A CHILD/YOUTH IS REMOVED FROM PLACEMENT, THE FACILITY MUST COMPLETE AND SEND TO THE PLACING AGENCY, A SUMMARY OF THE CHILD'S/YOUTH'S DISCHARGE FROM THE FACILITY WHICH INCLUDES, AT A MINIMUM:

1. THE DATE OF THE DISCHARGE OF THE CHILD/YOUTH FROM THE FACILITY;

2. WHERE THE CHILD/YOUTH WAS PLACED FOLLOWING DISCHARGE;

3. A SUMMARY OF THE SERVICES PROVIDED TO THE CHILD/YOUTH DURING CARE;

4. GOALS MET/NOT MET DURING TREATMENT AT THE DISCHARGING FACILITY;

5. THE TREATMENT GOALS AND ASSESSED NEEDS WHICH REMAIN TO BE MET AND ALTERNATE SERVICE RECOMMENDATIONS 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; AND

8. THE CIRCUMSTANCES WHICH LED TO AN UNPLANNED DISCHARGE;

I~~J~~. COPIES OF A CHILD'S~~/YOUTH'S~~ FILE, INCLUDING DISCHARGE INFORMATION BUT EXCLUDING ALL MEDICAL AND/OR EDUCATIONAL INFORMATION COVERED BY HIPAA AND FERPA, MUST BE PROVIDED TO PARENT(S), LEGAL GUARDIAN(S), OR CUSTODIAN(S) UPON REQUEST OR TO OTHERS BY WRITTEN CONSENT PURSUANT TO SECTION 7.701.61. COPIES OF A YOUTH'S FILE, INCLUDING DISCHARGE INFORMATION BUT EXCLUDING ALL MEDICAL AND/OR EDUCATIONAL INFORMATION COVERED BY HIPAA AND FERPA, MAY BE PROVIDED UPON REQUEST WITH WRITTEN CONSENT OF THE YOUTH PURSUANT TO SECTION 7.701.61. RELEASES OF INFORMATION SHALL BE CONSISTENT WITH APPLICABLE FEDERAL AND STATE LAW.

7.714.86 REQUIRED NOTIFICATION

A. THE FACILITY SHALL IMMEDIATELY NOTIFY THE CHILD'S/YOUTH'S PARENT(S), LEGAL GUARDIAN(S), CUSTODIAN(S), GUARDIAN AND LITEM AND/OR COUNSEL FOR YOUTH (IF ANY), AND/OR THE RESPONSIBLE PLACING AUTHORITY OF ANY SERIOUS ILLNESS OR SERIOUS INJURY RESULTING IN MEDICAL TREATMENT AWAY FROM THE FACILITY, HOSPITALIZATION, OR DEATH INVOLVING A CHILD/YOUTH IN CARE.

B. THE FACILITY MUST NOTIFY THE PARENT(S), LEGAL GUARDIAN(S), CUSTODIAN(S), GUARDIAN AD LITEM AND OR/COUNSEL FOR YOUTH (IF ANY), AND/OR PLACING AUTHORITY AS SOON AS POSSIBLE OR AT LEAST WITHIN TWENTY-FOUR (24) HOURS EXCLUDING WEEKENDS AND STATE-OBSERVED HOLIDAYS UPON DISCOVERY THAT A CHILD/YOUTH HAS RUN AWAY.

C. CRITICAL INCIDENTS MUST BE REPORTED AS OUTLINED IN SECTION 7.701.52.

D. A REPORT ABOUT DEATH MUST IMMEDIATELY BE PROVIDED TO THE DEPARTMENT LICENSING AND MONITORING SPECIALISTS AND INCLUDE:

1. THE CHILD'S/YOUTH'S NAME, BIRTHDATE, ADDRESS, AND TELEPHONE NUMBER;

2. THE NAMES OF THE CHILD'S/YOUTH'S PARENT(S), LEGAL GUARDIAN(S), CUSTODIAN(S), AND THEIR ADDRESS AND TELEPHONE NUMBER IF DIFFERENT FROM THAT OF THE CHILD/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 CHILD/YOUTH AT THE TIME OF DEATH; AND

