

July 24, 1995

Community Development Department
250 No. 5th. Street
Grand Junction, Colorado 81501

Attn: Ms. Kathy Portner

Dear Ms. Portner:

Recently, I purchased a home at 261 Hall in Grand Junction. It is my desire to obtain a License as a Personal Care Boarding Home and be Certified for the HCBS Program. Over the past twenty three years I have been involved in long-Term Care. Because of my background, I feel I could be an asset to the Community by caring for people with certain disabilities, and by keeping them in a home environment, rather than in a nursing home.

The type of people I am presently considering are two chronically mentally ill, who present no acute symptoms and a 95 year old partially blind lady. None of these persons are capable of living alone.

I am enclosing a Resume for your perusal. My last five months of employment are not on this Resume. I took an interim position at Glen Valley with Pinon Management last December, and am presently working in Lakewood.

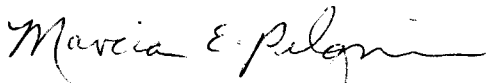
I would greatly appreciate any assistance you can give me in approving re-zoning for the above specified purposes. I have also had conversations with Mr. Howard of Colorado West Mental Health and he indicated he would like to work with me on placements to keep residents out of the nursing homes, and in the Community whenever possible.

If you have further questions please feel free to call me at my home number 303-940-6539. The home on hall meets the State requirements for board and care and the Fire Marshall has only one request to certify it for Safety Purposes.

I would be happy to furnish any kind of references if desired. My daughter, Lori Hanes, will be in touch with you again or you may call or write me at the above p.o. box.

Thank you for your consideration.

Yours truly,



Marcia E. Pilgrim
Enclosures

P.O. Box 14065
Lakewood

RECEIVED GRAND JUNCTION
PLANNING DEPARTMENT

JUL 25 1995

PRESENTATION OF QUALIFICATIONS

MARCIA PILGRIM

~~1460 Pierce St #102~~
~~Lakewood, Co-80214~~
~~(303) 232-4028~~

MARCIA PILGRIM

PROFESSIONAL OBJECTIVE

To secure a position in administration within the health care field in which my experience, personal abilities and commitment to excellence will be effectively utilized.

PROFESSIONAL EXPERIENCE

1991 - ~~Present~~ ^{Dec 1994} MAPLETON MANOR
115 Ingalls St.
Lakewood, CO 80226

- * Administrator of this 115 bed Medicare/Medicaid licensed nursing facility.
- * Responsible for P&L, fiscal management.
- * Implemented Hospice contract.
- * Responsibilities included resident care, QA, OBRA regulations and the survey process. Survey improved over the three years of tenure.
- * Implemented community council.

1982 - 1991 GENEVA HEALTH SERVICES
Julia Temple Center
Englewood, Colorado
Administrator

- * Provide excellent care and have deep interest for the confused person; assist in developing programming and staff education for the special needs of the confused patient. Successfully work with both the assisted living and long term care patient. Acquired extensive experience in general long term care nursing and administration.
- * Administer and supervise all aspects of operations and execute proven policies, procedures and philosophies pertinent to successful patient care within all departments
- * Effectively and efficiently work with other health care facilities for exchange of information and services, and work with community agencies to develop the program of the facility.

1978 - 1982 GENEVA HEALTH SERVICES
Arvada Health Center
Arvada, Colorado
Administrator

- * Similar responsibilities to position held with Mapleton Manor.

1976 - 1978 A.R.A LIVING CENTERS
Greeley, Colorado
Nursing Consultant/Administrator

1974 - 1976 A.R.A. LIVING CENTERS
Alpine Manor, Thornton, Colorado
Director of Nursing

EDUCATION

Licensed - Registered Nurse
1972 #46965

Licensed - Colorado Nursing Home Administrator
1974 #422

American Medical Records Association
Independent Study program for Accredited Record technician
(A.R.T.), Complete Fall 1990
Certification # 32283

Bachelor of Science - Health Arts
College of St. Francis
Off- Campus Continuing Education Program
Denver, Colorado, 1984

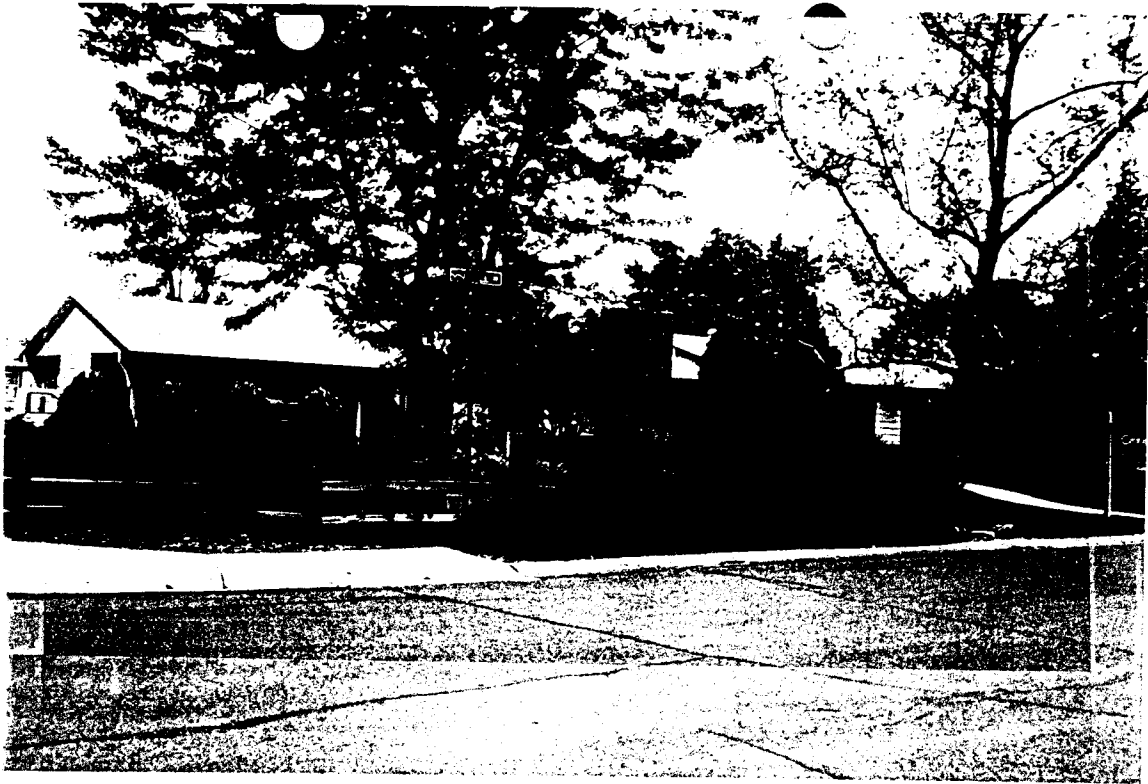
Associate of Applied Science - Nursing
Mesa College
Grand Junction, Colorado, 1972

PERSONAL DATA

Interests: Music, reading, outdoors

REFERENCES

Available upon request



QUALITY & CHARM

261 HALL - \$105,000

SPECIAL FEATURES

- * 1877 Sq. ft.,*
- * 3 Bedrooms, 1 3/4 Baths*
- * Large Spacious Rooms - Great for Entertaining*
- * Fireplace in Family Room - 2 Carport and 8 X 24 Wood Storage unit.*
- *Great Location - Walk in Sherwood Park
Schools and shopping nearby*
- *Large Patio - Lovely Landscaped Yard*
- *Rancher on a corner lot. Extra Parking*

***FOR THE CUSTOMER WHO WANTS A WELL
MAINTAINED HOME.***

Maxine Ross, Realtor

CENTURY 21 OLDHOMESTEAD REALTY

(970)241-3922 Home (970)243-5100 Office

COMMUNITY DEVELOPMENT DEPARTMENT
250 NO. 5TH. STREET
GRAND JUNCTION, COLORADO 81501

AUGUST 23, 1995

DEAR MS. PORTNER:

MY DAUGHTER, LORI HANES, TOLD ME I NEEDED TO SEND
A FOLLOW-UP REQUEST REGARDING WHAT LICENSURE I AM
SEEKING FOR MY HOME AT 261 HALL AV. GRAND JUNCTION.
I WOULD LIKE TO MAKE THIS A PERSONAL CARE BOARDING
HOME, WHICH FALLS UNDER CHAPTER VII. I WILL BE MOVING
THERE SEPTEMBER 14, 1995 AND NEED TO ESTABLISH MY
HOME, SO WOULD BE MOST APPRECIATIVE OF ANY HELP
WITH MY REQUEST.

