DEPARTMENT OF HUMAN SERVICES

Social Services Rules

CHILD CARE FACILITY LICENSING

12 CCR 2509-8

[Editor's Notes follow the text of the rules at the end of this CCR Document.]

7.700 CHILD CARE FACILITY LICENSING

7.701 GENERAL RULES FOR CHILD CARE FACILITIES

7.701.1 INTRODUCTION

All rules in Section 7.701, et seq., shall be known and hereinafter referred to as the General Rules for Child Care Facilities and will apply to all child care applicants and licensees subject to the Child Care Licensing Act, Sections 26-6-101 to 26-6-119, C.R.S.

7.701.11 Licensing Exemptions [Rev. eff. 4/1/11]

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

B. A license is not required for:

1. A special school or class in which more than 75 percent of the time that children are present is spent in religious instruction. Religious instruction is defined to include such developmentally appropriate children's activities as worship, singing religious songs, listening to religious stories, learning and practicing religious cultural activities, and participating in religious celebrations.

2. A special school or class operated for a single skill-building purpose.

3. A child care center operated in connection with a church, shopping center, or business where children are cared for during short periods of time, not to exceed three hours in any twenty-four hour period of time, while parents or persons in charge of such children, or employees of the church, shopping center, or business whose children are being cared for at such location are attending church services at such location, shopping, patronizing or working on the premises of the business. This facility must be operated on the premises of the church, business, or shopping center. Only children of parents or guardians who are attending a church activity or patronizing the business or shopping center or working at the church, shopping center or business can be cared for in the center.

4. Occasional care of children with or without compensation, which means the offering of child care infrequently and irregularly that has no apparent pattern.

5. A family care home in which less than 24-hour care is given for only one child or two or more children who are siblings from the same family household at any one time.

6. A child care facility that is approved, certified, or licensed by any other state department or agency, or by a federal government department or agency, which has standards for operation of the facility and inspects or monitors the facility.

7. The medical care of children in nursing homes.

8. Ski area guest child care facilities as defined at Sections 26-6-102(5) and 26-6-103.5, C.R.S.

9. Neighborhood Youth Organizations as defined at Sections 26-6-102(5.8) and 26-6-103.7, C.R.S.

C. Any child care providers wishing to be declared exempt from the Child Care Licensing Act based on the nature of their program must submit a request for exemption to the State Department. That request must include the name and address of the facility, the number of children in care and their approximate ages, the hours of operation, and a basic description of the program and its curriculum.

D. Decisions of the State Department regarding exemptions are the final agency decision of the Department and cannot be reviewed by an Administrative Law Judge.

7.701.12 Civil Penalties and Injunctions

A. Violation of any provision of the Child Care Licensing Act or intentional false statements or reports made to the Department or to any agency lawfully delegated by the Department to make an investigation or inspection may result in fines assessed 1o a maximum of $10,000.

1. A civil penalty will be assessed by the Department only in conformity with the provisions and procedures specified in Article 4 of Title 24, C.R.S. No civil penalty will be assessed without a hearing conducted pursuant to the Child Care Licensing Act and Article 4 of Title 24, C.R.S., before an Administrative Law Judge acting on behalf of the Department.

2. Prior to receipt of a cease and desist order from the Department or from any agency delegated by the Department to make an investigation or inspection under the provision of the Child Care Licensing Act, any unlicensed child care facility may be fined up to $100 a day to a maximum of $1,000 for providing care for which a license is required.

3. For providing child care for which a license is required after receipt of a cease and desist order, an unlicensed facility will be fined $100 a day to a maximum of $10,000.

4. Assessment of any civil penalty under this section will not preclude the Department from initiating injunctive proceedings pursuant to Section 26-6-111, C.R.S.

5. A licensed child care facility may be fined up to $100 a day to a maximum of $10,000 for each violation of the Child Care Licensing Act or for any statutory grounds as listed at Section 26-6-108(2), C.R.S.

6. Assessment of any civil penalty does not preclude the department from also taking action to deny, suspend, revoke, make probationary, or refuse to renew that license.

7. Any person intentionally making a false statement or report to the Department or to any agency delegated by the Department to make an investigation or inspection under the provisions of the Child Care Licensing Act may be fined up to $100 a day to a maximum of $10,000.

8. Civil penalties assessed by the department must be made payable to the Colorado Department of Human Services.

B. In addition to civil penalties that may be assessed under Section 7.701.12, A, when an individual operates a facility after a license has been denied, suspended, revoked, or not renewed, or before an original license has been issued, injunctive proceedings may be initiated to enjoin the individual from operating a child care facility without a license.

C. Within 10 working days after receipt of a notice of final agency action with regard to a negative licensing action or the imposition of a fine, each child care center or family child care home must provide the Department with the names and mailing addresses of the parents or legal guardians of each child cared for at the facility so that the Department can notify the parents or legal guardians of the negative licensing action taken. The facility will be responsible for paying a fine to the Department that is equal to the direct and indirect costs associated with the mailing of the notice.

7.701.13 Waivers [Rev. eff. 2/1/14]

A. A person who has applied for or been issued a certificate or license to operate a child care facility or child placement agency has the right to request a waiver of any rule or regulation which, in his/her opinion, works an undue hardship on the person, facility, or the community, or has been too stringently applied by a representative of the Department.

B. Requests for waivers must be submitted to the Department in writing within sixty (60) calendar days of the date on which the rule allegedly was too stringently applied or created the hardship. Requests must include the name and address of the facility, its assigned license number, the citation of the rule for which a waiver is being sought, and all relevant information regarding the alleged hardship or evidence of the rule being too stringently applied.

C. Pursuant to Section 26-6-105.7, C.R.S., materials waivers are different than general waivers in several ways. Child care centers may apply for a waiver to use certain materials in its program pursuant to Section 26-6-105.7(2)(a), (b), C.R.S.

D. The Department will designate, pursuant to the Child Care Licensing Act, Section 26-6-106(3), C.R.S., an appeal panel, which will meet to review appeal requests and make recommendations to the Executive Director of the Colorado Department of Human Services, and the Director will issue a decision. Decisions of the Executive Director are final and not subject to judicial review. Requests for an appeal shall be submitted to the Office of Early Childhood.

E. The Department shall make a decision on waiver requests and notify the child care center of its decision no later than sixty (60) calendar days of receipt of the request.

F. If a child care facility or agency is aggrieved by the decision of the appeal panel, the facility or agency has the following rights:

1. If the denial of a waiver request relates to a request for a materials waiver/appeal, the facility or agency may petition the Colorado Department of human services ("The Department") in writing within forty-five (45) calendar days to appeal the denial decision.

2. If the appeal/waiver relates to any other rule than a materials waiver/appeal, the facility has a right to a formal hearing pursuant to Section 24-4-105, C.R.S., if the facility or agency petitions the Department in writing within thirty (30) calendar days of receipt of the written appeal decision.

G. For appeals of materials waiver/appeal denials, the Executive Director or designee shall act upon the appeal within forty-five (45) calendar days and shall provide notice of his/her decision on the appeal within ten (10) calendar days.

H. For appeals of materials waiver/appeal denials, the appealing child care center has the right to request a meeting in person with Department personnel regarding the appeal.

I. For appeals of materials waiver/appeal denials, the entire appeals process shall last no longer than one hundred (100) calendar days after the date of the notice of the denial of the waiver request.

J. Written decisions of the appeal panel shall be posted beside the child care license, but posting of the decision shall not occur until the appeal is final. The Department shall not post the decision to deny a waiver on its web site until the appeal is final.

7.701.14 Civil Rights

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

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

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

7.701.2 DEFINITIONS [Rev. eff. 1/1/16]

A. Types of Homes

1. Family Child Care Home

“Family Child Care Home”, defined at Section 26-6-102(4), C.R.S., means a type of family care home that provides less than 24-hour care for 2 or more children on a regular basis in a place of residence. Children in care are from different family households and are not related to the head of household.

2. Foster Care Home

"Foster Care Home" means a home that is certified by a county department or a child placement agency, pursuant to Section 26-6-106.3, C.R.S., for child care in a place of residence of a family or person for the purpose of providing twenty-four (24) hour foster care for a child and/or youth under the age of twenty-one years. A foster care home may include foster care for a child and/or youth who is unrelated to the head of the home or foster care provided through a kinship foster care home, but does not include non-certified kinship care defined in Section 19-1-103(78.7), C.R.S. The term includes any foster care home receiving a child and/or youth for regular twenty-four (24) hour care and any home receiving a child and/or youth from any state-operated institution for child care or from any child placement agency. Foster care home also includes those homes licensed by the Department of Human Services pursuant to Section 26-6-104, C.R.S., that receive neither moneys from the counties, nor children and/or youth placed by the counties.

B. Specialized Group Facility

A "Specialized Group Facility", defined at Section 26-6-102(10)(a), C.R.S., means sponsored and supervised by a county department or a licensed child placement agency for the purpose of providing twenty-four (24) hour care for three (3) or more children, but fewer than twelve (12) children except as noted below, from at least three (3) but less than eighteen (18) years of age, or for those persons less than twenty-one (21) years old who are placed by court order prior to their eighteenth birthday whose special needs can best be met through the medium of a small group. A specialized group facility may serve a maximum of one (1) child enrolled in Children's Habilitation Residential Program (CHRP) and eight (8) other foster children, or two (2) children enrolled in CHRP and five (5) other foster children, unless there has been prior written approval by the CHRP waiver administrator. If placement of a child in a Specialized Group Center will result in more than three (3) children approved for Children's Habilitation Residential Program (CHRP) funding, then the total number of children paced in that Specialized Group Center will not exceed a maximum of six (6) total children. Placements of more than three (3) children approved for CHRP funding may be made if the agency can demonstrate to the CHRP waiver administrator that the provider has sufficient knowledge, experience, and supports to safely meet the needs of all of the children in the home. Emergency placements will not exceed maximum established limits. Facilities that exceed established capacity at the time the rule takes effect may not accept additional children into the home until capacity complies with the rule.

SPECIALIZED GROUP FACILITY MAXIMUM CAPACITY

CHRP	Non-CHRP	Total Children
1	8	9
2	5	7

SPECIALIZED GROUP CENTER MAXIMUM CAPACITY

CHRP	Non-CHRP	Total Children
3	3	6

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

2. "Specialized Group Centers" that serve three (3) children enrolled in CHRP waiver must be staffed with sufficient staff to deal with the complex needs of the children placed in the home.

3. A “Specialized Group Home” is located in a house owned or otherwise controlled by the group home parents who are primary responsible for the care of the children and reside at the home.

4. A “Specialized Group Center” is located in a facility owned or controlled by a governing body that hires the group center parents or personnel who are primarily responsible for the care of the children.

C. Child Care Center

“Childcare centers”, less than 24-hour programs of care defined at Section 26-6-102(1.5), C.R.S., include the following types of facilities:

1. A “large child care center” provides care for sixteen (16) or more children between two and one-half (2-1/2) and sixteen (16) years of age.

2. A “small child care center” provides care for five (5) through fifteen (15) children between two (2) and sixteen (16) years of age.

3. An “infant nursery” provides care for children between six (6) weeks and eighteen (18) months of age.

4. A “toddler nursery” provides care for children between the ages of twelve (12) months (when walking independently) and thirty-six (36) months of age.

5. “Preschool” is a part-day child care program for five (5) or more children between the ages of two and one-half (2-1/2) and seven (7) years of age.

6. “Kindergarten” provides a program for children the year before they enter the first grade.

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

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

   b. A “mobile school-age child care program” provides care for five (5) or more children who are at least seven (7) years of age or have completed the first grade. Children move from one site to another by means of transportation provided by the governing body of the program. The program uses no permanent building on a regular basis for the care of children.

   c. An “outdoor-based school-age child care program” provides care for five (5) or more children who are at least seven (7) years of age or have completed the first grade. This program uses no permanent building on a regular basis for the care of children. Children are cared for in a permanent outdoor or park setting.

D. Children's Resident Camp

A "Children's Residential Camp", is defined at Section 26-6-102(2.2), C.R.S.

1. A residential camp may have a "primitive camp" which is a portion of the permanent camp premises or another site at which the basic needs for camp operation such as places of abode, water supply systems, and permanent toilet and/or cooking facilities are not usually provided.

2. A "travel-trip camp" shall be known as a camp in which there is no permanent camp site and children move from one site to another. The travel-trip camp either originates in Colorado or moves into and/or through Colorado from another state and operates for three or more consecutive twenty four (24) hour days during one or more seasons of the year for the care of five or more children who are at least ten (10) years old or have completed the fourth grade. The program shall have as its purpose a group learning experience offering educational and recreational activities utilizing an outdoor environment.