6. NAME AND ADDRESS OF THE POLICE DEPARTMENT OR AUTHORITY TO WHOM THE REPORT WAS MADE.

E. ANY CHANGE IN THE STATUS OF THE FACILITY, WHICH INCLUDES, BUT IS NOT LIMITED TO, MOVING LOCATIONS, STRUCTURAL DAMAGE TO THE FACILITY DUE TO FLOODING OR FIRE, OR ANY INSTANCE THAT COULD POTENTIALLY AFFECT THE SAFETY AND CARE OF THE CHILDREN/YOUTH IN CARE, MUST BE IMMEDIATELY REPORTED TO THE DEPARTMENT.

F. THE FACILITY MUST IMMEDIATELY NOTIFY THE DEPARTMENT OF ANY COURT ORDER OR PHYSICIAN'S ORDER THAT VIOLATES THESE REGULATIONS.

G. THE FACILITY MUST REGULARLY NOTIFY THE PARENT(S), LEGAL GUARDIAN(S), CUSTODIAN(S), AND/OR PLACING AUTHORITY OF THE ISSUES RELATED TO THE CARE OF THE CHILD/YOUTH INCLUDING CHANGES IN MEDICATION; ~~USE OF TIME OUT ROOMS;~~ DISCIPLINE; TREATMENT; BEHAVIOR MANAGEMENT; PHYSICAL RESTRAINT AND SECLUSION; AND RESTRICTION OF RIGHTS AS OUTLINED IN SECTION 7.714.31.D.1.

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/YOUTH in care AS OUTLINED IN SECTION 7.705.46.

B. All staff in the facility shall demonstrate:

1. An interest in, and a knowledge of, children/YOUTH and a concern for their proper care and well-being; AND~~.~~

2. AN ABILITY TO MAINTAIN APPROPRIATE PHYSICAL BOUNDARIES AND MAINTAIN A LEVEL OF PROFESSIONALISM WITH CHILDREN/YOUTH IN CARE.

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~~ THEIR ability to properly protect the health and safety of the children/YOUTH in care, or who could endanger the physical or psychological well-being of the children/YOUTH.

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/YOUTH, other staff, or self, or which would prevent performance of duties, shall not be assigned or returned to ~~his/her~~ THEIR position until the condition has cleared to the satisfaction of the examining physician, PHYSICIAN'S ASSISTANT, or nurse practitioner.

7.714.92 Personnel Policy, Orientation, and Training ~~[Rev. eff. 6/1/12]~~

A. The facility shall have a comprehensive written plan for the recruitment, RETENTION, 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~~ MUST include orientation to emergency and safety procedures and the general and specific duties and responsibilities of the job. THE INTRODUCTORY TRAINING AND ORIENTATION TRAINING MUST BE COMPLETED WITHIN THIRTY (30) DAYS OF HIRE.

   A. THE ORIENTATION TRAINING MUST INCLUDE THE FACILITY'S POLICY ON REQUIRED BOUNDARIES BETWEEN STAFF MEMBERS AND THE CHILDREN/YOUTH CARED FOR OR DISCHARGED FROM THE FACILITY.

   B. THE BOUNDARIES TRAINING MUST INCLUDE:

      1. PHYSICAL AND EMOTIONAL BOUNDARIES;

      2. SOCIAL MEDIA BOUNDARIES;

      3. VIDEO OR OTHER ELECTRONIC CONTACT BOUNDARIES;

      4. THE LEGAL RAMIFICATIONS FOR INAPPROPRIATE BOUNDARIES WITH CHILDREN/YOUTH IN CARE; AND

      5. THE FACILITY'S EMPLOYMENT AND TERMINATION PRACTICES FOR EMPLOYEES HAVING OR SUSPECTED OF HAVING INAPPROPRIATE BOUNDARIES WITH CHILDREN/YOUTH IN CARE.