SINCERELY,

Marcia E. Pilgrim

MARCIA E. PILGRIM

I WILL BE STAYING WITH MY COUSIN, GAYLE HANNA, AT (303)
696-6376 AS OF SUNDAY 27TH. OF AUGUST, OR I MAY
BE REACHED AT MY OFFICE 232-4405.

Also -
Would like license for HCBS

my work is 303-232-4405

CAMBRIDGE CARE CENTER
1685 EATON STREET
LAKEWOOD, CO 80214

232-4405
FAX NO. 232-0805

DATE: 8/28/95

TIME: _____

SEND TO: Kathy Portner

LOCATION: G.J.

FAX NUMBER: _____

NUMBER OF PAGES INCLUDING COVER SHEET 2

FROM: Marcia Pilgrim

LOCATIONS: _____

COMMENTS: I am sending per phone
call with my daughter, Loretta Harris.

Thanks

PLEASE CONTACT THE ABOVE IF PROBLEMS WITH TRANSMITTAL.

September 1, 1995

Community Development Department
250 No. 5th. Street
Grand Junction, Colorado 81501

Attn: Ms. Kathy Portner

Dear Ms. Portner:

My daughter, Lori Hanes, asked me to fax the information regarding the License I am seeking for my new home in Grand Junction. Because Chapter VII of the Colorado Department of Health Regulations is so large, and due to the Holiday, I decided to mail this to you today.

The residents I wish to place in my home would not be in wheelchairs; nor would they require any skilled services. I would like to provide basic care and activities.

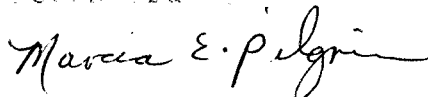
I believe I mailed you the specifications on my home at 261 Hall Ave. It is a large, ranch-style home and the bedrooms actually are large enough to meet a two-resident placement need. However, I wish to provide services to no more than 5 residents; and, more likely, four.

I did have the Fire Marshall out over a month ago and he wanted to me to provide a window in each bedroom that would "crank" open for escape. Otherwise, he seemed all right with the rest of the home, depending, of course, on the needs of the individual people.

I will be forwarding a form, which is required by the Health Department before I can even request Licensure. This form needs to be signed by Zoning, The City and the Fire Department. I do not remember his name, but a man from the City was out at the same time the Fire Marshall was.

Please contact me for further information, or clarification at work 303-232-4405 or where I am staying 303-696-6376

Yours truly,



Marcia E. Pilgrim

Enclosure



Grand Junction Community Development Department
Planning • Zoning • Code Enforcement
250 North Fifth Street
Grand Junction, Colorado 81501-2668
(970) 244-1430 FAX (970) 244-1599

October 4, 1995

Marcia Pilgrim
261 Hall Avenue
Grand Junction, CO 81501

RE: Group Home

Dear Ms. Pilgrim:

This is to confirm that the property located at 261 Hall Avenue is zoned RSF-5. This zoning, under the current Zoning and Development Code, allows group homes licensed with the State of Colorado as Personal Care Boarding Homes. This approval is for a maximum of 5 residents in addition to the operators of the facility.

If there are any modifications to the home that require a Building Permit, a Planning Clearance from Community Development will be required. The outside appearance of the home must continue to be that of a single family residence.

If you have questions please call me at 244-1446.

Sincerely,

A handwritten signature in cursive script that reads "Katherine M. Portner".

Katherine M. Portner
Planning Supervisor

CHAPTER VII
PERSONAL CARE BOARDING HOME

CHAPTER VII
RESIDENTIAL CARE FACILITIES

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CHAPTER VII
RESIDENTIAL CARE FACILITIES

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**CHAPTER VII
RESIDENTIAL CARE FACILITIES**

CORE REGULATIONS

1.1 Authority to establish minimum standards through regulation and to administer and enforce such regulations is provided by section 25-1-107, et seq., C.R.S.

2.1 Definitions: For purposes of this part, the following definitions shall apply unless the context requires otherwise:

(a) "Activities of daily living" include but are not limited to the following:

Assisting resident or providing reminders for the following:

bathing, shaving, dental hygiene, caring for hair;
dressing;
eating;
getting in or out of bed;

Making available, either directly or indirectly through the provider agreement, at least the following:

meals;
laundry;
cleaning of all common areas, bedrooms, and bathrooms;
managing money, as necessary and by agreement;
making telephone calls;
arranging appointments and schedules;
shopping;
writing letters;
recreational and leisure activities.

(b) "Administration of medication" means assisting a resident in the use of medication in accordance with state law"

(c) "Auxiliary aid" means any device used by persons to overcome a physical disability and includes but is not limited to a wheelchair, walker or orthopedic appliance.

(d) "Board and care plan" means a written description in lay terminology of the functional capabilities of an individual, the individual's need for personal assistance, and the services to be provided by the facility in order to meet the individual's needs and may also mean a service plan for those facilities which are licensed to provide services specifically for the mentally ill;

(e) "Department" means the Colorado Department of Health or its designee;

(f) "Facility" means any of the following:

(1) A personal care boarding home which is a residential facility that makes available to three or more adults not related to the owner of such facility, either directly or indirectly through a provider agreement, room and board and personal services, protective oversight, and social care due to impaired capacity to live independently, but not to the extent that regular twenty-four hour medical or nursing care is required. The term "personal care boarding home" does not include a facility holding a current certificate of authority to operate as a life care facility issued pursuant to section 12-13-101, C.R.S. nor any facility licensed in this state pursuant to section 25-1-107 (1) (1), C.R.S. as a residential care facility for the developmentally disabled.

(2) A residential treatment facility for the mentally ill which is a personal care boarding home operated and maintained for no more than sixteen (16) mentally ill individuals who are not related to the licensee and do not require regular medical or continuous nursing care but who, because of current disability, are unable to live independently and who require a protective home environment, personal services, activities, social care, and treatment commensurate to the individuals' psychiatric needs which has received program approval from the Department of Institutions.

(g) "Individualized social supervision" means social care, as defined below.

(h) "Licensee" means the person of entity to whom a license is issued by the department pursuant to 25-1-107 (1) (1) (I), C.R.S. to operate a facility within the definition herein provided.

(i) "Medical or nursing care" means care provided under the direction of a physician and maintained by on-site nursing personnel.

(j) "Monitoring" with respect to medications means involvement with a resident's use of medication in accordance with state law.

(k) "Operator" means any person who has responsibility for the daily administration or operation of a facility and may also mean "administrator" as that term is used in 25-27-104(2)(g), C.R.S.

(l) "Personal services" means those services which the operator and employees of a personal care boarding home provide for each resident, including, but not limited to: An environment which is sanitary and safe from physical harm; individualized social supervision; assistance with transportation whether by providing transportation or assisting in making arrangements for the resident to obtain transportation; and assistance with activities of daily living, as herein defined.

(m) "Protective oversight" means guidance of a resident as required by the needs of the resident or as reasonably requested by the resident including the following: Being aware of a resident's general whereabouts, although the resident may travel independently in the community; monitoring the activities of the resident while on the premises to ensure the health, safety, and well-being of the resident, including monitoring of prescribed medications; reminding the resident to carry out activities of daily living; and reminding the resident of any important activities, including appointments.

(n) "Restraints" means any physical or chemical device, application of force, or medication which is designed or used for the purpose of modifying, altering or controlling behavior and excludes medication prescribed by a physician as part of an ongoing treatment plan or pursuant to a diagnosis. A secured environment that meets the requirements of section 20 of these regulations shall not be considered a restraint.