E. Day Treatment Center

A "Day Treatment Center", defined at Section 26-6-102(2.4), C.R.S., means a facility that provides less than twenty-four (24) hour care for groups of five (5) or more children three (3) to twenty-one years of age. Nothing prohibits a day treatment center from allowing a person who reaches twenty-one (21) years of age after the commencement of an academic year from attending an educational program at the day treatment center through the end of the semester in which the twenty-first birthday occurs or until the person completes the educational program, whichever comes first. The center must provide a structured program of various types of psycho-social and/or behavioral treatments to prevent or reduce the need for placement of the child out of the home or community. This definition does not include special education programs operated by a public or private school system or programs that are licensed by other regulations of the Department of Human Services for less than twenty-four (24) hour care of children, such as a child care center or part-day preschool.

F. Child Placement Agency

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

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

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

G. Residential Child Care Facility

1. "Residential Child Care Facility", defined at Section 26-6-102(8), C.R.S., shall provide twenty-four (24) hour residential group care and treatment for five (5) or more children between the ages of three (3) and eighteen (18) years old and for those persons to twenty-one (21) years old who are placed by court order prior to their eighteenth birthday. A residential child care facility must offer opportunities for a variety of experiences through a group living program and specialized services that can be used selectively in accordance with an individual plan for each child. A residential child care facility includes "Shelter Care Facilities", "Residential Child Care Facilities", and "Psychiatric Residential Treatment Facilities".

2. "Transition Program" may be a component of an RCCF program in which the child is residing in the RCCF part of the time and in a living situation that child is expected to move to after treatment in the RCCF is completed. The purpose of transition is to enable the child to transition to the home or a less restrictive setting in a manner that prepares the child for success in the new setting.

H. Secure Residential Treatment Center

A "Secure Residential Treatment Center", defined at Section 26-6-102(9), C.R.S., means a facility operated under private ownership that provides twenty-four (24) hour group care and treatment in a secure setting for five (5) or more children or persons from age ten (10) up to the age of twenty-one (21) who are committed by a court pursuant to an adjudication of delinquency or pursuant to a determination of guilt of a delinquent act or having been convicted as an adult and sentenced for an act that would be a crime if committed in Colorado, or in the committing jurisdiction, to be placed in a secure facility.

I. Neighborhood Youth Organization

A "Neighborhood Youth Organization", defined at Section 26-6-102(5.8), C.R.S., means a nonprofit organization that is designed to serve youth as young as six years of age and as old as eighteen years of age and that operates primarily during times of the day when school is not in session and provides research-based, age-appropriate, and character-building activities designed exclusively for the development of youth from six to eighteen years of age. These activities shall occur primarily in a facility leased or owned by the Neighborhood Youth Organization. The activities shall occur in an environment in which youth have written parental or legal guardian consent to become a youth member of the neighborhood youth organization and to arrive at and depart from the primary location of the activity on their own accord, without supervision by a parent, legal guardian, or organization.

A Neighborhood Youth Organization shall not include faith-based centers, organizations or programs operated by state or city parks or special districts, or departments or facilities that are currently licensed as child care centers as defined in Section 26-6-102(1.5), C.R.S.

J. Other Definitions

1. "Affiliate of a licensee" means any person or entity that owns more than five (5) percent of the ownership interest in the business operated by the licensee or the applicant for a license, or any person who is directly responsible for the care and welfare of children served, any executive, officer, member of the governing board, or employee of a licensee, or a relative of a licensee, which relative provides care to children at the licensee's facility, or is otherwise involved in the management or operations of the licensee's facility.

2. For the purposes of all child care licensing rules, the terms “child battering”, “child abuse”, “child molesting”, and “child neglect” are terms to be considered within the definition of abuse set forth in Section 19-1-103, C.R.S., unless otherwise indicated.

3. “Citizen/legal resident” means a citizen of the United States, current legal resident of the United States, or lawfully present in the United States.

4. The “Consumer Product Safety Commission”, as referred to in rules regulating child care facilities, means the National Commission that establishes standards for the safety of children’s equipment and furnishings and for playground safety. Information about these guidelines may be obtained from the Office of Information and Public Affairs, U.S. Consumer Product Safety Commission (CPSC), Washington, D.C. 20207. The CPSC web address is http://www.cpsc.gov. The local U.S. Consumer Product Safety Commission Office is located at 1961 Stout Street, Denver, Colorado 80294. You may contact a Senior Resident Investigator in the Denver office for information. This rule refers to the current edition of the Consumer Product Safety Commission standards, in effect when rules referencing the Commission are referenced, and does not include later amendments to or editions of the standards. The standards may be examined at any State Publications Depository Library.

5. A “critical incident” is a serious life safety or potential life safety incident or concern that poses a danger to the life, health, and/or well-being of a child or children at the facility or of a staff member at the facility.

6. “Department” is the Colorado Department of Human Services.

7. “Facility” is any business or operation established for the purpose of providing child care services that are required to be licensed pursuant to the Child Care Licensing Act, Section 26-6-101 et seq., C.R.S.

8. “Final Agency Action” means the determination made by the State Department, after opportunity for hearing to deny, suspend, revoke, or demote to probationary status a license issued pursuant to the Child Care Licensing Act or an agreement between the Department and the licensee concerning the demotion of such a license to a probationary license.

9. “Governing Body” is the individual, partnership, corporation, or association in whom ultimate authority and legal responsibility are vested for the administration and operation of the child care facility.

10. “Licensing specialist” is the authorized representative of the Colorado Department of Human Services who inspects child care facilities to ensure compliance with licensing requirements and to investigate possible violations of those requirements.

11. “Negative licensing action” means a Final Agency Action resulting in the denial, suspension, or revocation of a license issued pursuant the Child Care Licensing Act or the demotion of such a license to a probationary license.

12. “Serious emotional disturbance” means a diagnosable mental, behavioral, or emotional disorder that is of sufficient duration and has resulted in a functional impairment that substantially interferes with or limits a child’s role or functioning in family, school, or community activities. Serious emotional disturbances do not include developmental disorders, substance-related disorders, or conditions or problems that may be a focus or clinical attention unless they occur with another diagnosable serious emotional disturbance.

7.701.21 Homeless Youth Services - Definitions [Eff. 9/15/12]

"Homeless Youth" is defined at Sections 24-32-723 and 26-5.7-102(2), C.R.S.

"Homeless Youth Shelter" is defined at Sections 26-5.7-102(3) and 26-6-102(5.1), C.R.S.

"Licensed Host Family Home" is a home that is certified by the county department or a child placement agency as meeting the requirements for providing shelter to homeless youth.

7.701.3 APPLICATION PROCESS

7.701.31 Original Application [Rev. eff. 6/1/12]

A. A completed original application accompanied by the appropriate fee and proof of lawful presence in the United States (see Section 3.140.11, 9 CCR 2503-1) must be submitted to the State Department a minimum of 60 days prior to the proposed opening date for the facility.

B. A licensing evaluation will occur only after the department has received the complete application and appropriate fee.

C. If a county or agency establishes and plans to sponsor a Specialized Group Facility, the governing body for the Specialized Group Facility is the applicant for the license. A written plan for the supervision of the Specialized Group Facility shall accompany the application.

7.701.32 Use of Records and Reports of Child Abuse or Neglect for Background and Employment Inquiries [Rev. eff. 1/1/16]

A request to determine whether any owner, applicant, employee, licensee or resident of a licensed facility, or any supervisory employee of a guest care facility, or an exempt family child care home provider and each adult eighteen (18) years of age or older residing in the home (also known as a qualified adult) receiving or applying to receive Colorado Child Care Assistance moneys was found to be responsible in a confirmed report of child abuse or neglect reported to the State Department's automated system shall be directed to and be the responsibility of the State Department.

A. Foster Homes must also obtain a child abuse or neglect records check for each adult eighteen (18) years of age or older living in the home in every state where the adult has resided in the five years immediately preceding the date of application.

B. An inquiry is not necessary regarding out of state employees of a children's resident camp or school-age child care center for a camp or center that is in operation for fewer than ninety (90) calendar days, if the employee changes employment to a different facility that has the same licensing body;

C. The request must be made within ten (10) calendar days of the first day of employment for each employee or facility on the State prescribed form, accompanied by the required fee paid by check or money order (for fee assessment see section 7.000.73).

D. The request must be accompanied by the individual's written authorization to obtain such information from the State automated system, if applicable.

E. The State Department will inform the requesting party in writing of whether the individual has been confirmed to be responsible for an incident of child abuse or neglect.

1. If the result of the inquiry is that the individual has been confirmed as responsible for an incident of child abuse or neglect, the State Department shall provide the requesting party with information regarding the date of the reported incident, the type of abuse or neglect with the severity level, and the county department that confirmed the report.

2. If the result of the inquiry is that the individual has not been confirmed to be responsible for an incident of child abuse or neglect, the State Department shall notify the requesting party of this fact.

F. The information provided by the State Department shall serve only as the basis for further investigation. The director or operator may inform an applicant or employee that the report from the State Department's automated system was a factor in the director or operator's decision with regard to the applicant or employee's employment.

G. Any person who willfully permits or who encourages the release of data or information related to child abuse or neglect contained in the State Department's automated database to persons not permitted access to such information commits a Class 1 misdemeanor and shall be punished as provided in Section 18-1.3-501, C.R.S.

7.701.33 Criminal Record Check [Rev. eff. 1/1/16]

A. Criminal records checks are required under the following circumstances:

1. Each applicant listed below shall submit to the Colorado Bureau of Investigation (CBI) and the Federal Bureau of Investigation (FBI) a complete set of fingerprints taken by a qualified law enforcement agency to obtain any criminal record held by the CBI and FBI, except county departments of human or social services that use fingerprint machines pursuant to Section 19-3-406(1)(c), (2), C.R.S. Payment of the fee for the criminal record check is the responsibility of the individual being checked, identified as follows:

a. Each applicant for an original license for a center, facility, or agency and any adult eighteen (18) years of age or older who resides in the licensed center, facility or agency.

b. Each exempt family child care home provider who provides care for a child and each individual who provides care for a child who is related to the individual (referred collectively in this section as a "qualified provider"), if the child's care is funded in whole or in part with money received on the child's behalf from the publicly funded Colorado Child Care Assistance Program; and, any adult eighteen (18) years of age or older who resides with a qualified provider where the care is provided.

c. Applicants for an original certificate for a foster care home, and any adult eighteen (18) years of age or older who resides in the foster care home.

d. Specialized group home parents and any person working in a twenty-four (24) hour child care facility.

2. Each applicant for an original license for a Neighborhood Youth Organization shall comply with the criminal background check requirements found at Section 26-6-103.7(4), C.R.S.

   The applicant shall ascertain whether the person being investigated has been convicted of felony child abuse as specified in Section 18-6-401, C.R.S., or a felony offense involving unlawful sexual behavior as defined in Section 16-22-102(9), C.R.S. The Neighborhood Youth Organization shall not hire a person as an employee or approve a person as a volunteer after confirmation of such a criminal history.

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

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

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

D. Each owner, employee, who is eighteen (18) years of age or older, and newly hired employee who is eighteen (18) years of age or older, of a facility or agency must submit to CBI a complete set of fingerprints to obtain any criminal record held by the CBI and FBI. Payment of the fee for the criminal record check is the responsibility of the individual being checked or the facility or agency. The results of the criminal record check must be maintained at the home, center, facility, or agency and must be available for review upon request by a licensing specialist.

   1. Employees and volunteers who are transferring from one child care facility to another may have their CBI, but not their FBI, fingerprints transferred if they complete the following process:

      a. New employees must obtain their CBI clearance letter or a photocopy of their processed fingerprint card from their former employer or school district. They must attach it to a new fingerprint card, the top portion of which they have completed with new fingerprints taken. The new fingerprint card must include the new employer's address and the new employer's license I.D. number in the box labeled MNU. “Transfer - Child Care” must be inserted in the “Reason Fingerprinted” block. The CBI clearance letter (or photocopy of the old fingerprint card) and the new fingerprint card must be sent with a $2 money order payable to CBI to: Colorado Bureau of Investigation, 690 Kipling St., Ste. 3000, Denver, CO 80215. Those facilities that have accounts with CBI are not required to send the $2 money order; instead, they shall enter their CBI account number in the OCA block of the new fingerprint card.

      b. New employees who cannot obtain the CBI clearance letter or photocopy of the processed fingerprint card from their former employer must have their fingerprints retaken and follow the process detailed in Section 7.701.33, D, 1, a.

c. When an individual leaves employment, the facility must submit to CBI a completed Notification of Name Removal form to request the removal of the individual's name from their facility license number in the CBI database.

d. School district employees who currently work at a child care facility must have their criminal history report linked to the license number of the child care facility.