   C. EACH EMPLOYEE MUST REVIEW THE FACILITY'S POLICY ON BOUNDARIES WITHIN NINETY (90) DAYS OF HIRE AND ANNUALLY THEREAFTER AND SIGN A FACILITY-CREATED FORM STATING THAT THEY HAVE REVIEWED AND AGREED TO THE POLICY. DOCUMENTATION MUST BE MAINTAINED IN THE STAFF FILE AND MADE AVAILABLE TO THE DEPARTMENT UPON REQUEST.

2. The facility shall maintain written documentation of specific in-service training held~~,~~ INCLUDING:

   A. THE NAME OF THE TRAINING;

   B. THE DATE AND LENGTH OF THE TRAINING;

   C. A DESCRIPTION OR OUTLINE OF THE TOPICS COVERED IN THE TRAINING;

   D. THE NAME OF THE TRAINER;

   E. THE QUALIFICATIONS OF THE TRAINER;

   F. ~~s~~Staff participating in the training~~,~~;

   G. ~~t~~The hours involved~~,~~; and~~/or~~

   H. ~~o~~Other on-going training activities in which staff were involved.

3. Activities related to supervision of the staff members' routine tasks ~~shall~~ MUST not be considered training activities for the purpose of this requirement.

4. THE FACILITY MUST DEVELOP A WRITTEN, INDIVIDUAL TRAINING PLAN FOR EACH NEWLY HIRED STAFF, TO INCLUDE DIRECT CARE STAFF, SUPERVISORS, AND CLINICAL STAFF, BASED ON THEIR ROLE AND JOB DESCRIPTION AND DUTIES THE PERSON HAS AT TIME OF HIRE. EACH INDIVIDUAL TRAINING PLAN MUST INCLUDE INITIAL STAFF QUALIFICATIONS AS IDENTIFIED IN A POSITION DESCRIPTION AND AREAS OF DEVELOPMENT. THE TRAINING PLAN MUST BE UPDATED ANNUALLY AND KEPT IN THE STAFF FILE.

5. THE FACILITY MUST PROVIDE TRAINING ON VICARIOUS TRAUMA, COMPASSION FATIGUE, BURNOUT, AND SECONDARY TRAUMATIC STRESS. THE FACILITY MUST PROVIDE EITHER IN-HOUSE SELF-CARE ACTIVITIES OR REFERRALS TO RESOURCES FOR STAFF SELF-CARE ACTIVITIES.

6. THE FACILITY MUST NOT TAKE ANY TYPE OF ACTION AGAINST AN EMPLOYEE, INCLUDING, BUT NOT LIMITED TO, RETALIATION, PUNISHMENT, DISCIPLINARY ACTION, ETC.~~ENSURE THERE IS NO RETALIATION OR PUNISHMENT~~ FOR ANY STAFF MEMBER WHO FILES A COMPLAINT OR OTHERWISE REPORTS ANY CONCERNS OR ISSUES WITH THE FACILITY, THE ADMINISTRATION, OTHER STAFF MEMBERS, OR ACTIVITIES WITHIN THE PROGRAM TO THE DEPARTMENT, COUNTY DEPARTMENT OF HUMAN SERVICES, OR LOCAL LAW ENFORCEMENT.

B. The facility shall document that ALL staff receive appropriate training in the following areas~~:~~ AS APPLICABLE TO THEIR POSITION:

1. WITHIN NINETY (90) DAYS OF HIRE AND ANNUALLY THEREAFTER, AS INDICATED BY THEIR DATE OF HIRE:

A~~2~~. ~~The principles and practices of child care, including~~ D~~d~~evelopmentally appropriate practices FOR THE POPULATION SERVED IN THE FACILITY AND THE AGENCY'S TRAUMA-INFORMED CARE MODEL.

B~~3~~. The facility's ~~and, where appropriate, certifying authority's~~ administrative procedures and overall program goals. WHEN THE FACILITY HAS A CERTIFYING~~ SPONSORING~~ AGENCY, THE ADMINISTRATIVE PROCEDURES OF THE CERTIFYING~~ SPONSORING~~ AGENCY MUST ALSO BE INCLUDED IN THE TRAINING.