(o) "Social care" means the organization, planning, coordination, and conducting of a resident's activity program in conjunction with the resident's board and care plan.

LICENSURE

- 3.1 All facilities shall be licensed in accordance with 25-1-107(1)(1)(I), 25-27-105, C.R.S., 6 CCR 1011-1, Chapter II, as modified herein, and these regulations.
- 3.1.1 The general requirements set forth below shall be met, at a minimum, by all facilities defined herein. It shall be the responsibility of the facility requesting licensure or renewal to understand and meet any additional requirements imposed by the state for a particular type of facility for which license is sought.
- 3.1.2 The declaration required in Section 2.3.5 (4), Chapter II of 6 CCR 1011-1, shall also include any action related to the treatment of residents or the handling of their property.
- 3.2.1 All penalties collected by the department pursuant to this regulation shall be credited to the personal care boarding home cash fund created pursuant to 25-17-107.5, C.R.S. Enforcement and collection of the penalty shall occur following the decision reached in accordance with procedures set forth in 24-4-105, C.R.S.
- 3.3 As part of an original and each renewal application for a license, an owner, applicant, or licensee shall request from a criminal justice agency designated by the department, criminal history record information regarding such owner, applicant or licensee. The information, upon such request and subject to any restrictions imposed by such agency, shall be forwarded by the criminal justice agency directly to the department.
- 3.3.1 The information shall be used by the department in ascertaining whether the person applying for licensure has been convicted of a felony of misdemeanor involves conduct that the department determines could pose a risk to the health, safety, and welfare of residents of the personal care boarding home. Information obtained in accordance with this section shall be maintained by the department.
- 3.3.2 All costs of obtaining a criminal history record from a criminal justice agency pursuant to this requirement shall be borne by the individual who is the subject of the criminal history record.

- 3.3.3 No license shall be issued or renewed by the department if the owner, applicant, or licensee of the personal care boarding home has been convicted of a felony or of a misdemeanor, which felony or misdemeanor involves moral turpitude, as defined by law, or involves conduct that the department determines could pose a risk to the health, safety, and welfare of residents of the personal care boarding home.
- 3.4 The department shall issue or renew a license when it is satisfied that the applicant or licensee is in compliance with the requirements set out in these regulations. Such license issued or renewed pursuant to this section shall expire one year from the date of issuance or renewal.
- 3.5 The department may issue a provisional license to an applicant for the purpose of operating a personal care boarding home for a period of ninety days if the applicant is temporarily unable to conform to all the minimum standards required under these regulations, except no license shall be issued to an applicant if the operation of the applicant's facility will adversely affect the health, safety, and welfare of the residents of such facility.
- 3.5.1 As a condition of obtaining a provisional license, the applicant shall show proof to the department that attempts are being made to conform and comply with applicable standards. No provisional license shall be granted prior to the submission of a criminal background check in accordance with 25-27-105(2.5), C.R.S.
- 3.5.2 A provisional license shall not be renewed.
- 3.6 When an application for an original license has been denied by the department, the department shall notify the applicant in writing of the denial by mailing a notice to the applicant at the address shown on the application. Any applicant aggrieved by such a denial may pursue the remedy for review provided in article 4 of title 24, C.R.S., by petitioning the department, within thirty days after receiving such notice.
- 3.7 The department may suspend, revoke, or refuse to renew the license of any facility which is out of compliance with the requirements of these regulations in conformance with the provisions and procedures specified in article 4 of title 24, C.R.S.
- 3.8 A facility shall permit access during reasonable hours to the premises and residents by the State Ombudsman and the designated local long-term care ombudsman in

accordance with the federal "Older Americans Acts of 1965", pursuant to section 25-27-104 (2) (d), C.R.S.

LOCAL COMPLIANCE

- 4.1 Facilities shall be in compliance with all applicable local zoning, housing, fire and sanitary codes and ordinances of the city, city and county, or county where the facility is situated to the extent that such codes are consistent with the federal "Fair Housing Amendment Act of 1988", as amended, 42 U.S.C., sec. 3601, et seq.
- 4.2 The plumbing shall be in compliance with state and local laws and regulations and maintained in good repair, free of the possibility of backflow and backsiphonage, through the use of vacuum breakers and fixed air gaps, in accordance with state and local codes.
- 4.3 Sewage shall be discharged into a public sewer system or disposed of in a manner approved by the local health department, or local laws if no local health department exists, and the Colorado Water Quality Control Commission.

QUALIFICATIONS

- 5.1 The operator shall be at least 18 years of age.
- 5.2 The operator and staff, including volunteers, shall be free of communicable disease. All staff shall be required to have a tuberculin skin test as a condition of employment or prior to commencement of volunteer service. In the event of a positive reaction to the skin test, evidence of a chest x-ray and other appropriate follow-up shall be required.
- 5.3 The operator, staff, and any volunteer who has direct personal contact with the residents of a facility shall be of good, moral, and responsible character. In making such a determination, the owner or licensee of a facility may have access to and shall obtain any criminal history record information from a criminal agency, subject to any restrictions imposed by such agency, for any person responsible for the care and welfare of residents of such facility.
 - 5.3.1 Any person who is physically or mentally unable to adequately and safely perform their duties or, as a result of alcohol or substance abuse has that ability impaired, may not be approved as a licensee or employed as an employee.

- 5.4 The operator shall employ sufficient staff to ensure the provision of services necessary to meet the needs of the residents.
- 5.4.1 Each facility shall ensure that at least one staff member is present in the facility whenever a resident who meets any one of the following criteria is present:
- (1) the resident requires assistance with activities of daily living, as herein defined;
 - (2) the resident requires on-going supervision; or
 - (3) the resident requires assistance with administration of medications.
- 5.5 Residents who provide services for the facility on a regular basis or on an exchange or fee-for-service basis may not be included in the facility's staffing plan in lieu of facility employees except for trained, tested, and supervised residents in those facilities which are licensed to provide services specifically for the mentally ill.
- 5.5.1 Residents may participate voluntarily in performing housekeeping duties and other tasks suited to the resident's needs and abilities.
- 5.6 Volunteers may be utilized in the facility but may not be included in the facility's staffing plan in lieu of facility employees.

TRAINING

- 6.1 All staff, including volunteers, shall be given on-the-job training or have related experience in the job assigned to them and shall be supervised until they have completed on-the-job training appropriate to their duties and responsibilities or had previous related experience evaluated. Such on-the-job training or evaluation of previous related experience shall be documented in the staff member's permanent personnel file.
- 6.2 All staff, including volunteers, shall have sufficient skill, and ability to perform their respective duties, services, and functions.
- 6.3 All staff, including volunteers, shall have access to the facility's policies, procedure manuals, and other information necessary to perform their duties and to carry out their responsibilities.

6.4 The operator and staff, excluding volunteers, shall meet the minimum educational, training, and experience standards established herein.

6.5.1 Any person commencing service as an operator after the effective date of these regulations may meet the minimum education, training, and experience requirements in one of the following ways:

(A) successful completion of a program approved by the department pursuant to 6.5.3 below; or

(B) previous job related experience equivalent to successful completion of such program.

6.5.2 Any person already serving as an operator on the effective date of these regulations may meet the minimum education, training, and experience requirements in one of the following ways:

(A) successful completion of a program approved by the department, pursuant to 6.5.3 below, if completed within a period of eighteen (18) months following the effective date of these regulations;

(B) submission of evidence of successful completion of such a program within the five (5) years immediately prior to the effective date of these regulations; or

(C) previous job related experience equivalent to successful completion of such a program.

6.5.3 A program of certification shall be approved by the department if all of the following requirements are met:

(A) The program is conducted by:

(1) an accredited college, university, or vocational school, or

(2) is a program, seminar, or in-service training sponsored by an organization, association, corporation, group, or agency with specific expertise in that area; and

(B) the curriculum includes at least 30 actual clock hours of which at least fifteen (15) are comprised of a discussion of each the following topics:

resident rights;

environment and fire safety, including emergency procedures and first-aid,

assessment skills,

identifying and dealing with difficult situations and behaviors, and

nutrition; and

(C) the remaining fifteen (15) hours shall provide emphasis on meeting the personal, social and emotional care needs of the resident population served, for example, the elderly, Alzheimers, chronically mentally ill.