2. Licensees must send a copy of an employee's or a resident's criminal record check to his/her new employer upon written request from that employer.

3. Any adult volunteer, working as a staff member to meet the required staff child ratio or staff qualifications, who works 14 days or more in a calendar year, must submit to CBI a complete set of fingerprints taken by a qualified law enforcement agency to obtain a criminal record check. The results of the criminal record check must be maintained at the facility or agency and must be available for inspection by a licensing specialist.

4. Requests for a criminal record check must be submitted to the CBI within 5 working days of the day that the individual begins to work at the facility or agency.

5. For the purposes of these rules, “convicted” means a conviction by a jury or by a court and shall also include a deferred judgment and sentence agreement, a deferred prosecution agreement, a deferred adjudication agreement, an adjudication, and a plea of guilty or *nolo contendere*.

6. Facilities and agencies that hire individuals who have been convicted of any felony, except those listed in a-f below, unlawful sexual behavior, or any misdemeanor, the underlying factual basis of which has been found by the court on record to include an act of domestic violence must inform the department of that hiring within 15 calendar days of receiving knowledge of the conviction.

7. A child care facility shall not employ, or a child placement agency shall not employ or certify, an individual who has been convicted of:

a. Child abuse, as specified in Section 18-6-401, C.R.S.

b. A crime of violence, as defined in Section 18-1.3-406, C.R.S.

c. An offense involving unlawful sexual behavior, as defined in Section 16-22-102(9), C.R.S.

d. A felony, the underlying factual basis of which has been found by the court on the record to include an act of domestic violence, as defined in Section 18-6-800.3, C.R.S.

e. A felony involving physical assault, battery, or a drug-related offense within the five years preceding the date of application for a license or certificate;

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

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

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

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

g. Any offense in any other state, the elements of which are substantially similar to the elements listed in a-f.

8. No license or certificate to operate any agency or facility shall be issued by the Department, a county department of human or social services, or a licensed Child Placement Agency if the person applying for such license or certificate or an affiliate of the applicant, a person employed by the applicant, or a person who resides with the applicant of the facility has been determined to be insane or mentally incompetent by a court of competent jurisdiction and, should a court enter, pursuant to Part 3 or Part 4 of Article 14 of Title 15, C.R.S. or Section 27-65-109(4) or 27-65-127, C.R.S., an order specifically finding that the mental incompetency or insanity is of such degree that the applicant is incapable of operating a family child care home, foster care home, child care center, or child placement agency, the record of such determination and entry of such order being conclusive evidence thereof.

E. Payment of the fee for the FBI check is the responsibility of the individual who is obtaining the check or the facility or agency. Certified foster parent(s) or any person eighteen (18) years of age or older who resides with a certified foster parent must obtain a criminal record check from the FBI regardless of the length of residence in Colorado.

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

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

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

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

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

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

6. Furnished or made any misleading or any false statement or report to the Colorado Department of Human Services; or,

7. Refused to submit to the Colorado Department of Human Services any reports, or refused to make available to the Department any records required by it in making investigation of the facility for licensing purposes; or,

8. Failed or refused to submit to an investigation or inspection by the Colorado Department of Human Services or to admit authorized representatives of the Department at any reasonable time for the purpose of investigation or inspection; or,

9. Failed to provide, maintain, equip, and keep in safe and sanitary condition premises established or used for child care pursuant to standards prescribed by the Colorado Department of Public Health and Environment and the Colorado Department of Human Services or by ordinances of regulations applicable to the location of the foster care home; or,

10. Willfully or deliberately violated any of the provisions of the Child Care Licensing Act; or,

11. Failed to maintain financial resources adequate for the satisfactory care of children served in regard to upkeep of premises and provision for personal care, medical services, clothing, and other essentials in the proper care of children; or,

12. Been charged with the commission of an act of child abuse or an unlawful sexual offense, as specified in Section 18-3-411(1), C.R.S., if:

    a. Such individual has admitted committing the act or offense and the admission is documented or uncontroverted; or,

    b. An Administrative Law Judge finds that such charge is supported by substantial evidence; or,

13. Admitted to an act of child abuse or if substantial evidence is found that the licensee, person employed by the licensee, or person who resides with the licensed in the foster home has committed an act of child abuse, as defined at Section 19-1-103(1), C.R.S.; or,

14. Been the subject of a negative licensing action.

15. Misuse any public funds that are provided to any foster care home or any child placement agency that places, or arranges for placement of a child in foster care for the purposes of providing foster care services, child placement services related to the provision of foster care, or any administrative costs related to the provision of such foster care services or such foster-care-related child placement services.

G. The Department may deny an application for a child care facility license or a child placement agency license if the applicant is a relative affiliate of a licensee, as described in Section 26-6-102(1)(d), C.R.S., of a child care facility or child placement agency, which licensee is the subject of a previous negative licensing action or is the subject of a pending investigation by the Department that may result in a negative licensing action.

H. For all CBI fingerprint-based criminal history record information checks required in this Section 7.701.33, including those confirming a criminal history as well as those confirming no criminal history, the Department will conduct a comparison search on the State Judicial Department's court case management system and the sex offender registry of the Colorado Department of Public Safety. The court case management search shall be based on name, date of birth, and address, in addition to any other available criminal history data that the Department deems appropriate, is used to determine the type of crime(s) for which a person was arrested or convicted and the disposition thereof. The sex offender registry search is used to determine whether the address of a licensee or prospective licensee is listed as belonging to a registered sex offender, except that:

1. County departments of human or social services shall conduct sex offender searches in the CBI sex offender registry and the national sex offender public website operated by the United States Department of Justice prior to certification and annually, and include a copy in the provider record using the following criteria at a minimum:

    a. Known names and addresses of each adult residing in the foster care home or kinship foster care home; and,

    b. Address only, of the foster care home or the kinship foster care home.

2. Child placement agencies shall conduct sex offender searches in the CBI sex offender registry and the national sex offender public website operated by the United States Department of Justice prior to certification and annually, and include copy in the provider record using the following criteria at a minimum:

    a. Known names and addresses of each adult residing in the foster care home or kinship foster care home; and,

    b. Address only of each adult residing in the foster care home or the kinship foster care home.

I. Portability of Fingerprint-Based Criminal Background Checks

1. Where two or more individually licensed facilities are wholly owned, operated, and controlled by a common ownership group or school district, a fingerprint-based criminal history records check completed for one of the licensed facilities of the common ownership group or school district pursuant to this section for whom a criminal records check is required under Section 26-6-107, C.R.S., may satisfy the records check requirement for any other licensed facility under the same common ownership group or school district. A new fingerprint-based criminal history records check shall not be required of such an individual if the common ownership group or school district maintains a central records management system for employees of all its licensed facilities; takes action as required pursuant to Section 26-6-104, C.R.S., when informed of the results of a fingerprint-based criminal history records check that requires action pursuant to Section 26-6-107 C.R.S.; and informs the Department whenever an additional licensed facility comes under or is no longer under its ownership or control.

2. When a licensee is inspected pursuant to the Child Care Licensing Act and records regarding CBI and FBI fingerprint-based criminal background checks, as well as records and reports of child abuse and neglect maintained by the State Department, and the comparison search on the ICON system at the State Judicial system are held at a central records management system, the licensee shall be afforded fourteen (14) calendar days to provide to the State Department documentation necessary to verify that employees at the licensed facility have the required records related to fingerprint-based criminal background checks.

7.701.34 Fire and Health Inspections, Zoning Codes [Rev. eff. 1/1/16]

A. Prior to the original license being issued, following the renovation of the facility that would affect the licensing of the facility and at least every 2 years thereafter, all child care facilities except family child care homes must be inspected and obtain an approving inspection report from the local department of health or the Colorado Department of Public Health and Environment and from the local fire department. These reports must be maintained at the facility and be available for review upon request by a licensing specialist.

B. Prior to the original license being issued, all child care facilities, except for foster homes and specialized group facilities that are providing care for three or fewer children who are determined to have a developmental disability by a community centered board or who have a serious emotional disturbance, must submit to the State Department written approval from the local zoning department approving operation of the facility. The approval must include the address of the child care facility and the ages and numbers of children to be served. The facility must also submit written zoning department approval to the State Department any time there is a change to the license, including moving the facility to another location, increasing the capacity, or adding different ages of children.

C. All child care facilities must operate in compliance with local planning and zoning requirements of the municipality, city and county, or county where the facility is located.

7.701.35 Changes Requiring a New Application [Rev eff. 8/1/14]

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

A. Change of licensee, owner, or governing body.

B. Change in classification of facility or service offered.

C. Change in location of the facility.

7.701.36 Types of Licenses

7.701.361 Permanent License [Emer. Rule eff. 8/7/06; Perm. Rule eff. 10/30/06]

A. A permanent license is granted when the Department is satisfied that the facility or agency is in compliance with the appropriate Department rules and the Child Care Licensing Act. The permanent license remains in effect until surrendered or revoked.

B. Once a permanent license has been issued, the licensee must annually submit to the Department a declaration of compliance with the applicable licensing rules and notice of continuing operation on the form prescribed by the Department, along with the appropriate annual fee as set forth at Section 7.701.4.

C. Failure to submit the annual declaration and fee will constitute a consistent failure to maintain department standards and may result in revocation of the license.

D. At the time the annual declaration of compliance is submitted to the Department, the licensee must also complete a written self- evaluation on the forms prescribed by the Department. The self- evaluation form must be maintained by the facility and be available for review upon request by the licensing specialist.

7.701.362 Time-Limited License [Emer. Rule eff. 8/7/06; Perm. Rule eff. 10/30/06]

A. A time-limited license is granted for specific types of child care facilities or agencies when the Department is satisfied that the facility or agency is in compliance with the appropriate Department rules and the Child Care Licensing Act. The time-limited license will expire on a set date.

B. Once a time-limited license has been issued, the licensee must submit a renewal application prior to the expiration of the time-limited license. This will keep the license in effect until a new time-limited license can be issued.

C. Failure to submit the renewal application prior to the expiration of the time-limited license will result in the expiration of the license and closure of the facility.

7.701.363 Provisional License [Emer. Rule eff. 8/7/06; Perm. Rule eff. 10/30/06]

A. A provisional license or certificate may be issued only for the initial 6- month licensing period.

B. This license permits the facility to operate while it is temporarily unable to conform to all rules upon proof by the applicant that attempts are being made to comply with the rules.

C. If an applicant holds a valid provisional license at the time of application for a permanent license, the provisional license will remain in effect until the application is acted on by the Department.

7.701.364 Probationary License [Emer. Rule eff. 8/7/06; Perm. Rule eff. 10/30/06]

A. A probationary license or certificate may be granted to a licensed facility or agency as provided in Section 26-6-108(2), C.R.S.

B. If the applicant holds a valid probationary license at the time of application for a permanent license, the current license will remain in effect until the application is acted on by the Department.

7.701.365 Multiple Licenses [Emer. Rule eff. 8/7/06; Perm. Rule eff. 10/30/06]

A. If a licensee wishes to assume child care responsibility in more than one classification of care, separate applications, fees, and licensing evaluations are required for each classification. A Family Child Care Home and a Specialized Group Home may only be licensed as one type of classification at any one location address.

B. If a licensee wishes to operate more than one facility of the same classification but at different locations, a separate application, fee, and evaluation are required for each location.

7.701.4 FEES [Rev. eff. 10/1/15]

A. The appropriate application fee outlined in 7.701.4, C, must be submitted to the department with the application for a child care, agency or Neighborhood Youth Organization license at least sixty (60) calendar days prior to the opening date of the facility or the expiration date of the provisional or probationary license. Neighborhood Youth Organizations shall be exempt from this sixty day requirement for the first twelve (12) months following original promulgation of the Neighborhood Youth Organization rules.

B. The appropriate application fee outlined in 7.701.4, C, must be submitted to the Department annually, at least sixty (60) calendar days prior to the anniversary date of the license, along with a completed continuation declaration.