C~~4~~. Acceptable behavior management techniques~~,~~ AND appropriate discipline PRACTICES. ~~and physical management, restraint and seclusion 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 subject to a physical management.~~

D. DE-ESCALATION STRATEGIES TO BE USED WITH CHILDREN/YOUTH, THE DEFINITION OF EMERGENCY AND IMMINENT DANGER TO SELF AND OTHERS, AND RESPONSIBILITY OF ALL STAFF TO REPORT SUSPICION OF ABUSE AND NEGLECT IF A CHILD/YOUTH IS PHYSICALLY RESTRAINED WITHOUT EMERGENCY CRITERIA BEING MET. (EVERY SIX MONTHS IN ACCORDANCE WITH SECTION 7.714.534.A.1.

~~5~~E. Appropriate professional boundaries (both physical and emotional) between staff and children/YOUTH while in placement at the facility and after discharge.

F. PROCEDURES FOR CHILD/YOUTH SUPERVISION BASED ON THE NEEDS OF CHILDREN/YOUTH, INCLUDING THE NEED FOR INFORMED SUPERVISION OF CHILDREN/YOUTH WITH SEXUALIZED BEHAVIORS.

G. THE DEVELOPMENT, COMPONENTS, AND IMPLEMENTATION OF THE INDIVIDUAL CHILD'S/YOUTH'S PLAN OF CARE.

H. THE AGENCY'S PROGRAM TO ADDRESS COMPLEX TRAUMA AND THE BEHAVIOR INTERACTION STRATEGIES USED WITHIN THIS PROGRAM.

I. CONFIDENTIALITY AS IT RELATES TO THE HEALTH INSURANCE PORTABILITY AND ACCOUNTABILITY ACT OF 1996 (HIPAA), AS INCORPORATED BY REFERENCE IN SECTION 7.701.14, AND THE FAMILY EDUCATIONAL RIGHTS AND PRIVACY ACT (FERPA) OF 1974, AS INCORPORATED BY REFERENCE IN SECTION 7.701.14.

J. A REVIEW OF THE SIGNS OF CHILD ABUSE AND NEGLECT AND OF THE STAFF MEMBERS RESPONSIBILITIES AS A MANDATED REPORTER TO REPORT ALL SUSPICION OF CHILD ABUSE AND NEGLECT IMMEDIATELY TO THE COLORADO CHILD ABUSE AND NEGLECT HOTLINE.

~~6~~K. Annual review of these regulations by LICENSE TYPE FOR all ~~appropriate~~ staff members EMPLOYED BY ~~of~~ the facility.

L. HOW TO RECOGNIZE WHEN CHILDREN/YOUTH HAVE POTENTIALLY BEEN VICTIMS OF LABOR OR SEX TRAFFICKING AND REPORTING SUCH TO THE COLORADO CHILD ABUSE AND NEGLECT HOTLINE.

2. EVERY SIX (6) MONTHS AND/OR TWO (2) TIMES PER TRAINING YEAR:

A~~1~~. The facility's emergency and safety procedures, including but not limited to fire evacuation drills and disaster drills, ~~on at least~~ A MINIMUM OF FOUR (4) MONTHS APART ~~a semiannual basis~~.

B. PHYSICAL RESTRAINT OF CHILDREN/YOUTH IN ACCORDANCE WITH FACILITY POLICIES AND SECTION 7.714.534.A.1, INCLUDING THE ABILITY TO RECOGNIZE AND RESPOND TO SIGNS OF PHYSICAL DISTRESS IN CHILDREN/YOUTH WHO ARE SUBJECT TO A PHYSICAL RESTRAINT AS REQUIRED IN SECTIONS 7.714.53 THROUGH 7.714.536 FOR THOSE STAFF AUTHORIZED TO PERFORM PHYSICAL RESTRAINT.