6.6 Staff members not serving as operator who have direct responsibility for the provision of personal care, i.e. hygiene, of residents or for the supervision or training of residents in the resident's own personal care, shall provide documentation of either successful completion of course work in the provision of personal care or previous and related job experience in providing personal care to residents.

6.7 The facility shall provide adequate training and supervision for staff comprised of a discussion of each the following topics: resident rights; environment and fire safety, including emergency procedures and first aid; assessment skills; and identifying and dealing with difficult situations and behaviors.

ADMISSIONS

7.1 Only residents whose needs can be met by the facility within its licensure category shall be admitted. A facility may not admit or keep any resident requiring a level of care or type of service which the facility does not provide or is unable to provide, but in no event may admit or keep a resident who:

(A) Is consistently, uncontrollably incontinent of bladder unless the resident or staff is capable of preventing such incontinence from becoming a health hazard. Residents with urinary catheters may be admitted if the resident is capable of maintaining and managing the catheter without the assistance of facility staff;

(B) is consistently, uncontrollably incontinent of bowel unless the resident is totally capable of self care;

(C) is totally bedfast with limited potential for improvement;

(D) needs medical or nursing services, as defined herein, on a twenty-four hour basis, except for care provided by a psychiatric nurse in those facilities which are licensed to provide services specifically for the mentally ill;

(E) needs restraints, as defined herein, of any kind except as otherwise provided in 27-10-101, et seq. C.R.S. for those facilities which are licensed to provide services specifically for the mentally ill; or

(F) has a communicable disease or infection unless the resident is receiving medical or drug treatment for the condition.

7.1.1 Restraints as defined within these regulations are prohibited except as otherwise provided in 27-10-101, et seq. C.R.S. for those facilities which are licensed to provide services specifically for the mentally ill.

7.2 The facility shall develop and implement criteria for admission and discharge based upon the identified care needs of residents which the facility is capable of meeting according to factors including but not limited to the facility's physical plant, financial resources, and availability of adequately trained staff.

7.3 A written board and care plan for each resident shall be completed at the time of admission and shall identify the resident's needs and the services which the facility will provide to meet those needs and shall include at least the following:

(A) A list of current prescribed medications including:

1) dosage, time of administration of medications, and route of administration of medication;

2) whether medication is self-administered or whether assistance, if any, is required from staff;

(B) Dietary restrictions of special instructions, if any;

(C) allergies, if any; and

(D) any physical or mental limitations, or restrictions on activity.

7.3.1 The resident may request additional services or request a modification of the board and care plan at any time.

7.3.2 The board and care plan shall be reviewed and updated at least yearly or more frequently, if necessary, to note significant changes in the resident's physical, mental, social condition or needs.

7.4 All facilities shall adopt and follow a written policy which identifies when a physician's assessment will be required. Such a policy shall include at least the following indicators:

(A) a significant change in the resident's condition;

(B) evidence of possible infection (open sores, etc.);

(C) injury or accident sustained by the resident which might cause a change in the resident's condition;

(D) known exposure of the resident to a communicable disease;

(E) development of any condition which would have initially precluded admission to the facility.

RESIDENTS RIGHTS

8.1 The facility shall adopt and follow a written policy of resident's rights. This policy shall not exclude, take precedence over, or in any way abrogate legal and constitutional rights enjoyed by all adult citizens and shall include but is not limited to the following:

(A) The right to be treated with respect and dignity.

(B) The right to privacy.

(C) The right not to be isolated or kept apart from other residents.

(D) The right not to be sexually, verbally, physically or psychologically abused, humiliated, intimidated, or punished.

(E) The right to live free from involuntary confinement, or financial exploitation and to be free from physical or chemical restraints as defined within these regulations except as otherwise provided in 27-10-101, et seq. C.R.S. for those facilities which are licensed to provide services specifically for the mentally ill.

(F) The right to full use of the facility common areas, in compliance with the documented house rules.

(G) The right to voice grievances and recommend changes in policies and services. The facility shall establish a written grievance procedure which shall be posted in a conspicuous place and there shall be posted in the resident's record that the resident has read or had such policy for handling grievances and problems explained upon admission. Such policy shall indicate that residents may contact any of the following agencies and shall provide the telephone number and address of each of the following:

- The Long Term Care Ombudsman.
- The Adult Protection Services of the appropriate county Department of Social Services.
- The Advocacy Services of the Area's Agency on Aging.
- The Colorado Department of Institutions in those cases where the facility is licensed to provide services specifically for the mentally ill.

(H) The right to communicate privately including but not limited to communicating by mail or telephone with anyone.

(I) The right to reasonable use of the telephone, in accordance with house rules, which includes access to operator assistance for placing collect telephone calls. At least one telephone accessible to residents utilizing an auxiliary aid shall be available if the facility is occupied by one or more residents utilizing such an aid.

(J) The right to have visitors, in accordance with house rules, including the right to privacy during such visits.

(K) The right to make visits outside the facility in which case the operator and the resident shall share responsibility for communicating with respect to scheduling.

(L) The right to make decisions and choices in the management of personal affairs, funds, or property in accordance with their abilities.

(M) The right to expect the cooperation of the provider in achieving the maximum degree of benefit from those services which are made available by the facility.

(N) The right to exercise choice in attending and participating in religious activities.

(O) The right to be reimbursed at an appropriate rate for work performed on the premises for the benefit of the operator, staff, or other residents, in accordance with the resident's board and care plan.

(P) The right to 30 days written notice of changes in services provided by the facility, including but not limited to changes in charges for any or all services.

(Q) the right to have advocates, including members of community organizations whose purposes include rendering assistance to the residents.

(R) The right to wear clothing of choice unless otherwise indicated in the resident's board and care plan and in accordance with reasonable house rules.

(S) The right to choose to participate in social activities, in accordance with the board and care plan.

8.2 The policy on resident's rights shall be posted in a conspicuous place, and there shall be documentation in the resident's record that the resident has read or had explained the policy on resident's rights.

8.3 In facilities with less than seventeen (17) beds, house meetings shall be held at least quarterly with residents, the operator and appropriate staff, family and friends of residents in order that residents have the opportunity to voice grievances and make recommendations concerning facility policies. Notice of such meetings shall be at least fourteen days prior to the meeting unless meetings are held on a regular basis. Written minutes of such meetings shall be maintained for review by residents at any time.

8.4 In facilities with seventeen (17) or more beds, a residents' council shall be established. Such council shall consist of at least three (3) members from the facility's residents.

- 8.4.1 The residents' council shall be elected and conducted by the residents and shall have full opportunity to meet without the presence of staff. The council shall meet at least monthly with the operator and a staff representative to make recommendations concerning facility policies, grievances, incidents, and other matters of concern to the residents. Staff shall respond to these suggestions in writing prior to the next regularly scheduled meeting. Minutes of council meetings shall be maintained and either posted or be otherwise available to residents upon request.
- 8.5 There shall be a written policy on smoking which shall apply to both residents and staff, including volunteers. Residents and staff shall be informed prior to admission or employment of any prohibitions.

HOUSE RULES

- 8.6 The facility shall establish and prominently post written house rules which shall be available at all times to residents. A copy so such rules shall be provided to the resident prior to admission. Such rules shall list all possible actions which may be taken by the facility if any rule is knowingly violated by a resident. House rules may not violate or contravene any regulation herein, of in any way discourage or hinder a resident's exercise of those rights guaranteed herein. Such rules shall include at least the following:
- (A) smoking;
 - (B) cooking;
 - (C) protection of valuables on premises;
 - (D) visitors;
 - (E) the procedure to be followed by the facility in the event of serious illness or death of a resident;
 - (F) telephone usage including frequency and duration of calls;
 - (G) use of common areas, including the use of television, radio, etc.;
 - (H) consumption of alcohol;
 - (I) dress.

- 8.7 A facility may keep household pets including dogs, cats, birds, fish, and other animals as permitted by local ordinance, with evidence of compliance with state and local vaccination and inoculation requirements and in accordance with house rules. In no event shall such rules prohibit service or guide animals.