C. Following is a schedule of original and annual fees for all types of child care facilities and agencies, and Neighborhood Youth Organizations:

Family Child Care Homes (1-8 children)	
Original/Continuation	$27
Large Family Child Care Homes (7-12 children)	
Original/Continuation	$40
Experienced Family Child Care Homes	
Original Application	$43
Continuation	$43

Child Care Centers, Preschools, School Age Child Care and Resident Camps	
Original/Continuation (5-20 children)	$ 85
Original/Continuation (21-50 children)	$134
Original/Continuation (51-100 children)	$195
Original/Continuation (101-150 children)	$299
Original/Continuation (151-250 children)	$414
Original/Continuation (251 or more children)	$585

Day Treatment Center Original/Continuation	$49

Specialized Group Facility Original/Continuation	$121

Child Placement Agencies Licensed for Foster Care	
Original Application	$627
Continuation (0-5 homes)	$319
Continuation (6-15 homes)	$407
Continuation (16-30 homes)	$506
Continuation (31-50 homes)	$594
Continuation (51 or more homes)	$693

Child Placement Agencies Licensed for Adoption	
Original Application	$479
Continuation (0-5 finalized adoptions)	$242
Continuation (6-11 finalized adoptions)	$270
Continuation (12-17 finalized adoptions)	$286
Continuation (18-23 finalized adoptions)	$319
Continuation (24 or more finalized adoptions)	$330

A Child Placement Agency licensed for both foster care and adoptions will pay only one fee - either the foster care fee or the adoption fee, whichever is greater. The annual report required by regulation 7.710.72, B, must be attached.

Homeless Youth Shelter Original/Continuation	$330

Neighborhood Youth Organization Original Application/Continuation	$77

Residential Child Care Facility	
Original Application	$792
Continuation (under 12 children)	$242
Continuation (13-25 children)	$396
Continuation (26-50 children)	$550
Continuation (51 or more children)	$715
RCCF/RTC's pay one continuation fee per year based on the total licensed capacity of the facility.	

Secure Residential Treatment Center Original/Continuation	$924

Changes to Licenses (Capacity and/or Number of Children) Family Child Care Homes, Child Care Centers, School Aged Child Care, Day Treatment Facilities, Children's Resident Camps, Neighborhood Youth Organization	$49
Duplicate Licenses Family Child Care Homes, Child Care Centers, School Aged Child Care, Day Treatment Facilities, Children's Resident Camps, Neighborhood Youth Organization	$37
Changes to Licenses (Capacity and/or Number of Children) Child Placement Agencies, Group Centers, Residential Child Care Facility, Secure Residential Treatment Center, Homeless Youth Center, International Adoption Agencies. Specialized Group Facility	$44
Duplicate Licenses Child Placement Agencies, Group Centers, Residential Child Care Facility, Secure Residential Treatment Center, Homeless Youth Center, International Adoption Agencies, Specialized Group Facility	$33

Changes to Licensees of Family Child Care Homes, Large Family Child Care Homes, and Experienced Family Child Care Homes will never exceed the cost of the original or continuation fee.

D. Following is a schedule of fees for the original application and annual fee required for the temporary and full accreditation of international adoption agencies.

International Adoption Agencies	
Original Application for Full Accreditation for Agencies that Complete 100 or More Intercountry Adoptions in a Calendar Year	$4,000
Original Application for Full Accreditation for Agencies that Complete 50-99 Intercountry Adoptions in a Calendar Year	$3,000
Original Application for Full Accreditation for Agencies that Complete 49 or Fewer Intercountry Adoptions in a Calendar Year	$2,000
Annual Fee for Agencies with Full Accreditation	$2,000
Original Application for Full Accreditation - Agencies with Colorado and Out-of-State Offices Additional Fee	$2,000
Original Application for Temporary Accreditation - Agencies with Colorado and Out-of-State Offices - Additional Fee	$500

E. International adoption agencies with out-of-state offices will be required to reimburse the State for actual and necessary charges involved with travel to out-of-state offices.

F. The appropriate administrative and criminal background check fees (refer to Section 7.701.33) paid with certified funds (i.e., money order or cashier's check) outlined in Section 3.905.1, A (9 CCR 2503-1) must be submitted to the State Department along with the completed background check packet upon renewal or signing a new fiscal agreement with the county to receive Colorado Child Care Assistance funds.

CCCAP – Exempt Family Child Care Homes	
Administration Fee for SFY2007 Initial Fingerprint Packet	$9.00
Administrative Fee for Subsequent Year Initial Fingerprint Packet	$11.00

7.701.5 ADMINISTRATION

7.701.51 Governing Body

A. The governing body must be identified by its legal name on the original application and annual declaration. The names and addresses of individuals who hold primary financial control and officers of the governing body must be fully disclosed to the Department.

B. The governing body must demonstrate to the Department, upon request, that there is sufficient financial support to operate and maintain the facility in accordance with all rules in Section 7.701, the rules regulating the specific type of facility, and the goals and objectives of the facility.

7.701.52 Reports

A. Within 24 hours, excluding weekends and holidays, of the occurrence of a critical incident at the facility or within 24 hours of a child's return to the facility if the child was on authorized or unauthorized leave from the facility, the facility or child placement agency must report in writing to the licensing or certifying authority the following critical incidents involving a child in the care of the facility or a staff member on duty:

1. The death of a child or staff member as a result of an accident, suicide, assault, or any natural cause while at the facility, or while on authorized or unauthorized leave from the facility.

2. An injury to a child or staff member that requires emergency medical attention by a health care professional or admission to a hospital.

3. A mandatory reportable illness, as required by the Colorado Department of Public Health and Environment, of a child or staff member that requires emergency medical attention by a health care professional or admission to a hospital.

4. Any allegation of physical, sexual, or emotional abuse or neglect to a child that results in reporting to a law enforcement or social services agency.

5. Any fire that is responded to by a local fire department.

6. Any major threat to the security of a facility including, but not limited to, a threat to kidnap a child, riots, bomb threats, hostage situations, use of a weapon, or drive by shootings.

7. A drug or alcohol related incident involving a staff member or a child that requires outside medical or emergency response.

8. An assault, as defined by Sections 18-3-201 through 18-3-204, C.R.S., by a child upon a child, a child upon a staff member, or a staff member upon a child which results in a report to law enforcement.

9. A suicide attempt by a child at the facility which requires emergency intervention.

10. Felony theft or destruction of property by a child while in placement at the facility for which law enforcement is notified.

11. Any police or sheriff contact with the facility for a crime committed by a resident while in placement at the facility.

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

B. The following items must be reported in writing to the department within 10 working days, unless otherwise noted:

1. Any legal action against a facility, agency, owner, operator, or governing body that relates to or may impact the care or placement of children.

2. Change of director of facility or agency.

3. Proposed change in the number, sex, or age of children for whom the facility is licensed that differs from that authorized by the license.

4. Change of address of child placement agency.

5. Changes in the physical facility or use of rooms for child care at a facility.

6. Closure of the facility or agency.

7. Change of name of the facility or agency.

8. Change of residents in the facility, not to include those residents placed in the facility by a county department or a child placement agency.

7.701.53 Reporting of Child Abuse

A. A child care facility must require each staff member of the facility to read and sign a statement clearly defining child abuse and neglect pursuant to state law and outlining the staff member's personal responsibility to report all incidents of child abuse or neglect according to state law.

B. Any caregiver or staff member in a child care facility who has reasonable cause to know or suspect that a child has been subjected to abuse or neglect or who has observed the child being subjected to circumstances or conditions that would reasonably result in abuse or neglect must immediately report or cause a report to be made of such fact to the county department of social services or local law enforcement agency.

C. If the suspected child abuse occurred at the child care facility, the report of suspected child abuse must be made to the county department of social services, police department, or other law enforcement agency in the community or county in which the child care facility is located.

D. If the suspected child abuse did not occur at the child care facility, the report of suspected child abuse must be made to the county department of social services in the county in which the child resides or to the local law enforcement agency in the community in which the incident is believed to have occurred.

E. At the time of admission the facility must give the child's parent or guardian information that explains how to report suspected child abuse or child neglect.

7.701.54 Investigation of Child Abuse

A. Staff members of the county department of social services or a law enforcement agency that investigates an allegation of child abuse must be given the right to interview staff and children in care and to obtain names, addresses, and telephone numbers of parents of children enrolled at the child care facility.

B. Any report made to the law enforcement authorities or a county department of social services of an allegation of abuse of any child at the child care facility will result in the temporary suspension or reassignment of duties of the alleged perpetrator to remove the risk of harm to the child/children if there is reasonable cause to believe that the life or health of the victim or other children at the facility is in imminent danger due to continued contact between the alleged perpetrator and the child/children at the facility. Such suspension or reassignment of duties will remain in effect pending the outcome of the investigation by the appropriate authorities.

7.701.55 Reporting of Licensing Complaints

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

7.701.56 Posting Licensing Information [Rev. eff. 1/1/16]

A. At all times during the operating hours of the facility, except for foster care homes, the facility/agency shall post the current child care license in a prominent and conspicuous location easily observable by those entering the child care facility or agency. For foster care homes, the certificate shall be available for review/upon request.

B. At all times during the operating hours of a family child care home, child care center, school-age child care center, or children's resident camp, the facility shall post its most recent licensing inspection report or a notice as to where the report may be reviewed at the facility by the parent or legal guardian of a child or their designee.

C. At all times during the operating hours of a child care facility, except for foster care homes and child placement agencies, the facility shall post in a prominent and conspicuous location information regarding the procedures for filing a complaint with the Colorado Department of Human Services, Division of Child Care, including the telephone number and mailing address. For foster care homes and child placement agencies, information for filing a complaint shall be made available upon request.

D. The facility must post in every room of the child care facility, excluding bedrooms and living areas, the license capacity of the room and the staff-to-child ratio required by regulation to be maintained for the age of children cared for in the room.

7.701.6 CONFIDENTIALITY OF RECORDS

A. The records concerning the licensing of facilities and agencies are open to the public except as provided below.

B. Anyone wishing to review a record must make a written request to the department.

C. The following documents are confidential and not available for review:

1. Information identifying children or their families.

2. Scholastic records, health reports, social or psychological reports. These are available only to the person in interest.

3. Personal references requested by the department.

4. Reports and records received from other agencies, including police and child protection investigation reports.

7.701.7 PARENTAL ACCESSIBILITY

A. During hours of operation, a facility must allow access to parents and guardians having legal custody of a child in care to those areas of the facility that are licensed for child care.

B. During the hours of operation, the facility's most recent licensing, fire department, and health department inspection reports must be accessible to parents and legal guardians of children in care or their designee and to parents and legal guardians considering placing their children in care at the facility.

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

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

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

7.701.9 GENERAL HEALTH RULES [Eff. 6/1/12]

7.701.91 Smoking and Tobacco Products [Eff. 6/1/12]

Pursuant to 26-6-106(2)(e), C.R.S., 25-14-103.5, C.R.S., and 18-13-121, C.R.S., tobacco and nicotine products are prohibited by law from use in and around licensed child care facilities.

A. Smoking and tobacco product use is prohibited at all times while transporting children on field trips and excursions.

B. Smoking and tobacco product use is not prohibited in Family Child Care Homes during non-business hours.

C. Foster parents are exempt from this rule when no children are in placement.

7.701.100 Emergency and Disaster Preparedness for Child Care Centers, Family Child Care Homes, Day Treatment Centers, School-Age Programs, and Children's Resident Camps [Eff. 4/1/15]

A. Evacuation, Shelter in Place, Lockdown, and Active Shooter on Premises Plans for Children in Care

All child care providers must have a written plan for evacuating and safely moving children to an alternate site, as well as lockdown, shelter in place, and active shooter on premises. The plan must include provisions for multiple types of hazards, such as floods, fires, tornados, and local shootings. All employees of a child care provider must be trained in emergencies and disaster preparedness.

1 "Lockdown drill" means a drill in which the occupants of a building are restricted to the interior of the building and the building is secured.

2. "Shelter-in-place drill" means a drill in which the occupants of a building seek shelter in the building from an external threat.

3. "Active shooter on premises drill" means a drill to address an individual actively engaged in killing or attempting to kill people in a confined space or other populated area.

B. Plan For Reuniting Families After an Emergency or Disaster

All child care providers must have a written plan for emergency notification of parents and reunification of families following an emergency or disaster.

C. A Plan for Children with Disabilities and Those with Access and Functional Needs

All child care providers must have a written plan that accounts for children with disabilities and those with access and functional needs. The plan must include a specific requirement indicating how all children with special needs will be included in the emergency plan.

D. Fire, Natural Disaster, and Emergency Drills

1. Each staff member of the facility must be trained in fire safety and the use of available fire extinguishers and fire alarms.

2. Drills must be held quarterly so that all occupants are familiar with the drill procedure and their conduct during a drill is a matter of established routine. Fire drills must be consistent with local fire department procedures. A record of fire drills held over the past twelve (12) months must be maintained by the center, including date and time of drill, number of adults and children participating, and the amount of time taken to evacuate.

3. Drills must be held at unexpected times and under varying conditions to simulate the conditions of an actual fire.

4. Drills must emphasize orderly evacuation under proper discipline rather than speed. No running or horseplay should be permitted.