~~7~~C. 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 IN SECTION 7.714.92.B. FACILITIES SERVING CHILDREN/YOUTH FUNDED BY THE CHILDREN'S HABILITATION RESIDENTIAL PROGRAM (CHRP) MUST COMPLETE THIRTY-TWO (32) HOURS OF ONGOING TRAINING SPECIFIC TO THE SPECIALIZED NEEDS OF THE CHILDREN/YOUTH IN CARE. TRAINING SUCH AS THE INTRODUCTORY TRAINING, FIRST AID/CPR/AED, DEESCALATION, PHYSICAL RESTRAINT TRAINING AND RESTRAINT REFRESHER TRAININGS, MEDICATION ADMINISTRATION TRAINING, COMPLEX TRAUMA, HIPAA, FERPA, CHILD ABUSE AND NEGLECT, INDIVIDUAL CHILD'S/YOUTH'S PLAN OF CARE AND INFORMED SUPERVISION REQUIRED AS A PART OF THE STAFF MEMBERS JOB MUST NOT BE INCLUDED IN THE NUMBER OF HOURS TOWARD ANNUAL ONGOING TRAINING.

~~8~~D. ~~Individuals that are qualified by education, training, and experience must provide staff training.~~ INDIVIDUALS PROVIDING TRAINING FOR STAFF MUST BE QUALIFIED BY EDUCATION, CERTIFICATION, TRAINING, AND/OR EXPERIENCE.

~~9~~E. ~~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.~~

~~10~~F. The facility must document in the staff personnel record that the training and demonstration of competency were successfully completed. Documentation must include THE NAME AND DESCRIPTION OF THE TRAINING, THE NAME OF THE TRAINER, THE QUALIFICATIONS OF THE TRAINER, the date training was completed, THE NUMBER OF HOURS THE TRAINING LASTED, 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. 1/1/12]~~

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 and/or counsel for youth, 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, including the Individualized Educational Plan (IEP) where applicable, and reports of school work, including scholastic performance, certificates of achievement or award, and extracurricular interests.~~

9. The Individual Child's Plan (ICP) and Family ServiceS Plan (FSP) when developed or Individualized Treatment Plan (ITP) for committed youth, a summary of the periodic evaluations of the child's progress and resultant changes in the ICP, 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. Clinical Record Requirements for RCCFs Providing Mental Health Services

In addition to 7.714.932, A-C, an RCCF shall maintain current organized, legible, chronological, treatment record for each. Treatment records shall include:

1. A mental health diagnosis;

2. Copies of any CCARs pertaining to the client's current need for mental health services;

3. All plans of care and revisions for the current treatment episode;

4. Documentation of client's attendance at, participation in and outcomes of RCCF mental health services;

5. Documentation that the client and/or the legal guardian was provided a copy of the plan of care;

6. Correspondence to and from agencies and individuals involved in the client's treatment;

7. An explanation whenever any member of the multidisciplinary team, client, parent or guardian, does not sign the plan of care;

8. The name of the licensed mental health professional responsible for the formulation, implementation, review and revision of the client's plan of care;

9. Signed releases of information when necessary;

10. Documentation of any unplanned discharges without advance notice and any discharges against the agency's or licensed mental health professional's advice;

11. Treatment entries that are signed and dated by the person providing treatment/therapy, including title or position of the person providing the treatment/ therapy. If the clinical services are provided by a provisionally licensed therapist, the supervisor must also sign the entries;

12. All changes in diagnoses need to be documented with changes to the CCAR;

13. All members of the clinical staff shall be trained annually in the development and review of plans of care, and there must be documentation of such;

14. Clinical supervisors who are providing supervision to provisionally licensed therapists (P-LCWS, P-LPC, P-LMFT, psychologist) must document supervision hours provided to supervisees.

E. 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. 6/1/12]

A. The facility shall immediately notify the child's legal custodian, 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 legal custodian, and/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, behavior management, physical management, restraint and seclusion, and restriction of rights.