SERVICES PROVIDED

- 9.1 The facility shall make available, either directly or indirectly through a provider agreement, at least the following: a physically safe and sanitary environment; room and board; personal services; protective oversight; and social care as those terms are defined herein. sufficient to meet the needs of the residents.
- 9.2 The facility , in consultation with the residents, shall provide opportunities for social and recreational activities both within and outside the facility and shall coordinate community resources and promote resident participation in activities both in and away from the residence.
- 9.2.1 The facility shall encourage resident participation in planning, organizing, and conducting the residents' activity program, taking into consideration the individual interests and wishes of the residents.

PROVIDER AGREEMENT

- 10.1 A written agreement shall be executed between the licensee and the resident at the time of admission. Such agreement may be executed between the licensee and the legal guardian of the resident, where proof is offered that such guardian has been duly appointed by a court of law.
- 10.2 The written agreement shall specify the understanding between the parties regarding, at a minimum the following:
- A) admission, retention, discharge, eviction, and termination policies;
 - B) charges, refunds and deposit policies;
 - C) services included in the rates and charges, including optional services for which there will be an additional, specified charge;
 - D) types of services provided by the facility, those services which are not provided, and those

which the facility will assist the resident in obtaining;

E) board and care plan outlining functional capability and needs;

F) residents' rights, grievance policies, house rules; and

G) policies and procedures utilized when the facility manages the personal funds of the resident.

H) status of the facility explaining whether or not an automatic extinguishment system, as defined herein, has been installed by the facility.

10.3.1 The agreement may be amended by the parties provided such agreement is evidenced by the written consent of both parties.

10.4 No agreement shall be construed to relieve the facility of any requirement or obligation imposed by law or regulation.

10.5 The facility shall establish and follow written policies and procedures for discharge, transfer, or eviction of residents which policy shall include at a minimum the following:

(A) That the resident shall be discharged, transferred, or evicted only for one or more of the following reasons:

1) When the facility is no longer able to meet the resident's identified needs;

2) nonpayment for basic services, in accordance with the provider agreement;

3) failure of the resident to comply with written policies or rules of the facility which contain notice that discharge, transfer, or eviction may result from violation of such policy or rule; or

4) when a resident poses a danger to self or other residents.

(B) The resident or legal guardian, where proof is offered that such guardian has been duly appointed by a court of law, shall have thirty (30) days

advance written notice of discharge except in cases of medical emergency, for the physical safety of the resident or others, or for nonpayment of rent in which case the responsible person shall be notified as soon as possible.

(C) Discharge or transfer shall be coordinated with the resident, the resident's family or legal guardian, where proof is offered that such guardian has been duly appointed by a court of law, or appropriate agency.

- 10.6.1 There shall be no requirement for the facility to handle resident funds or property; however, a resident or the legal guardian, where proof is offered that such guardian has been duly appointed by a court of law, of a resident may authorize the operator to handle the resident's personal funds or property. Such authorization shall be in writing and witnessed and shall specify the financial management services to be performed.
- 10.6.2 In the event such an agreement for financial management services is entered into, the operator shall exercise fiduciary responsibility for these funds and property, including, but not limited to, maintaining any funds over the amount of one hundred dollars (\$100) in an interest bearing account, separate from the general operating fund of the facility, which interest shall accrue to the resident.
- 10.6.3 Facilities which accept responsibility for residents' personal funds shall post a surety bond in an amount of sufficient to protect the residents' personal funds.
- 10.6.4 A running account, dated and in ink, shall be maintained of all financial transactions. There shall be at least a quarterly accounting provided to the resident or legal guardian itemizing in writing all transactions including at least the following: the date on which any money was received from or disbursed to the resident; any and all deductions for room and board and other expenses; any advancements to the resident; and the balance.
- 10.6.5 Residents shall receive a receipt for and sign to acknowledge disbursed funds.
- 10.6.6 An account shall begin with the date of the first handling of the personal funds of the resident and shall be kept on file for at least one year following termination of the resident's stay in the facility. Such record shall be available for inspection by the department.

RECORDS

11.1 A confidential record shall be maintained for each resident and shall contain at least, but not limited to the following:

(A) Resident's full name, including maiden name if applicable;

(B) Resident's sex, date of birth, marital status and social security number, where needed for medicaid or employment purposes;

(C) Date of admission;

(D) Name, address and telephone number of relatives or legal guardian, where proof is offered that such guardian has been duly appointed by a court of law, or other person to be notified in an emergency;

(E) Name, address and telephone number of resident's primary physician, or case manager if applicable, and an indication of religious preference, if any, for use in emergency;

(F) A current record of the resident's medications including name of drug, dosage, route of administration of medication and directions for administration of medication; and either documentation that the resident self-administers medication by a trained staff person or other qualified individual. If the resident refuses to take medication, as ordered, there shall be documentation that the physician has been notified.

(G) A current record of the resident's special dietary needs, allergies, special physical conditions, or other health considerations;

(H) The resident's admission agreement;

(I) Resident's most recent former address of residence;

(J) The board and care plan, as that term is defined herein;

(K) An anecdotal record of any accidents, injuries, illnesses or incidents of violent behavior towards self or others occurring after admission to the facility; and

(L) Documentation of on-going services provided or contact made by other governmental agencies.

- 11.2 Records shall be legibly recorded in ink, dated and, except in an emergency, shall be available for inspection by or release to the resident or the resident's legal guardian, where proof is offered that such guardian has been duly appointed by a court of law, the resident's attorney of record, the state or local ombudsman with the permission of the resident and in accordance with 25-1-801, C.R.S., the department, and those otherwise authorized by law.
- 11.3 Records shall be maintained and stored in such a manner as to be protected from loss, damage or unauthorized use.
- 11.4 The confidentiality of all medical, psychological and sociological information shall be protected at all times.
- 11.5 Records shall be maintained for a period of one year following the termination of the resident's stay in the facility.

MEDICATIONS

- 12.2.1 All personal medication is the property of the resident and no resident shall be required to surrender the right to possess or self-administer any personal medication described in the board and care plan, except as otherwise specified in the board and care plan of a resident of a facility which is licensed to provide services specifically for the mentally ill.
- 12.2.2 Personal medication shall be returned to the resident or legal guardian, where proof is offered that such guardian has been duly appointed by a court of law, upon transfer, discharge, or death, except that return of medication to the resident may be withheld if specified in the board and care plan of a resident of a facility which is licensed to provide services specifically for the mentally ill. The return of medication shall be documented by the facility.
- 12.2.3 Residents shall maintain and self-administer without documentation by the facility only non-prescription medications or those medications prescribed by a physician or other authorized practitioner for the sole use by the resident.
- 12.2.4 No resident shall be allowed to take another's medication.

ADMINISTRATION OF MEDICATION

- 12.3 Unless self-administered, medications, both prescription and non-prescription (over-the-counter), shall be administered only by qualified medication administration staff members and only upon the written order of a licensed physical or other authorized practitioner. Such orders must be current for all medications.
- (A) such staff has completed the medication training course given by a licensed nurse, physician, physician's assistant, or pharmacist, and approved by the department and/or shall have passed an approved department competency test for assisting with medications in accordance with 25-1-107(1)(ee)(III), C.R.S. A copy of the certificate of completion of such training shall be maintained in the staff member's personnel file at all times.
- 12.3.1 Qualified medication administration staff members may assist the resident in administration of medication providing:
- (A) such staff has completed the medication training course given by a licensed nurse, physician, physician's assistant, or pharmacist, and approved by the department and/or shall have passed an approved department competency test for assisting with medications in accordance with 25-1-107(1)(ee), C.R.S. and the regulations promulgated thereto. A copy of the certificate of completion of such training shall be maintained in the qualified medication administration staff member's file at all times.
- 12.3.2 A licensed nurse may accept telephone orders for medication from a physician or other authorized practitioner.
- 12.3.3 All telephone orders for medication received from a physician or other authorized practitioner shall be evidenced by a written and signed order within fourteen (14) days and documented in resident's record and the facility's medical records sheet.
- 12.4 Every qualified medication administration staff member who administers medications, whether prescribed or non-prescribed, shall be able to read and understand the information and directions printed or written on the label.

