

PROGRAM POLICY - ICF/DD-H

General

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1 Administrative Policies/Procedures

- 1.1 It is the intent of the OPTIONS Board of Directors, management and staff to comply with all rules and regulations as set forth in the Federal Intermediate Care Facilities/Intellectual Disabilities - Habilitation (ICF/ID-H) conditions of participation, the State of California Department of Public Health Services regulations, the Department of Developmental Services requirements, laws of the State of California, local laws, and such other rules as may be applicable to the proper and safe functioning of OPTIONS ICF/ID-H facilities.
- 1.2 ICF/ID-H policies and procedures will be revised by the OPTIONS Steering Committee and/or its designees as necessary to remain current with regulatory and legal changes.

2 Licensing Visit Reports

- 2.1 The most recent California Department of Public Health Licensing visit report, with all related follow-up plans of correction, will be posted in a prominent location at each ICF/ID-H.
- 2.2 The ICF/ID-H will retain a copy of the licensing reports for administrative use and will document all follow-up action taken to correct any noted deficiencies.
- 2.3 The licensee will file with the California Department of Public Health Licensing the address of the licensee to whom all citations and notices concerning Class "A" and Class "B" violations will be mailed by the Department. The licensee will designate one or more persons authorized to accept on the licensee's behalf any citation served by any representative of the Department.

3 Non-Discrimination Policies

- 3.1 Admission, treatment or discharge of persons served will not be made on the basis of any protected class including: race, religion, color, national origin or ancestry, physical or mental disability, medical condition, genetic information, gender, sexual orientation, marital status, registered domestic partner status, veteran status, current or prospective service in the uniformed services, age or any other protected class.

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- 3.2 The person's needs will be considered and no person will be admitted for whom it is not believed services can be provided.
 - 3.3 If a language or communication barrier exists between ICF/ID-H staff and any person served, arrangements will be made for the use of an interpreter or other resource to ensure effective communication between the person served and ICF/ID-H personnel.
- 4 Reporting of Communicable Disease Outbreaks and Unusual Incidents
- 4.1 See Policy No. 200.2.4
 - 4.2 Unusual/Occurrences/Incidents
 - 4.2.1 See Policy No. 200.5.1
 - 4.3 Accident Reports
 - 4.3.1 The Safety Committee, chaired by the Program Director or assigned designee, will review all injury and accident reports on a monthly basis. Recommendations for correcting the conditions causing the accident will be discussed and implemented.
- 5 Use of Outside Resources
- 5.1 See Policy No. 200.1.4
- 6 Licenses
- 6.1 See Policy No. 200.1.2
- 7 Identification of persons served
- 7.1 Each person served, with consent, will be positively identified by a photograph kept in their record file. Photographs will be reviewed on an annual basis and updated as needed to ensure the person's photo remains current for identification purposes.
 - 7.2 An Emergency Contact Information sheet will be kept in the file of the person served and will be updated on an annual basis and as needed.
- 8 Notification of Governmental Agencies

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- 8.1 OPTIONS' Chief Executive Officer will notify the California Department of Public Health Services Licensing and Certification in writing within ten days of any of the following occurrences:
- 8.1.1 Change in ownership, including stock holdings of 10% or more in the corporation.
 - 8.1.2 Any decrease in licensed bed capacity of a OPTIONS ICF/ID-H.
 - 8.1.3 Change in the principal officer (Chief Executive Officer) of the corporation.
 - 8.1.4 Change in address of the corporate offices.
 - 8.1.5 Change in QIDP of an ICF/ID-H.
 - 8.1.6 Change of name and/or licensee of the ICF/ID-H to whom all citations and notices can be sent concerning any "Class A" or "Class B" violations.
 - 8.1.7 Change in name, title and address of any person authorized to accept on the licensee's behalf any citations served by representatives of the California Department of Public Health.
- 8.2 OPTIONS' Chief Executive Officer (CEO) will telephone the California Department of Public Health immediately if there exists an intent to disrupt or discontinue services; upon the threat of a walkout of a significant number of employees; earthquake, fire or other damage to the ICF/ID-H which threatens the safety or welfare of the persons served.
- 8.3 If an OPTIONS ICF/ID-H ceases operation, the California Department of Public Health will be informed by the licensee within three (3) business days of cessation of operations of the arrangements made for the safe preservation of person records.
- 8.4 If any records of a person served are defaced or destroyed before termination of the required retention period, the California Department of Public Health will be notified in writing of the damage or destruction within three (3) business days of its occurrence. Notification will include an evaluation of the cause of the damage or destruction and a plan of correction to prevent recurrence.
- 8.5 If the ownership of any OPTIONS ICF/ID-H changes, both the licensee and the applicant for the new license will, prior to the change of ownership, provide the California Department of Public Health with the

following written documentation:

- 8.5.1 Statement of assurance that the new licensee will have custody of the records of the persons served and that the records or copies thereof will be available to the former licensee, the new licensee and any other authorized persons; or
 - 8.5.2 Statement of assurance that other arrangements have been made by the licensee for the safe preservation of the records of person served, the location of such records, and their availability to the former licensee, the new licensee and any other authorized persons; or
 - 8.5.3 Reason the records of the person served are not available.
- 8.6 If the ownership of any OPTIONS ICF/ID-H changes, the licensee and the applicant for the new license will, prior to the change of ownership, notify the California Department of Public Health of the following information regarding the records of persons served:
- 8.6.1 Provisions for access to the records of persons served.
 - 8.6.2 Address of ICF/ID-H or location of storage facility used to store the records of persons served.
 - 8.6.3 Description of security precautions.
 - 8.6.4 Names and phone numbers of individuals responsible for access to and security of the aforementioned records.
- 8.7 The California Department of Public Health will be notified in writing by the licensee of any construction, remodeling or alterations to the ICF/ID-H. Notification will be made within five days of the commencement of the project.
- 9 Display of Licenses, Permits and Guiding Principles
- 9.1 All required licenses and permits will be displayed in locations that do not interfere with normalization. Inspection reports by governmental agencies will be kept on file at each ICF/ID-H location. Any actions taken to comply with recommendations will be noted and retained in these files.
 - 9.2 The most recent survey report, non-discrimination poster, and non-profit

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statement will be posted at each ICF/ID-H location.

- 9.3 Rights and Responsibilities of persons served will be posted at each ICF/ID-H location and reviewed annually with persons served in each ICF/ID-H.
 - 9.4 OPTIONS' Human Resources Director will verify the validity of the license of all Registered Nurses employed by OPTIONS.
 - 9.5 OPTIONS' Chief Executive Officer will either verify or assure verification of all other licenses.
 - 9.6 OPTIONS' Board of Directors is responsible for the verification of the Chief Executive Officer's (CEO's) credentials.
- 10 Absence of Chief Executive Officer
- 10.1 If OPTIONS' Chief Executive Officer is absent for more than 45 consecutive days, the licensee will appoint another licensed administrator to carry out the responsibilities of ICF/ID-H facilities operated by OPTIONS.
 - 10.2 The QIDP will be in charge of case management for all persons served in OPTIONS ICF/ID-H facilities.
 - 10.3 Each ICF/ID-H will have a Program Supervisor who is knowledgeable in the policies and procedures of the licensee and will be responsible for the operation of the ICF/ID-H.
 - 10.4 The California Department of Public Health will be notified in writing of any extended absence of the CEO or QIDP exceeding 45 consecutive days. OPTIONS Program Director or designee will be responsible for case management and/or ICF/ID-H operation in the temporary absence of the QIDP.
 - 10.5 All the duties, responsibilities and acceptance of Licensing and Review agency reports and citations are vested in the person designated to act on behalf of the licensee.
 - 10.5.1 The QIDP will be designated to accept on the licensee's behalf any "Class A" or "Class B" citations served by any representative of the California Department of Health.

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10.5.2 The QIDP may accept any Licensing Review Reports or other review agency reports on the licensee's behalf.

11 Review of Incident and Accident Reports

11.1 The QIDP will review employee and person incident/accident reports to determine the existence of any health or safety hazards and will take corrective action as deemed necessary for the best interests of persons served in the ICF/ID-H and employees.

12 Notification of Physician

12.1 The attending physician of a person served will be notified promptly of any of the following:

12.1.1 Admission of a person to the ICF/ID-H.

12.1.2 Any sudden and/or marked adverse change in signs, symptoms, or behavior exhibited by a person.

12.1.3 Any unusual occurrence involving epidemic outbreaks, poisonings, fires, major accidents, deaths from unusual causes or other catastrophes, or any other unusual occurrence that threatens the welfare, safety and health of a person.

12.1.4 Any significant change in a person's weight within a 30 day period, unless anticipated in physician's notes or orders.

12.1.5 Any negative response or reaction by a person served to a medication or treatment.

12.1.6 Any error in the administration of a medication or treatment to a person.

12.1.7 Inability to obtain or administer drugs, equipment, supplies or services as prescribed on a prompt and timely basis.

12.2 Any and all attempts to notify an attending physician, whether successful or not, of any of the above occurrences will be recorded. Notes will include the following information:

12.2.1 Date, time and method of notification or attempted notification.

12.2.2 Name of person contacted at physician's office.

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13 Guardianship Responsibility

13.1 No licensee, owner, administrator, employee or representative thereof will act as guardian or conservator of any person served or their estate.

14 Communicable Disease

14.1 See Policy No. 200.2.4

15 Person Served Brokerage

15.1 Per California Health and Safety Code Section 445

15.1.1 "No person, firm, partnership, association or corporation, agent or employee thereof will refer or recommend a person for a fee to a physician, hospital, or health-related facility for any form of medical care or treatment. If a fee is charged it is assumed the recommendation was for profit."

15.1.2 "A physician, hospital, health-related facility or dispensary will not enter into a contract or other agreement, to accept for medical care or treatment, any person referred or recommended for such care or treatment by a medical referral service business located in or doing business in another state if the medical referral service business would be prohibited under this part if the business were located or doing business in this state."

15.2 The ICF/ID-H will abide by the laws governing brokerage and will have no part of fee for referrals.

16 The following information will be available at all times in an area that is easily accessible to ICF/ID-H staff:

16.1 Emergency phone numbers including: medical emergency, OPTIONS staff support, police, fire, ambulance, and third party representatives.

16.2 OPTIONS' Emergency Plan

16.3 Procedure for contacting on-call personnel and RN

16.4 Facility Evacuation Plan

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