5. Drills must include suitable procedures for ensuring that all persons in the building, or all persons subject to the drill, actually participate.

6. Fire alarm equipment must be used regularly in the conduct of fire exit drills. Hand bells or other alarm emanating devices may be used in lieu of fire alarm equipment if use of fire alarm equipment is not feasible including, but not limited to, facilities operating in buildings where multiple unrelated tenants share a common fire alarm system.

7. If appropriate to the location of the center, forest fire, tornado and/or flood drills must be held often enough that all occupants are familiar with the drill procedure and their conduct during a drill is a matter of established routine. A record of drills held over the past twelve (12) months must be maintained by the center.

8. For children's resident camps, at least one fire drill must be held within twenty-four (24) hours of the commencement of each camp session. The dates of the fire drills must be recorded in the camp office.

7.701.200 THE REASONABLE AND PRUDENT PARENT STANDARD REQUIREMENTS FOR FACILITIES PROVIDING TWENTY-FOUR (24) HOUR OUT-OF-HOME CARE TO APPROVE ACTIVITIES FOR A CHILD OR YOUTH IN FOSTER CARE [Eff. 11/1/15]

Children and youth in foster care are entitled to participate in age or developmentally appropriate extracurricular, enrichment, cultural, and social activities as part of their well-being needs.

Providers shall use a "reasonable and prudent parent standard" when determining whether to allow a child or youth in foster care, under the responsibility of the county or in non-secure residential settings under the Division of Youth Corrections (DYC), to participate in such activities following the criteria in A and B:

A. For an activity to be approved consistent with the reasonable and prudent parent standard, the activity must:

1. Maintain the health, safety, and best interests of each child or youth;

2. Encourage his/her emotional and developmental growth;

3. Be age or developmentally appropriate; and,

4. Is otherwise appropriate for the provider to approve.

B. When applying the reasonable and prudent parent standard and prior to approval of the activity, the provider shall take reasonable steps to obtain or determine:

1. Adequate information about the child or youth, including the youth's particular religious, cultural, social, or behavioral attributes and preferences;

2. Behavioral and/or mental health stability of the child or youth;

3. The age or developmental appropriateness of the activity; and,

4. Whether the risk of reasonably foreseeable harm involved in the activity is at an acceptable level.

C. The responsible county department of human or social services or DYC shall receive the same state training in applying the reasonable and prudent parent standard, and shall receive ongoing training by their respective certifying or sponsoring agencies or governing body, as needed.

D. At least one trained (1) staff or administrator in a specialized group facility or Residential Child Care Facility (RCCF) shall be designated as authorized to apply the reasonable and prudent parent standard to decisions involving the participation of a child or youth in extracurricular, enrichment, cultural, or social activities.

E. The rationale used to authorize an activity for a child or youth shall be clearly documented in the facility records and provided in a timely manner to the county department of human or social services or DYC using the contracted, written reporting format.

1. The facility shall consult with and obtain a current copy of the policy from the responsible county department of human or social services or DYC regarding activities that are considered appropriate for the facility to approve.

   The responsible county department of human or social services or DYC may restrict certain activities based upon the documented exceptional needs and circumstances of a child or youth in foster care, which impact his/her unique safety needs.

2. The wishes of the parents/legal custodian shall be considered, including cultural implications, whenever practical.

3. The facility may consult with the responsible agency for guidance about individual cases.

F. Providers shall not incur liability to the State Department or to the county department of human or social services because of an extracurricular, enrichment, cultural, or social activity approved by the provider if the provider demonstrates compliance with the reasonable and prudent parent standard. In a child welfare investigation arising out of such an activity approved by the provider, the facility shall not be founded for institutional neglect if the provider demonstrates compliance with the reasonable and prudent parent standard.

7.702 RULES REGULATING CHILD CARE CENTERS (LESS THAN 24-HOUR CARE) [Rev. eff. 2/1/16]

All child care centers must comply with the current "General Rules for Child Care Facilities" 7.701; "Rules Regulating Child Care Centers (Less Than 24-Hour Care)" 7.702; "Rules Regulating Special Activities" 7.719; "Rules and Regulations Governing the Sanitation of Child Care Centers in the State of Colorado" 25-1.5-101(1)(h), C.R.S.; and the USDA CACFP Part 266.20(1.5).

7.702.1 DEFINITIONS [Rev. eff. 2/1/16]

A. Child care centers, less than 24-hour care (referred to as "centers"), provide comprehensive care for children when the parents or guardians are employed or otherwise unavailable to care for the children. Child care centers may operate twenty four (24) hours a day, but the children are cared for at the center fewer than twenty four (24) hours a day.

B. Child care centers, less than 24-hour programs of care, include the following types of facilities:

1. A "large child care center" provides care for 16 or more children between the ages of 2 1/2 and 18 years.

2. A "small child care center" provides care for 5 through 15 children between the ages of 2 and 18 years.

3. An "infant program" provides care for children between the ages of 6 weeks and 18 months.

4. A "toddler program" provides care for children between the ages of 12 months (when walking independently or with a health care provider's statement indicating developmental appropriateness of placement in a toddler program) and 36 months.

5. "Preschool" is a part-day child care program for 5 or more children between the ages of 2 1/2 and 7 years.

6. "Kindergarten" provides a program for children the year before they enter the first grade.

7. "Full day program" enrolls children for five (5) or more hours per day.

8. "Part day program" enrolls children for a maximum of up to five (5) hours per day. Individual children shall not attend more than one (1) five (5) hour session per day.

9. A "drop-in child care center" provides occasional care for 40 or fewer children between the ages of 12 months and 13 years of age for short periods of time not to exceed six (6) hours in any 24-hour period of time or fifteen (15) hours in any seven (7) day period of time.

10. "Staff": all references to staff or staff positions includes paid staff and equally qualified volunteers under Section 7.702.44, E.

7.702.2 ADMINISTRATION [Rev. eff. 2/1/16]

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

A. The governing body must appoint a director who will be responsible to the governing body and who will be delegated the authority and responsibility for the operation of the center according to its defined purpose and policies.

B. The governing body must formulate the purpose and policies to be followed by the center. It must have a regular planned review of such purpose and policies to determine that the center is in compliance with licensing rules.

C. The governing body is responsible for providing necessary facilities, adequate financing, qualified personnel, services, and program functions for the safety and well-being of children in accordance with these rules.

D. Any center having a director assigned to a classroom shall have qualified and adequate staff, allowing the director or qualified staff the ability to attend to the duties of a director as they arise.

E. The director of the center is responsible for administering the center in accordance with licensing rules. The director must plan and supervise the child development program, plan for or participate in selection of staff, plan for orientation and staff development, supervise and coordinate staff activities, evaluate staff performance, and participate in the program activities.

F. The director of a part-day preschool program operated by an accredited public school system is responsible for administering the center in accordance with licensing rules and supervising the early childhood program. The director or staff designated by the governing body must plan for or participate in orientation and staff development, supervise or coordinate staff activities, participate in the evaluation of staff performance, and participate in program activities.

7.702.3 POLICIES AND PROCEDURES [Rev. eff. 2/1/16]

7.702.31 Statement of Policies and Procedures [Rev. eff. 2/1/16]

At the time of enrollment, and upon amendment, the center must give the parent(s)/guardian(s) the center's policies and procedures, and provide the opportunity to ask questions. By signing the policies and procedures document, the parent(s)/guardian(s) agree to follow, accept the conditions of, and give authorization and approval for the activities described in the policies and procedures. Written copies must be available either electronically or in hard copy. The provider must obtain a signed document stating that the parent(s)/guardian(s) have received the policies and procedures. Policies must include the following:

A. The center's purpose and its philosophy on child care.

B. The ages of children accepted.

C. The hours the center is open, specific hours during which special programs are offered, holidays when the center is closed.

D. The procedure regarding inclement and excessively hot weather.

E. The procedure concerning admission and registration of children.

F. An itemized fee schedule.

G. The procedure for identifying where children are at all times.

H. The center's procedure on guidance, positive instruction, supporting positive behavior, discipline and consequences, including how the center will:

1. Cultivate positive child, staff and family relationships.

2. Create and maintain a socially and emotionally respectful early learning and care environment.

3. Implement teaching strategies supporting positive behavior, pro-social peer interaction, and overall social and emotional competence in young children.

4. Provide individualized social and emotional intervention supports for children who need them, including methods for understanding child behavior; and developing, adopting and implementing a team-based positive behavior support plan with the intent to reduce challenging behavior and prevent suspensions and expulsions.

5. Access an early childhood mental health consultant or other specialist as needed.

I. The procedure, including notification of parents or guardians, for handling children's illnesses, accidents, and injuries.

J. The procedures for responding to emergencies such as lost children, tornadoes, and fires.

K. The procedure for transporting children, if applicable, including transportation arrangements and parental permission for excursions and related activities.

L. The procedure governing field trips, television and video viewing, and special activities, including staff responsibility for the supervision of children.

M. The procedure on children's safety related to riding in a vehicle, seating, supervision, and emergency procedures on the road.

N. The procedure for releasing children from the center only to persons for whom the center has written authorization.

O. The procedures followed when a child is picked up from the center after the center is closed or not picked up at all, and to ensure that all children are picked up before the staff leave for the day.

P. The procedure for caring for children who arrive late to the center and their class/group is away from the center on a field trip or excursion.

Q. The procedure for storing and administering children's medicines and delegation of medication administration in compliance with Section 12-38-132, C.R.S., of the “Nurse Practice Act”.

R. The procedure concerning children's personal belongings and money.

S. Meals and snacks.

T. Diapering and toilet training.

U. Visitors to the center.

V. Parent and staff conferences to inform the parents or guardians of the child's behavior, progress, and social and physical needs.

W. The procedure for filing a complaint about child care (see 7.701.5, General Rules for Child Care Facilities).

X. Reporting of child abuse (see 7.701.5, General Rules for Child Care Facilities).

Y. Notification when child care service is withdrawn and when parents or guardians withdraw their children from the center.

Z. How decisions are made and what steps are taken prior to the suspension, expulsion or request to parents or guardians to withdraw a child from care due to concerns about the child's behavioral issues. These procedures must be consistent with the center's policy on guidance, positive instruction, discipline and consequences, and include documentation of the steps taken to understand and respond to challenging behavior.

7.702.32 Communication, Emergency, and Security Procedures [Rev. eff. 2/1/16]

A. The center must notify the parents or guardians in writing of significant changes in its services, policies, or procedures so that they can decide whether the center continues to meet the needs of the child.

B. For security purposes, a sign-in/sign-out sheet or other mechanism for parents and guardians must be maintained daily by the center. It must include, for each child in care, the date, the child's name, the time when the child arrived at and left the center, and the parent or guardian's signature or other identifier.

C. The center must have a working telephone with the number available to the public. Emergency telephone numbers of the following must be posted near the telephone: a 911 notice, where 911 is available, or rescue unit if 911 isn't available; a hospital or emergency medical clinic; the local fire, police, and health departments; and Rocky Mountain Poison Control. The telephone must be available to staff at all times that the center is in operation.

D. The center must be able to provide emergency transportation to a health care facility at all times.

E. The director of the center or the director's delegated substitute must have a means for determining at all times who is present at the center.

F. A written policy regarding visitors to the center must be posted and a record maintained daily by the center that includes at a minimum the visitor's name and address and the purpose of the visit. At least one piece of identification must be inspected for individuals who are strangers to personnel at the center.

G. The center must release the child only to the adult(s) for whom written authorization has been given and is maintained in the child's record (see 7.702.91). In an emergency, the child may also be released to an adult for whom the child's parent or guardian has given verbal authorization. If the staff member who releases the child does not know the adult, identification must be required to assure that the adult is authorized to pick up the child.

H. The center must have a procedure for dealing with individuals not authorized by the parent or guardian of a child who attempts to have the child released to them.

I. The center must have a written emergency procedure to report communicable illnesses to the local health department pursuant to regulations of the Colorado Department of Public Health and Environment.

J. The center must have a written procedure for closing the center at the end of the day to ensure that all children are picked up.

7.702.33 Personnel Policies, Orientation, and Staff Development [Rev. eff. 2/1/16]

A. The duties and responsibilities of each staff position and the lines of authority and responsibility within the center must be in writing.

B. At the time of employment, staff members must be informed of their duties and assigned a supervisor.

C. Prior to working with children, each staff member must read and be instructed about the policies and procedures of the center, including those related to hygiene, sanitation, food preparation practices, proper supervision of children, and reporting of child abuse. Staff members must sign a statement indicating that they have read and understand the center's policies and procedures.