- 12.5 Psychotropic drugs may not be administered by unlicensed persons as a "PRN" or "as needed" medication, except those residential treatment facilities which are licensed to provide services for the mentally ill.
- 12.7.1 Prescription medications shall be labelled pursuant to article 22 of title 12 and the regulations promulgated thereto. Non-prescription medications shall be labelled with resident's full name and may be labelled by facility staff.
- 12.7.2 Any prescription medication container which has a detached, excessively soiled or damaged label, shall be returned to the issuing pharmacy for relabeling.
- 12.7.3 The contents of any medication container having no label or with an illegible label shall be destroyed immediately.
- 12.7.4 Medication which has a specific expiration date shall not be administered after that date.
- 12.9.1 Medication which is kept in a central location shall be kept under lock and shall be stored in separate or compartmentalized packages, containers, or shelves, for each resident in order to prevent intermingling of medication.
- 12.10 Medications which require refrigeration shall be stored separately in closed containers and shall be refrigerated as necessary.
- 12.12 Residents shall not have access to medication which is kept in a central location.
- 12.13 Prescription and non-prescription medication shall not be kept in stock or bulk quantities.
- 12.14 Residents may self-administer oxygen when prescribed by a physician and if the facility follows appropriate safety requirements herein.
- 12.14.1 Oxygen tanks shall be secured and safely stored at all times.
- 12.14.2 Smoking shall be prohibited in rooms where oxygen is stored or in use.
- 12.14.3 Rooms in which oxygen is used or stored shall be posted with a conspicuous "No Smoking" sign.

DIETARY

- 13.1 At least three nutritionally balanced meals in adequate portions, using a variety of foods from the basic four food groups shall be made available, either directly or indirectly through provider agreement, at regular times daily. In the event the meal provided is unpalatable, a substitute shall be provided.
- 13.2 Between meal snacks of nourishing quality shall be available.
- 13.3.1 Menus shall vary daily and shall be adjusted for seasonal changes and holidays. Weekly menus shall be available for review by residents in advance of the day of preparation. Residents shall be encouraged to participate in planning of meals and in making suggestions as to menus and the facility shall make reasonable efforts to accommodate such suggestions.
- 13.3.3 There shall be enough food on hand to prepare the menus for two days.
- 13.3.4 All food shall be free from spoilage, filth, or other contamination, and shall be safe for human consumption. Facilities licensed for 20 beds or more shall comply with Rules and Regulations Governing the Sanitation of Food Service Establishments in the State of Colorado. C.D.H., 1990.
- 13.3.5 No disinfectants, insecticides, bleaches, rubbing alcohol, or household cleaning solutions or poisons shall be stored with food supplies.
- 13.4.1 In facilities capable of and willing to provide therapeutic diets, the menus shall be reviewed by appropriately qualified dietary consultant services.
- 13.4.2 Where such therapeutic diets are indicated, they shall be prescribed by a physician or other authorized practitioner.
- 13.4.3 Recipes used for therapeutic diets shall be available for review.
- 13.5.1 A designated dining area accessible by all residents shall be provided in a separate area or areas capable of comfortably seating all residents, either at one seating or in no more than two seatings.

- 13.5.2 No resident or group of residents shall be excluded from the designated dining area during meal time unless otherwise indicated in the resident's board and care plan.
- 13.5.3 Meals shall not be routinely served in resident rooms unless otherwise indicated in the residents's board and care plan.
- 13.6 A two-compartment sink or a single-compartment sink used in conjunction with a domestic dishwashing machine shall be required. If a sink is utilized, the sanitary washing method shall be used: dishes, glassware, and utensils pre-scraped, washed thoroughly in a warm detergent solution in the first sink, thoroughly rinsed in hot water in the second and then allowed to air dry on drain board. When a domestic dish-washing machine is used, the method is to follow machine manufacturer's recommendations.

LAUNDRY

- 14.1 The facility shall provide for the necessary washing, drying, and ironing of residents' laundry in one of the following ways:
- (A) providing the laundry service for the residents;
 - (B) providing access to laundry equipment so that the residents may do their own laundry; or
 - (C) by making arrangements with a commercial laundry.
- 14.2 Separate storage for soiled linen and clothing shall be provided. Such storage may consist of individual plastic bags or hampers.
- 14.3 In facilities which provide the appropriate bed and bath linen as required in these regulations, at least two clean sheets, one clean pillow case, two clean bath towels, and three clean washcloths shall be provided at least weekly or more frequently if needed; clean blankets shall be provided as necessary.

COMMON AREAS

- 15.1 Common areas sufficient to reasonably accommodate all residents shall be provided.

- 15.1.2 All common areas and dining areas shall be accessible to residents utilizing an auxiliary aid without requiring transfer from a wheelchair to walker or from a wheelchair to a regular chair for use in dining area. All doors to those rooms requiring access be at least 32 inches wide.
- 15.2 A minimum of two entryways shall be provided for access and egress from the building by residents utilizing an auxiliary aid if the facility is occupied by one or more residents utilizing such an aid.

BEDROOMS

- 16.1 Single occupancy bedrooms shall have at least 100 square feet; double occupancy bedrooms shall have at least 60 square feet per person. Bathroom areas shall not be included in the determination of square footage.
- 16.2 Any facility licensed prior to the adoption of these regulations may have bedrooms of not less than 80 square feet for one occupant until either substantial remodeling or a change of ownership occurs.
- 16.3 No more than two (2) residents shall occupy a bedroom (except for facilities licensed prior to July 1, 1986, which may have up to four (4) residents per room until either a substantial remodeling or a change of ownership occurs).
- 16.4 Each bedroom shall have at least one window of eight (8) square feet which shall have opening capability.
- 16.4.1 Any facility licensed prior to the adoption of these regulations may have a window of smaller dimensions until either a substantial remodeling or a change of ownership occurs.
- 16.5 No resident shall be assigned to any room other than a regularly designated bedroom.
- 16.6 Cooking shall not be allowed in bedrooms; residents shall have access to an alternative area where minimal food preparation such as heating or reheating food or making hot beverages is allowed.
- 16.6.1 In those facilities which make housing available to residents through apartments rather than resident bedrooms, cooking may be allowed in accordance with house rules.

- 16.7 Extension cords and multiple use electrical sockets, including power strips, shall be prohibited.
- 16.8 Personal appliances shall be allowed in resident bedrooms only under the following circumstances:
- (A) such appliances are not used for cooking;
 - (B) such appliances do not require use of an extension cord or multiple use electrical sockets;
 - (C) such appliance is in good repair as evaluated by the operator; and
 - (D) such appliance is used by a resident who the operator believes to be capable of appropriate and safe use.
- 16.8.1 In no event shall a heating pad or electric blanket be used in a resident room without either staff supervision or documentation that the operator believes the resident to be capable of appropriate and safe use.

BEDROOM EQUIPMENT

- 16.9 In facilities which provide furnishings for resident bedrooms pursuant to a provider agreement, each resident bedroom shall be equipped as follows for each resident:
- A) a comfortable, standard-sized bed equipped with a comfortable, clean mattress, mattress protector and pad, and pillow. Rollaway type beds, cots, folding beds or bunk beds shall not be permitted.
 - B) a standard-sized chair in good condition;
 - C) a fire resistant waste basket;
 - D) at least two clean bath towels and three washcloths;
 - E) soap sufficient for personal hygiene; and
 - F) a towel rack.
- 16.10 Each resident shall have storage facilities adequate for clothing and personal articles such as a closet or locker.