D. Staff hired prior to September 29, 2016, must complete a Department approved pre-service training by September 30, 2016. All staff hired after September 30, 2016, must complete a Department approved pre-service training prior to working with children. The training must include:

1. Building and physical premises safety, including identification of and protection from hazards that can cause bodily injury such as electrical hazards, bodies of water, and vehicular traffic.

2. Handling and storage of hazardous materials and the appropriate disposal of bio contaminants.

E. Each staff member working with infants less than twelve (12) months old must complete a Department approved safe sleep training by December 31, 2015. Each staff member hired after December 31, 2015, must complete a department approved safe sleep training prior to working with infants less than twelve (12) months old.

F. Each staff member working with children less than three (3) years of age must complete a Department approved prevention of shaken baby/abusive head trauma training by September 30, 2016. Each staff member hired after September 30, 2016, must complete a Department approved abusive head trauma training prior to working with children less than three (3) years of age.

G. All staff must complete a Department approved standard precautions training that meets current Occupational Safety and Health Administration (OSHA) requirements prior to working with children. This training must be renewed annually and counts towards ongoing training requirements.

H. Within thirty (30) calendar days of employment and annually, all employees and regular volunteers must be trained using a Department approved training about child abuse prevention, including common symptoms and signs of child abuse.

I. Within thirty (30) calendar days of employment and annually all employees and regular volunteers must be trained using a Department approved training on how to report, where to report and when to report suspected or known child abuse or neglect.

J. The child care center must ensure that all staff are familiar with the licensing rules governing child care centers within thirty (30) calendar days of employment at the center.

K. All staff who work with children must complete a minimum of fifteen (15) clock hours of training each year beginning with the start date of the employee. At least three (3) clock hours per year must be in the focus of social emotional development.

L. Ongoing training and courses shall demonstrate a direct connection to one or more of the following competency areas:

1. Child growth and development, and learning or courses that align with the competency domains of child growth and development;

2. Child observation and assessment;

3. Family and community partnership;

4. Guidance;

5. Health, safety and nutrition;

6. Professional development and leadership;

7. Program planning and development;

8. Teaching practices:

   a. Each one (1) semester hour course with a direct connection to the competency area listed in Section 7.702.33, l, 1-8, taken at a regionally accredited college or university shall count as fifteen (15) clock hours of ongoing training.

   b. Training hours completed can only be counted during the year taken and cannot be carried over.

M. To be counted for ongoing training, the training certificate must have documentation that includes:

1. The title of the training; and,

2. The competency domain; and,

3. The date and clock hours of the training; and,

4. The name or signature, or other approved method of verifying the identity of trainer or entity; and,

5. Expiration of training if applicable; and,

6. Connection to social emotional focus if applicable.

N. Within thirty (30) calendar days of employment and annually, all staff responsible for collection, review and maintenance of the child immunizations records must complete the Colorado Department of Public Health and Environment (CDPHE) immunization course.

O. If volunteers are used by the center, there must be a clearly established policy in regard to their function, orientation, and supervision. See also Section 7.702.44.

P. Within thirty (30) calendar days of the last day of employment, staff members must be provided a letter verifying their experience at the center. The letter must contain the center's address, phone number and license number, the employee's start and end date and the total number of hours worked with children. Hours worked with infants and toddlers must be documented separately from hours worked with other age groups. The letter must be signed by a director, owner or human resources agent of the center or governing body.

7.702.4 PERSONNEL [Rev. eff. 2/1/16]

7.702.41 General Requirements for All Personnel [Rev. eff. 2/1/16]

A. All personnel at the center must demonstrate knowledgeable decision-making, judgment, and concern for the proper care and well-being of children.

B. Staff, substitutes, or volunteers must not consume or be under the influence of any substance that impairs their ability to care for children.

C. Illegal drugs, drug paraphernalia, marijuana and marijuana infused products, and alcohol must never be present on the premises of the center during operating hours.

D. When caring for children, staff must refrain from personal use of electronics including, but not limited to, cell phones and portable electronic devices.

E. The center must determine if any staff person who works at the center has ever been convicted of a crime as found at Section 7.701, D, 5 or 6, of the General Rules for Child Care Facilities.

F. A criminal record check request must be submitted to the Colorado Bureau of Investigation within five (5) business days that an individual is employed by the center. The personnel file of each staff member of the center must contain clearance or arrest report from the Colorado Bureau of Investigation resulting from the staff member's criminal record check. The requirement for a criminal record check is found in Section 7.701.33 of the General Rules for Child Care Facilities.

G. A request for a review of the State Department's automated system must be made within ten (10) business days of each staff member's first day of employment. The method for making the request is found in Section 7.701.32 of the General Rules for Child Care Facilities.

H. Staff members must be current for all immunizations routinely recommended for adults by their health care provider.

I. All staff members must submit to the center a medical statement, signed and dated by a licensed physician or other health care professional, verifying that they are in good mental, physical, and emotional health appropriate for the position for which they have been hired. This statement must be dated no more than 6 months prior to employment or within thirty (30) calendar days after the date of employment. This statement must indicate when subsequent medical statements are required.

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

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

7.702.42 Director Qualifications - Large Child Care Center [Rev. eff. 2/1/16]

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

1. A Bachelor degree in early childhood education from a regionally accredited Colorado college or university; or,

2. A current early childhood professional Credential Level IV Version 2.0 as determined by the Colorado Department of Education; or,

3. Completion of all of the following three (3) semester hour courses from a regionally accredited college or university, at either a two year, four year or graduate level, in each of the following subject or content areas:

    a. Introduction to early childhood professions;

    b. Introduction to early childhood lab techniques;

    c. Early childhood guidance strategies for children;

    d. Early childhood health, nutrition, and safety;

    e. Administration of early childhood care and education programs;

    f. Administration: human relations for early childhood professions or introduction to business;

    g. Early childhood curriculum development;

    h. Early childhood growth and development.

    i. The exceptional child; and,

    j. Infant/toddler theory and practice; or the Department approved expanding quality infant/toddler training; or,

4. Completion of a course of training approved by the Department that includes course content listed at Section 7.702.42, A, 3, a-j, and experience listed at Section 7.702.42, B.

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

1. Persons with Bachelor’s or Master’s degree with a major emphasis in child development, early childhood education, early childhood special education, or an early childhood professional Credential Level IV Version 2.0 as determined by the Colorado Department of Education; no additional experience is required.

2. Persons with a 2-year college degree in early childhood education must have twelve (12) months (1,820 hours) of verified experience working directly with children in a child development program.

3. Persons with a Bachelor's degree and completion of courses specified in Sections 7.702.42, A, 3, a-j, must have twelve (12) months (1,820 hours) of verified experience working directly with children in a child development program.

4. Persons who have no degree but have completed the thirty (30) semester hours specified in Section 7.702.42, A, 3, a-j, must have twenty-four (24) months (3,640 hours) of verified experience working directly with children in a child development program.

5. Verified experience acquired in a licensed Colorado family child care home or school-age child care center may count for up to half of the required experience for director qualifications. To have Colorado family child care home experience considered, the applicant must be or have been the licensee. The other half of the required experience must be working directly with children in a child development program.

6. Experience with five (5) year olds must be verified as follows:

   a. If experience caring for five year old children occurs in a child care center classroom, the hours worked shall be counted as preschool experience;

   b. If experience caring for five year old children occurs in an elementary school program, the hours worked shall be counted as school-age experience.

C. Renewal of Large Center Director Qualifications Letter

1. All individuals holding a valid approval letter for director qualifications from the Department of Human Services, who have not completed the required courses in each of the following subject or content areas, must take one course every two (2) years from a regionally accredited college or university at a two year, four year or graduate level. Official transcripts listing completion of one (1) or more of the five (5) courses shall be submitted to the Colorado Department of Human Services within thirty calendar days of completing each course until all five (5) courses have been completed in:

   a. Early childhood guidance strategies;

   b. Early childhood health, nutrition and safety or child nutrition;

   c. The exceptional child;

   d. Infant/toddler theory and practice; or expanding quality in infant and toddler training;

   e. Administration: human relations for early childhood professions.

2. Except individuals holding an early childhood professional Credential Level IV Version 2.0 as determined by the Colorado Department of Education, directors meeting all large center director requirements in Section 7.702.42, A, in centers operating more than six (6) hours a day must complete a three (3) semester credit hour course from a regionally accredited college or university every five (5) years in a subject related to the operation of a center and must be able to demonstrate the relationship of the course taken to the operation of the center.

3. The renewal application and the official transcripts must be submitted to the Department. The renewed director letter shall expire five (5) years from approval of the renewal application.

D. Revocation of Large Center Director Letter

1. Large center directors must have a current director qualifications letter issued by the Department prior to working as the director of a large center.

2. Director letters must be renewed prior to the expiration date or the letter becomes void; thus, this person no longer qualifies as a large center director.

3. At the time of renewal for a director letter, education and experience must be verified to ensure qualifications are met.

4. Persons may be denied an original or renewal of a director letter; a director letter may be revoked if substantial evidence has been found that the director is responsible for one or more of the following at any child care facility, including, but not limited to:

    a. Committing fraud;

    b. Responsible for egregious or repetitive grounds for negative licensing actions;

    c. Providing false information;

    d. Providing false transcripts for self or staff;

    e. Providing false letters of experience for self or staff.

5. Persons who have had a director letter revoked or denied for the reasons listed in Section 7.702.42, D, 4, a-e, may submit a new application for consideration after a period of two (2) years from the date of denial or revocation.

6. A person issued a new director letter after a denial or revocation shall receive a provisional letter for no less than nine (9) months. After the provisional period has been completed, a new application may be submitted for consideration of a five (5) year time limited letter.

7. Persons whose director letter has been denied or revoked for the reasons listed in Section 7.702.42, D, 4, a-e, may file an appeal in the same manner as a request for waiver, as specified in Section 7.701.13 “General Rules for Child Care Facilities”.

E. Substitute Director Requirements

1. At all times, every large child care center must have a substitute director that meets all of the requirements for director as listed at Section 7.702.42, A and B. When the director of the large child care center cannot be present sixty percent (60%) of any day the center is in operation, the equally qualified substitute director must substitute for the director. In an emergency situation, when the equally qualified director substitute cannot be present, an individual that does not meet all of the director educational and experience requirements may substitute for the director for a maximum of two (2) weeks per calendar year if they meet one or more of the following requirements:

    a. At least one year of experience as an early childhood teacher at the center.

    b. A Bachelor of Arts or Bachelor of Science in the human services field.

    c. Qualification as an early childhood teacher and completion of at least half of the required coursework for director qualifications including the two (2) administration classes; administration of early childhood care and education programs and administration; human relations for early childhood professions.

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

   a. At least one (1) year of experience as a qualified early childhood teacher at the drop-in child care center;

   b. Eighteen (18) months of experience as a qualified early childhood teacher with children less than twelve (12) years of age and at least six (6) months experience at the drop-in child care center;

   c. A Bachelor of Arts or Bachelor of Science degree from a regionally accredited college or university in the human services field; or,

   d. Qualification as an early childhood teacher and completion of at least half of the required coursework for director qualifications, including one of the administration classes.

7.702.43 Director Qualifications - Small Child Care Center [Rev. eff. 2/1/16]

A. The director or substitute director of a small center must have completed one of the following:

1. A current professional teaching license issued by the Colorado Department of Education with an endorsement in the area of early childhood education or early childhood special education.

2. A current early childhood professional Credential Level III Version 2.0 as determined by the Colorado Department of Education.

3. Three (3) years' satisfactory experience in the group care of children less than six (6) years of age (5460 hours) and at least two (2) 3-semester hours from a regionally accredited college or university, at either a two year, four year or graduate level, in each of the following subject or content areas in early childhood education; one of the courses must be either introduction to early childhood education or guidance strategies; or,

4. Two (2) years' college education (sixty semester hours) at a regionally accredited college or university, at either a two year, four year or graduate level, in each of the following subject or content areas with at least two (2) 3-semester-hour courses in early childhood education; one of which must be either introduction to early childhood education or guidance strategies; and one (1) year (1820 hours) of satisfactory experience in the group care of children less than six (6) years of age; or,

5. Current certification as a Child Development Associate (CDA) or other Department-approved credential; or,

6. A two (2) year college degree in child development or early childhood education from a regionally accredited college or university, at either a two year, four year or graduate level, in each of the following subject or content areas that must include at least one 3-semester hour course in either introduction to early childhood education or guidance strategies and six (6) months (910 hours) satisfactory experience in the group care of children less than six (6) years of age.

B. Satisfactory experience includes all options listed at Section 7.702.42, B.

7.702.44 Qualifications for Other Staff Members [Rev. eff. 2/1/16]

A. Early Childhood Teacher

1. An early childhood teacher, assigned responsibility for a single group of children and working under the supervision of a director, must be at least eighteen (18) years of age and must meet at least one of the following qualifications:

a. A Bachelor's degree from a regionally accredited college or university with a major area of study in one of the following areas:

1) Early childhood education;

2) Elementary education;

3) Special education;

4) Family and child development;

5) Child psychology.

b. A Bachelor’s degree from a regionally accredited college or university with a major area of study in any area other than those listed at Section 7.702.54, A, 1, and additional two (2) three-semester hour early childhood education college courses with one course being either introduction to early childhood education or guidance strategies.

c. Current early childhood professional Credential Level III Version 3.0 as determined by the Colorado Department of Education.

d. A 2-year college degree, sixty (60) semester hours, in early childhood education from a regionally accredited college or university, which must include at least two (2) three-semester hour courses, one of which must be either introduction to early childhood education or guidance strategies; and at least six (6) moths (910 hours) of satisfactory experience.

e. Completion of twelve (12) semester hours from a regionally accredited college or university, at either a two year, four year or graduate level, in each of the following subject or content areas in early childhood education and one of the three (3) semester hour courses must be either introduction to early childhood education or guidance strategies, plus nine (9) months (1,395 hours) of verified experience in the care and supervision of four (4) or more children less than six (6) years of age who are not related to the individual.

f. Completion of a vocational or occupational education sequence in child growth and development plus twelve (12) months (1,820 hours) of verified experience in the care and supervision of four (4) or more children less than six (6) years of age who are not related to the individual.

g. Current certification as a Child Development Associate (CDA) or other Department-approved credential.

h. Completion of a course of training approved by the Department that includes training and work experience with children in a child growth and development program plus twelve (12) months (1,820 hours) of verified experience in the care and supervision of four (4) or more children less than six (6) years of age who are not related to the individual.

i. Twenty-four (24) months (3,640 hours) of verified experience in the care and supervision of four (4) or more children less than six (6) years of age who are not related to the individual. Satisfactory experience includes being a licensee of a Colorado family child care home; a teacher's aide or teacher in a child care center, preschool, or elementary school, plus either:

1) A current Colorado Level I credential; or,

2) Two (2) three-semester hour early childhood education college courses from a regionally accredited college or university, at either a two year, four year or graduate level, in each of the following subject or content areas with one course being either introduction to early childhood education or guidance strategies.

2. All college course grades toward early childhood teacher qualifications must be "C" or better.

B. Kindergarten Teacher

1. Each teacher of a kindergarten class must have the same qualifications as a director for a large center (see Section 7.702.42), be state certified or licensed as an elementary teacher by the Colorado Department of Education, or have a four (4) year degree from a regionally accredited college or university in elementary or early childhood education.

2. A current early childhood professional Credential Level III Version 2.0 as determined by the Colorado Department of Education.

C. Assistant Early Childhood Teacher

An assistant early childhood teacher, assigned responsibility for a single group of children during times specified in 7.702.55, must meet one of the following qualifications:

1. Completion of one of the early childhood education courses in Section 7.702.42, A, with a course grade of "C" or better and twelve (12) months (1820 hours) verified experience in the care and supervision of four (4) or more children less than six (6) years of age, who are not related to the individual. Satisfactory experience includes being a licensee of a family child care home; a teacher's aide in a center, preschool or elementary school. Assistant early childhood teachers must be enrolled in and attending the second (2nd) early childhood education class which will be used as the basis for their qualification for the position of early childhood teacher; or,

2. Persons having completed two (2) of the early childhood education classes referenced in Section 7.702.42, A, with a course grade of "C" or better and no experience.

3. A current early childhood professional Credential Level I Version 1.0 or 2.0 as determined by the Colorado Department of Education.

D. Staff Aide

1. Staff aides must be at least sixteen (16) years of age and must work directly under the supervision of the director or an early childhood teacher.

2. Infant staff aides must be at least eighteen (18) years of age.

3. Staff aides, without supervision from an early childhood teacher or director, may supervise no more than two (2) preschool age children while assisting the children with diapering or toileting.

E. Volunteers (see also Section 7.702.33, I and J)

1. Volunteers who work more than fourteen (14) calendar days (112 hours) per calendar year who are used to meet staff to child ratio must be equally qualified as an early childhood teacher, assistant early childhood teacher or aide and have complete staff records as required in Section 7.702.92.

2. Volunteers used more than fourteen (14) calendar days (112 hours) per calendar year who are used to meet staff to child ratio must complete fingerprint based background checks and the State Department automated child abuse and neglect background check.

3. Volunteers must be supervised and given instruction as to the center's policies and procedures.

4. The only time a parent/guardian volunteer may be alone with a child other than their own without completing all required background checks, is while driving on a field trip.

5. Volunteers between the ages of twelve (12) and sixteen (16) must have a written purpose developed by the center for volunteering and may not volunteer for more than two (2) hours per day.

7.702.45 Required Staff and Supervision [Rev. eff. 2/1/16]

A. Staff-Child Ratios

1. For the purposes of this subsection A, in determining staff-child ratios, only staff members and/or volunteers qualified under Section 7.702.44, E, who work directly with children are counted.

2. For full day programs, during times of low attendance and/or during the first and last hour of the day, when only eight (8) or fewer children are present in the facility, there must be at least one (1) early childhood teacher or assistant early childhood teacher working with the children and a second staff member immediately available. There must be no more than two (2) children less than the age of two (2) present. When nine (9) or more children are in attendance, at least two (2) staff members must be on duty.

3. The director or director substitute of the center must be present at the center at least 60 percent of any day that the center is open.

4. The director or substitute director of an extended hour drop-in child care center operating at least six calendar days per week must be present at the center or involved in director activities at least fifty percent (50%) of the hours of operation of any day the center is in operation.

a. If the director is not on site at the center for a portion of any day the center is in operation, the director must be available by phone.

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

5. There must be assigned at least one qualified early childhood teacher supervising each group of children unless otherwise specified in rules. A director may be the assigned teacher for one group of children.

6. Part day programs must have an early childhood teacher supervise each group of children at all times. Full day programs may have assistant early childhood teachers supervise preschool age and older children during the following periods of operation:

   a. Opening hours: an assistant early childhood teacher may be alone with children for the first two (2) hours of a center's daily operating hours.

   b. Nap time: an assistant early childhood teacher may be alone with children for up to one (1) hour during nap-time.

   c. Closing hours: an assistant early childhood teacher may be alone with children for up to the two (2) hours prior to the closing time of a center's daily operations.

   d. Taking children to the restroom/diapering.

7. At least one (1) staff member with current Department approved medication administration training and delegation must be on duty at all times.

8. At nap time, the child to staff ratio may be doubled for children two and one half (2 ½) years of age and older in preschool classrooms when the following conditions have been met:

   a. At least half of the children are sleeping.

   b. Another staff member is onsite in the center and immediately available.

   c. Maximum group size and room capacity are not exceeded.

   d. Staff member supervising children is qualified as an early childhood teacher or assistant early childhood teacher.

9. Formal kindergarten class sessions must have 1 staff member for each 25 or fewer children in attendance. At other parts of the day when children are in attendance, the ratio must be 1 staff member to each 15 or fewer children.

10. Children of the director or of staff members who attend the center and other children on the premises for supervision and care must be counted against the licensed capacity in the appropriate age groups.

11. In determining staff-child ratios, children who are in attendance for only part of the day are counted only while at the center.

12. Staff-Child Ratios

AGES OF CHILDREN	NUMBER OF STAFF
6 weeks to 18 months (infants)	1 staff member to 5 infants
12 months to 36 months	1 staff member to 5 toddlers
24 months to 36 months	1 staff member to 7 toddlers
2-1/2 years to 3 years	1 staff member to 8 children
3 years to 4 years	1 staff member to 10 children
4 years to 5 years	1 staff member to 12 children
5 years and older	1 staff member to 15 children
Mixed age group 2-1/2 years to 6 years	1 staff member to 10 children

a. In other preschool age combinations, the staff ratio for the youngest child must be utilized if more than 20% of the group is composed of younger children. This does not apply to infants and toddlers. The ratio for toddler groups is based on the youngest child in the group.

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

13. Maximum Group Size for Children

AGES OF CHILDREN	MAXIMUM GROUP SIZE
6 weeks to 18 months	10 infants
12 months to 36 months	10 toddlers
24 months to 36 months	14 toddlers
2-1/2 years to 3 years	16 children
3 years to 4 years	20 children
4 years to 5 years	24 children
5 years and older	30 children
Mixed age group 2-1/2 to 6 years of age	20 children

a. In other preschool age combinations, the maximum group size for the youngest child must be utilized if more than twenty percent (20%) of the group is composed of younger children. This does not apply to infants and toddlers. The group size for toddler groups is based on the youngest child in the group.

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

c. Group size for children in preschool and school age classrooms may be exceeded for circle time, meal and snack time, special occasions and activities. The room capacity must not be exceeded.

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

e. When combining age groups, not including individual child transitions, children must be cared for in the room licensed for the youngest child in care, including the outdoor play area.

B. Service/Housekeeping Personnel

1. Service personnel must be available for housekeeping and food preparation as needed for adequate operation and maintenance of the center.

2. Assignment of housekeeping and maintenance duties to child care staff must not interfere with their supervisory responsibilities and child care duties.

C. Child Care Health Consultant

1. Staff must consult with a currently Colorado licensed registered nurse with knowledge and experience in maternal and child health, a pediatric nurse practitioner or a family nurse practitioner, or a pediatrician at least once a month at the child care facility. The monthly consultation must be specific to the needs of the facility and include some of the following topics: training, delegation and supervision of medication administration and special health procedures, health care, hygiene, disease prevention, equipment safety, nutrition, interaction between children and adult caregivers, and normal growth and development. In part day preschools that operate less than five (5) hours per day or drop-in child care centers, consultation must occur as often as the nurse delegating medications requires.

2. The date and content of each consultation must be recorded and maintained in the center's files.

3. The center must maintain documentation including the Child Care Health Consultant's (CCHC) Department of Regulatory Agencies (DORA) proof of RN or MD current licensure in good standing, a brief biography highlighting applicable knowledge, experience and approximate dates worked as a school nurse or child care health consultant commenced.

4. Child Care Health Consultants (CCHC) hired after February 1, 2016, must complete the Department approved Child Care Health Consultant (CCHC) training within six (6) months. The center must obtain and maintain proof of course completion.

5. Child Care Health Consultants (CCHC) employed as a health consultant prior to February 1, 2016, must complete the Department approved Child Care Health Consultant (CCHC) training by August 1, 2016. The center must obtain and maintain proof of course completion.

6. All Child Care Health Consultants (CCHC) must complete the Department approved Colorado Department of Public Health and Environment (CDPHE) immunization course annually.

D. Substitutes

1. Qualified staff must be available to substitute for regularly assigned staff who are sick, on vacation, or otherwise unable to be on duty.

2. In the absence of the director of a small center, an individual who meets director qualifications for a small center must substitute for the director.

3. If the director of a large center cannot be present sixty percent (60%) of any day, a center staff member or other individual who meets director qualifications as listed at Section 7.702.42 for a large center must substitute for the director.

4. When there is a director vacancy, a director-qualified substitute must be present at the center at least sixty percent (60%) of any day the center is open until a new director is appointed.

5. For extended director absences (more than two (2) weeks and up to twelve (12) weeks per calendar year) a staff member with fifty percent (50%) of the director qualification requirements completed in education and experience may substitute for the director. Dates must be documented and on file for review. A fully qualified substitute director meeting qualifications in Section 7.702.42 is required for any absence exceeding twelve (12) weeks.

6. Substitutes for directors of part-day public school preschools may be from the sponsoring school system's list of approved substitutes. Substitutes who do not meet director qualifications must consult with a qualified director on administering the center in accordance with early childhood principles and practices and licensing rules.

7.702.46 Infant Program Staff [Rev. eff. 2/1/16]

A. Staff Requirements

1. If a center operates solely as an infant program, there must be a director who meets the qualifications for a director of either a small center or a large center (Sections 7.702.44 and 7.702.43), depending upon the number of children for which the infant center is licensed.