BATHROOMS

- Two*
- 17.1 There shall be at least one full bathroom for every six (6) residents.
- 17.1.1 Any facility licensed to provide services specifically for the mentally ill prior to the adoption of these regulations may have one bathrooms for every eight (8) residents until either a substantial remodeling or a change of ownership occurs.
- 17.1.2 There shall be a bathroom on each floor having resident bedrooms which is accessible without requiring access through an adjacent bedroom.
- 17.1.3 A full bathroom shall consist of at least the following fixtures: toilet, handwashing sink, toilet paper dispenser, mirror, tub or shower, and towel rack.
- 17.2 Grab bars shall be properly installed at each tub and shower, and adjacent to each toilet in any facility which is occupied by one or more residents utilizing an auxiliary aid of as otherwise indicated by the needs of the resident population.
- 17.3 The use of common personal care articles, including soap and towels, is prohibited.
- 17.4 Bathtubs and shower floors shall have non-skid surfaces.
- 17.5 Toilet seats shall be constructed of non-absorbent material and free of cracks.
- 17.6 Toilet paper in a dispenser shall be available at all times in each bathroom or the facility.
- 17.7 In any facility which is occupied by one or more residents utilizing an auxiliary aid, the facility shall provide at least one full bathroom as defined herein with fixtures positioned so as to be fully accessible to any resident utilizing an auxiliary aid.

ENVIRONMENT

- 18.1 The facility shall provide a clean, sanitary environment, free of hazards to health and safety.
- 18.2 Exterior premises shall be kept free of high weeds and grass, garbage and rubbish. Grounds shall be maintained

to prevent hazardous slopes, holes, or other potential hazards. All wood and lumber shall be stored at least eighteen (18) inches above ground to prevent rodent harborage.

- 18.3 Exterior staircases of three (3) or more steps and porches shall have handrails and be kept in good repair.
- 18.4 The facility shall be maintained free of infestations of insects and rodents and all openings to the outside shall be screened.
- 18.5 All interior areas including attics, basements, and garages shall be safely maintained and free from accumulations of extraneous materials such as refuse, discarded furniture, and old newspapers. Combustibles such as cleaning rags and compounds shall be kept in closed metal containers. Solutions, cleaning compounds, and hazardous substances shall be labeled and stored in a safe manner.
- 18.6 All interior areas including attics, basements, and garages shall be safely maintained and free from accumulations of extraneous materials such as refuse, discarded furniture, and old newspapers. Combustibles such as cleaning rags and compounds shall be kept in closed metal containers. Solutions, cleaning compounds and hazardous substances shall be labeled and stored in a safe manner.
- 18.7 Each room in the facility shall be installed with heat, lighting and ventilation sufficient to accommodate its use and the needs of the residents.
- 18.8 There shall be an adequate supply of safe, potable water available for domestic purposes including a sufficient supply of hot water during peak usage demands.
- 18.8.1 Hot water shall not measure more than 120 degrees Fahrenheit at taps which are accessible by residents.

FIRE SAFETY

The following rules contain references to the fire code published by the National Fire Protection Association. References to specific chapters within the code are delineated by "N.F.P.A." immediately preceding the chapter number as is the common practice when citing to the code. The referenced materials are incorporated by references rather than printed within the regulations in their entirety and do not include later amendments to or editions of the incorporated materials.

Certified copies of the materials in their entirety are available for inspection during regular business hours and copies may be obtained upon request and at cost by contacting the Director, Health Facilities Division, Colorado Department of Health at the address listed on page 1 of these regulations.

19.1

DEFINITIONS

(a) "AES" means an approved automatic extinguishment system as defined and described by N.F.P.A. 101, Life Safety Code, 1991.

(b) "Fire safety equipment" means any fire, heat, or smoke detection, alarm, or communication system and includes AES.

19.2

INITIAL LICENSURE REQUIREMENTS - NEW CONSTRUCTION OR RENOVATION

Facilities applying for initial licensure after January 1, 1993 shall meet requirements of the applicable section of Chapter 22, N.F.P.A. 101, Life Safety Code, 1991 if the facility is:

(A) a new construction, i.e., a building or structure which had not yet been built or was otherwise not available for occupancy on January 1, 1993 because of incomplete construction of an addition thereto, or incomplete construction, modernization, renovation, or replacement to fifty percent or more of its floor area;

(B) a new alteration, i.e., any building or structure which, although available for occupancy on January 1, 1993, undergoes alteration due to construction, addition, renovation, or replacement to fifty percent or more of its total area after January 1, 1993 regardless whether such alteration was completed as part of a single project or by a series of projects over a period of time.

(C) a change of ownership, i.e., an application for licensure pursuant to 6 CCR 1011-1, Chapter II, shall be considered an initial license and require compliance with 19.2.

19.3

INITIAL LICENSURE - EXISTING STRUCTURES

A facility occupying an existing building or structure which is not undergoing a new alteration as described in

19.2 (B) after January 1, 1993 must meet the following requirements:

Small Facilities

(A) If the facility is occupied by three residents, none of which has an evacuation capability of more than twelve, as determined by use of Chapter 5, N.F.P.A. 101-M, Manual on Alternative Approaches to Life Safety, 1988, the facility shall meet the requirements of Chapter 21, N.F.P.A. - 101, 1991 - 1 and 2 Family Dwellings.

(B) In any facility occupied by at least one resident with an evacuation capability of twelve or more, and in all facilities occupied by at least four (4) but no more than seventeen (17) residents, the facility shall meet the requirements of Chapter 23, N.F.P.A. - 101, 1992 - Residential Board and Care Occupancies, Section 23-2, Small Facilities or Chapter 6, N.F.P.A. 101-M Manual on Alternative approaches to Life Safety, 1988.

(C) Change of ownership. For the purposes of this section a change of ownership in the type of facility defined in 19.3 (A) or (B) shall be considered an initial license and shall meet the requirements of section 19.3 unless the requirements of section 19.2 apply.

Large Facilities

(D) Any facility applying for initial licensure or a change of ownership for seventeen (17) or more beds after January 1, 1993 shall be equipped with an AES, as defined above and meet the requirements of (1), (2), or (3) as defined in the following section:

(1) In any facility occupied by seventeen (17) or more residents, the facility shall meet the requirements of Chapter 23, N.F.P.A.-101, 1991 - Residential Board and Care Occupancies, Section 23-3 Large Facilities.

(2) If the facility is part of an apartment building or complex of buildings having one or apartments licensed as a Personal Care Boarding Home, it shall meet the requirements of Chapter 23, N.F.P.A.-101, 1991 - Residential Board and Care Occupancies, Section 23-4, Suitability of an Apartment Building to House a Board and Care Occupancy. If seventeen (17) or more beds are licensed as a facility, the entire building must be equipped with an AES.

(3) If the facility is within an existing health care facility, it shall meet the requirements of Chapter 12 or 13, N.F.P.A.-101, (1967, 1973, 1981, or 1985 editions, as applicable), Existing Health Care Occupancies. If seventeen (17) or more beds are licensed as a facility, the entire facility must be equipped with an AES.

19.4

EXISTING LICENSURE

Facilities which were licensed or which had applied for initial licensure prior to January 1, 1993 shall be considered existing facilities and shall meet either the requirements of the applicable section of Chapter 23, N.F.P.A. 101, Life Safety Code, 1991 or Chapter 6, N.F.P.A. 101-M Manual on Alternative Approaches to Life Safety, 1988 or one of the following as applicable to the type of facility at the time of licensure:

(A) For those facilities licensed or applying for license to provide services specifically for the mentally ill, the Fire Safety Evaluation System - NBSIR 83-2659, March 1983 Appendix A, Sections 21-1.3 definitions of "Evaluation Capability" and "Point of safety," Section 21-1, except for Items 6C under notes for Table 21-1, and Sections 31-9.1, 31-9.2, 31-9.3, and 31-9.4; Appendix B; Appendix C, Part 1, except for Item 3(b) (3), and Part 3; and any applicable portions for referenced N.F.P.A. standards; or

(B) For other facilities licensed as personal care boarding homes:

(1) If the facility houses three (3) residents (and no one resident is determined to have an evacuation capability more than 12 - see N.F.P.A. - 101, 1985 - appendix F), the facility shall meet the requirements of Chapter 22, N.F.P.A. 101, 1985 - One and Two Family Dwellings.

(2) If any resident is determined to have an evacuation capability of 12 or more or if the facility houses 4-16 residents, the facility shall meet the requirements of Chapter 21, N.F.P.A. 101, 1985 - Residential Board and Care Occupancies, Section 21-2, Small Facilities.

(3) Facilities housing 17 or more residents shall meet the requirements of Chapter 21, N.F.P.A. 101, 1985 - Residential Board and Care Occupancies, Section 21-3, Large Facilities.

(4) Apartment buildings having one or more apartments used as a personal care boarding home shall meet the requirements of Chapter 21 - Residential Board and Care Occupancies, N.F.P.A. - 1-1, 1985, Section 21-4, Suitability of an Apartment Building to House a Board and Care Facility.

(5) If the facility is located within an existing health care facility, it shall meet the requirements of Chapter 13, N.F.P.A. - 101 (1967, 1973, or 1981, as applicable), Existing Health Care Occupancies.

19.5

OTHER REQUIREMENTS

(A) Any facility operating under one license but comprised of multiple buildings shall have the applicability of the requirements determined for each building on an individual basis rather than for the facility as a whole.

(B) Waiver of the above AES requirement may be considered by the department in accordance with 6 CCR 1011-1, Chapter II, General Licensure Standards, Part 4 only if the fire department of the locality wherein the facility is located approves and recommends such a waiver.

19.6

FIRE, EQUIPMENT, AND EMERGENCY PROCEDURES

(A) There shall be a written fire escape plan including a diagram developed with local fire department officials which shall be posted in a conspicuous place. The plan and diagram shall be explained to each resident within three (3) days of admission. The facility shall document such review in the resident's record.

(B) Training and orientation in emergency procedures shall be provided each new staff member, including volunteers, within three (3) days of employment or commencement of volunteer service. The facility shall document such training in the employee's permanent personnel file.

(C) Fire Exit Drills shall be conducted at least six (6) times per year; at least twice per year on each shift. Twelve (12) drills shall be conducted during the first year of operation.

(D) There shall be at least two (2) fire drills between 10 p.m. and 6:00 a.m. annually.

(E) There shall be documentation every two (2) months of a review of the emergency plan and procedures with staff of each shift and with residents.

(F) The drills may be announced in advance to the residents. The drills may involve the actual evacuation of all residents to a selected assembly point in accordance with local fire department rules and recommendations. Such drills shall be designed to provide residents with experience in exiting through all exits required by the Life Safety Code, although exiting through egress windows shall not be required.

(G) Exits not used in any fire drill shall not be credited in meeting the requirements of the Life Safety Code.

(H) There shall be a written emergency plan including planned responses to fire, gas explosion, bomb threat, power outages, and tornado. Such plan shall include provisions for alternate housing in the event evacuation is necessary.

(I) First aid equipment shall be maintained on the premises in a readily available location and staff shall be instructed in its use.

(J) There shall be at least one telephone which may be used by staff, volunteers, residents, and visitors at all times for use in emergencies, in addition to being available for regular telephone usage by residents and staff. The police, fire, ambulance, and poison control center telephone numbers shall be posted at such telephone.

(K) The facility shall have a portable fire extinguisher of the ABC type of at least 3 pound capacity located in the kitchen area, common area, and at least one on each floor of the facility.

(L) Kerosene (fuel fired) heaters shall not be permitted within the facility. Electric or space heaters shall not be permitted within resident bedrooms and may only be used in common areas of the facility if owned, provided, and maintained by the facility.

(M) Any fire suppression or detection equipment shall be fully operational and functional.

(N) Written proof that such equipment has been tested and approved as fully functional and operational, either by the local fire department or a registered fire

suppression contractor, shall be submitted with the application prior to the issuance of a new license or license renewal.

**SECTION 20
SECURED ENVIRONMENT**

Facilities choosing to operate a secured environment must comply with the regulations contained in section 20, in addition to the core regulations for residential care facilities.

- 20.1 Definition: for purposes of this section only, the following definition shall apply, unless the context requires otherwise: secured environment means any grounds, building or part thereof, method or device that prohibits free egress of residents. An environment is secured when the right of any resident thereof to move outside the environment during any hours is limited.

ADMISSION OR TRANSFER

- 20.2 A resident shall not be admitted or transferred to a secured environment unless legal authority for admitting the resident has been established by guardianship, court order, medical durable power of attorney, health care proxy or other means allowed by Colorado law. However, a resident may voluntarily be admitted or may remain in a secured environment if his or her egress is not restricted.

- 20.2.1 A facility must give at least 30 days written notice to the resident and the resident's legal representative when moving a resident out of a secured environment, unless the move is made at the request of, or voluntarily by, the person who is legally responsible for the resident or in accordance with the requirements of 10.5(B) of these regulations.

ASSESSMENT

- 20.3 A resident shall not be admitted to a secured environment unless an assessment has been completed by a qualified professional such as the resident's physician, a social worker, physician's assistant or nurse practitioner. If the qualified professional is a member of the facility staff or has been hired by the facility to conduct the evaluation, the qualified professional shall consult with

the resident's physician or other independent person qualified to review the care needs of resident.

- 20.3.1 Prior to admission, there shall be an assessment of the resident that evaluates the need for placement in a secured environment. The resident shall not be admitted to the secured environment unless the assessment includes an evaluation of less restrictive alternatives documented in the resident record.
- 20.3.2 Upon completion of the assessment, a resident who has been determined to be a danger to self or others shall not be admitted to the secured environment.
- 20.3.3 Prior to admission, a review of the services available at the facility shall be made to determine that such facility can meet the needs of the resident.
- 20.3.4 An assessment must be completed by a qualified professional such as the resident's physician, or a social worker, a physician assistant, or nurse practitioner, within 10 days when there is a significant change in the medical or physical condition of the resident, or when the resident becomes a danger to self or others, to determine whether the resident's stay in the secured environment is still appropriate.

DOCUMENTATION

- 20.4 Written findings and their basis regarding the admission or transfer of the resident to the secured environment, including the assessment and the legal authority for admission shall be documented in the resident's record and maintained in the facility.

STAFFING

- 20.5 The facility shall provide a sufficient number of trained staff members to meet the needs of the residents in the secured environment, but there shall always be at least one trained staff member in attendance in the secured environment at all times.
- 20.5.1 In addition to the requirements of section 6, staff and the owner or operator who have day to day contact with the residents in the secured environment shall be trained in the particular needs and care of the residents to perform their duties in the secured environment.

BUILDING, GROUNDS AND FIRE SAFETY

- 20.6 In addition to the interior common areas required by this regulation, the facility shall provide a safe and secure outdoor area for the use of residents year round.
- 20.6.1 Locking devices used to secure facility exits must be in compliance with the N.F.P.A. Life Safety Code 101, 1991, for new or existing facilities as applicable, sections 22-3.2.2.2 and 23-3.2.2.2. and 5-2.1.6., and approved by the department.

SUBMISSION OF PLANS

- 20.7 A facility planning to open a secured environment under these regulations shall have 30 days to submit its plans for physical plant and locking devices for exits to the department prior to opening the secured environment. Facilities with secured environments in operation as of the date of adoption of these regulations shall have 30 days to submit to the department plans for physical plant and locking devices.

EXCEPTIONS AND PROHIBITIONS

- 20.8 Facilities that serve residents who are mentally ill shall not admit such residents into a secured environment unless there is no less restrictive alternative and unless they are otherwise in compliance with the requirements of article 10 of title 27, Colorado Revised Statutes.
- 20.9 Facilities that serve residents with developmental disabilities as defined in article 10.5 of title 27, Colorado Revised Statutes shall not admit such residents into a secured environment, unless the facility is in compliance with the requirements of such article.

DISCLOSURE

- 20.10 A facility that operates a secured environment shall disclose to the resident and the resident's legal representative, if applicable, prior to the resident's admission to the facility, that the facility operates a secured environment. The disclosure shall include information about the types of resident diagnoses or behaviors that the facility serves and for which staff of the secured environment is trained to provide services.

REQUESTS FOR ASSISTANCE

- 20.11 The resident who believes that he or she has been inappropriately admitted to the secured environment may request the assistance of the facility in contacting the local ombudsman or the resident's legal representative. Upon such request the facility shall assist the resident in making such contact.