2. The infant program must have an infant program supervisor who has verified training and experience in one of the following:

a. A registered nurse, licensed to practice in Colorado, with a minimum of 6 months of experience in the care of infants.

b. A licensed practical nurse, licensed to practice in Colorado, with twelve (12) months of experience in the care of infants.

c. An adult who holds a certificate in infant and toddler care from a regionally accredited college or university with completion of a minimum of 30 semester hours in the development and care of infants and toddlers in a group setting.

d. An adult who is currently certified as a Child Development Associate (CDA) and has completed the Department approved expanding quality in infant and toddler development course of training.

e. An adult who:

1) Holds a current early childhood professional Credential Level III Version 2.0, as determined by the Colorado Department of Education;

2) Has completed one three-semester-hour class in infant/toddler development; or,

3) Has completed the Department-approved “Expanding Quality in Infant and Toddler Development” and holds twelve months of verifiable full-day experience working with infants and/or toddlers.

f. An adult who:

1) Is at least nineteen (19) years of age, and,

2) Is qualified as an early childhood teacher (Section 7.702.44, A), and,

3) Has a minimum of twelve (12) months of verifiable full-day experience in the group care of infants or toddlers; and,

4) Has completed at least two (2) three (3)-semester hour college courses from a regionally accredited college or university on the development and care of infants and toddlers in a group setting, one (1) of which must be infant/toddler development or the Department approved expanding quality in infant and toddler development course of training.

g. An adult who:

1) Is at least 19 years of age; and,

2) Is qualified as an early childhood teacher (Section 7.702.44, A); and,

3) Has at least two (2) years of verifiable full-day experience in the group care of infants or toddlers; and,

4) Will complete within the first 6 months of employment two (2) three-semester hour college courses from a regionally accredited college or university with one of the courses being infant/toddler development or the Department approved expanding quality in infant and toddler development.

3. An infant program early childhood teacher must have completed eight (8) hours of orientation in the infant program from the infant program supervisor including, but not limited to, the following topics:

a. Toys and equipment, appropriate activities for infants and toddlers, appropriate sleep positions for infants and toddlers, the safe and appropriate diaper change technique; and,

b. At least six (6) months of experience in the care of infants or toddlers; and,

c. Meet qualifications for an early childhood teacher found at Section 7.702.44, A, or be qualified as an infant program supervisor.

4. The infant program staff aide must be at least eighteen (18) years of age, must have completed eight (8) hours of orientation as listed above, at the infant program and must work under the direct supervision of an infant early childhood teacher.

5. There must be at least one (1) staff member on duty in each infant room at all times who holds a current Department-approved First Aid and Safety certificate that includes CPR for all ages of children.

B. Required Staff and Supervision

(See chart in Section 7.702.45)

1. In the infant program there must be a qualified infant program supervisor present 60 percent of the hours of operation of the infant program who is responsible for the care of the infants. An individual qualified as an infant early childhood teacher must be responsible during the remaining time.

2. The infant program supervisor or an infant early childhood teacher must be assigned to each group of 10 or fewer infants in attendance. An infant program staff aide may be assigned to assist the infant program supervisor or early childhood teacher when 6 through 10 infants are in care in the group to maintain the staff ratio of 1 adult for each 5 infants.

3. There must be assigned at least one (1) infant program supervisor in the infant program for each 20 or fewer infants in attendance.

7.702.47 Toddler Program Staff [Rev. eff. 2/1/16]

Staff Requirements

A. If a center operates solely as a toddler program, there must be a director who meets the qualifications for a director of either a large center or a small center (7.702.42 and 7.702.43), depending upon the number of children for which the toddler center is licensed.

B. The toddler early childhood teacher, a staff member assigned responsibility for a single group and working under the supervision of the director, must meet at least one of the following qualifications:

1. A registered nurse, licensed to practice in Colorado, with a minimum of 6 months of experience in the care of infants and/or toddlers.

2. An adult who holds a certificate in infant and toddler care from a regionally accredited college or university with completion of at least thirty (30) semester hours or equivalent in such courses as child growth and development, nutrition, and care practices with children birth to three (3) years of age.

3. An adult who is certified as a Child Development Associate (CDA) or Certified Child Care Professional (CCP) or holds another Department-approved certificate.

4. A licensed practical nurse with at least twelve (12) months of verifiable experience in the care of children less than three (3) years of age.

5. An adult who meets the education and experience requirements for early childhood teacher of a large center (Section 7.702.44, A).

6. A current early childhood professional Credential Level II Version 1.0 or 2.0 as determined by the Colorado Department of Education.

C. Staff aides must be at least sixteen (16) years of age, must work directly under the supervision of the director or a toddler early childhood teacher, and must have completed 8 hours of orientation at the toddler program.

D. For every fifteen (15) or fewer toddlers, there must be at least one staff member in the toddler program at all times who has a current Department-approved First Aid and CPR for all ages of children.

7.702.48 Infant and Toddler Programs Affiliated with Public School Teen Parent Programs [Rev. eff. 2/1/16]

A. Infant programs affiliated with teen parent programs that are operated by accredited public school systems and on school premises may substitute the following age requirements for those at Section 7.702.1,B, 3.

1. The minimum age of infants in care is seven (7) days.

2. Infants between the ages of seven (7) and fourteen (14) days may be accepted for care only with written approval from a health care professional and if there are no medical complications for the infant and/or teen mother.

3. Infants fourteen (14) days of age and over may be accepted for care if there are no medical complications for the infant and/or teen mother.

4. The maximum age of infants in care may be extended only in those situations where no teen parent toddler program exists. In this circumstance, an infant may remain in the infant program until the end of the school semester in which the infant becomes eighteen (18) months old.

B. Infant and toddler programs affiliated with teen parent programs that are operated by accredited public school systems on school premises may substitute the following staff requirements for those at 7.702.46 and 7.702.47:

1. Director qualifications may be met by a certified teacher with a major in home economics education or a vocationally credentialed teacher in consumer and homemaking or early childhood occupations. The director must complete at least three (3) semester hours in administration of a child care center.

2. The director must be present in the infant program classroom or adjacent teen parent classroom at least sixty percent (60%) of any day the center is open.

3. If the director cannot be present sixty percent (60%) of any day, an individual who meets director qualifications must substitute for the director.

4. Infant staff aides must be at least fifteen (15) years of age and may be parents-to-be, parents of enrolled infants, or students enrolled in a child care related course with the sponsoring school system.

5. Substitutes for infant program staff must be from the sponsoring school system's list of approved substitute staff members. Substitutes who do not meet minimum staff qualifications can work no more than ten (10) consecutive business days per assignment.

6. Substitutes for infant program staff must hold a current department-approved first aid and safety certificate that includes CPR for all ages of children.

7.702.5 CHILD CARE SERVICES [Rev. eff. 2/1/16]

7.702.51 Admission Procedure [Rev. eff. 2/1/16]

A. The center must accept and care only for children of the ages for which it has been licensed. At no time shall the number of children in attendance exceed the number for which the center has been licensed.

B. Admission procedures must be completed prior to the child's attendance at the center and must include:

1. A pre-admission interview with the child's parent(s) or guardian(s) to determine whether the services offered by the center will meet the needs of the child and the parent(s) or guardian(s).

2. Explanation of the center's policies and procedures. Parents' signatures must be secured, indicating that they have read and agree to the center's policies and procedures.

3. Completion of the registration information required for inclusion in the child's record as required in Section 7.702.91.

4. If applicable, a health care plan authorized by the child’s health care provider and parent(s)/guardian(s) defining the interventions needed to care for a child who has an identified health or developmental condition or concern including, but not limited to: seizures, asthma, diabetes, severe allergies, heart or respiratory conditions, and physical disabilities. The staff working with a child with a health care plan must be informed, trained and delegated responsibility for carrying out the health care plan; supervision of the plan and interventions must be documented.

C. Children with Special Needs

1. The admission of children who have special health care needs, disabilities, or developmental delays which includes children with social emotional and behavioral needs must be in alignment with the training and ability of staff and in compliance with the Americans with Disabilities Act. Services offered must show that a reasonable effort is made to accommodate the child's needs and to integrate the child with other children. (See General Rules for Child Care Facilities, Section 7.701.14)

2. The center must inform its Child Care Health Consultant (CCHC) prior to the first day of care of the enrollment of a child with special health care needs, if known, so staff receive training, delegation and supervision as indicated by the child’s individualized health care plan.

3. For a child with special health care needs requiring intervention and /or medication, the center must obtain written instructions for providing services from the child's parent or guardian and the health care provider. If an existing individualized health care plan is provided for the child, it must be reviewed and followed by the center staff when caring for the child. If the child does not have an existing individualized health care plan, the individualized health care plan must be obtained by the child's first day of care.

4. The individual health care plan must be updated at least every twelve months from the date of the initial plan and as changes occur. The plan must include all information needed to care for the child, must be signed by the health care provider and must include, but not be limited to, the following:

   a. Medication schedule

   b. Nutrition and feeding instructions

   c. Medical equipment or adaptive devices, including instructions

   d. Medical emergency instructions

   e. Toileting and personal hygiene instructions

   f. Behavioral interventions

   g. Medical procedure/intervention orders

5. For a child with special health care needs, the center must obtain written instructions for providing services from the child's parents or legal guardian and the health care provider. If the child with special health care needs does not have an existing individualized health care plan, the individualized health care plan must be completed within thirty (30) calendar days of the child's enrollment.

6. The plan must be updated at least every twelve (12) months from the date of the initial plan or as changes occur.

7. The center must inform its child care health consultant as soon as possible of the enrollment of a child with special health care needs so staff can receive training and support as indicated by the child's individualized health care plan.

D. If the parent agrees that the center should care for a child in the infant program who is 18 months or older, the center must have on file a written statement from a licensed physician confirming that care for the child is appropriate in this infant program.

E. If the parent agrees that the center should care for a child in the toddler program who is twelve (12) months old but not walking independently, or is over thirty-six (36) months old, the center must have on file a written statement from a licensed physician confirming that care for the child is appropriate in this toddler program.

7.702.52 Health Care [Rev. eff. 2/1/16]

A. Statements of Health Status

1. The center has the right to refuse to admit a child if a statement from a health care professional is not submitted.

2. At the time of admission, the parent(s)/guardian(s) must provide for each child entering the center:

   a. Documentation of immunization status or exemption as required by Colorado Department of Public Health and Environment (CDPHE). Immunizations must be updated and recorded as specified on the certificate of immunization or alternate certificate of immunization as supplied and approved by the Colorado Department of Public Health and Environment (CDPHE). Colorado law requires proof of immunization be provided prior to or on the first day of admission.

   b. Within thirty (30) calendar days after admission, and within thirty (30) calendar days following the expiration date of a previous health statement, the parent(s)/guardian(s) of each child must submit a statement of the child's current health status or written verification of a scheduled appointment with a health care provider. The statement of the child's current health status must be signed and dated by a health care provider who has seen the child within the last twelve (12) months, or within the last six (6) months for children less than two and one-half (2½) years of age. The statement must include when the next visit is required by the health care provider. All health statements must be kept at the center.

   c. Statements of health status of children less than two (2) years of age must be updated in accordance with the American Academy of Pediatrics recommended schedule for routine health supervision or as required in writing by the health care provider.

   d. Health statements for children over two (2) years of age to seven (7) years of age must be updated in accordance with the American Academy of Pediatrics recommended schedule for routine well child exams.

   e. Whenever the director has reason to suspect a child participating in the program may have a condition potentially communicable to the child or others, or finds the child's general condition indicates the need for examination, the director must require a statement from the child's health care provider approving the child to return to group care.

   f. For children seven (7) years of age and older or who have completed the first (1st) grade, subsequent statements of health status must be obtained every three (3) years.

   g. For children attending a drop-in center, parent(s)/guardian(s) of each child must submit a statement of the child's current health status or written verification of a scheduled appointment with a health care provider within thirty (30) calendar days or by the second visit, whichever is longer. The statement of the child's current health status must be signed and dated by a health care provider who has seen the child within the last twelve (12) months, or within the last six (6) months for children less than two and one-half (2½) years of age. Subsequent statements are not required if there have been no health changes in the child and the parent(s)/guardian(s) attest in writing to the health status of the child on an annual basis. Children attending drop-in child care with special medical needs must have the statement from a health care professional as indicated in section 7.702.52, A, 2, b-f.

B. Emergency Procedures

1. At the time of admission, the center must obtain telephone numbers of the child's physician or other appropriate health care professional and numbers where the parent or guardian and at least one other responsible adult can typically be reached in the event of accident, illness, or other emergency.

2. The center must obtain written authority to arrange for medical care in the event of an emergency. This information must be on file the first day a child attends the center.

3. When accidents, injuries, or illnesses occur, the director or responsible adult in charge must notify the parent or guardian of the child and if necessary call the physician or medical facility as instructed in writing by the parent or guardian.

4. For every thirty (30) or fewer children in attendance, there must be at least one (1) staff member on duty who holds a current department-approved first aid and safety certificate (including CPR for all ages of children) and is responsible for administering First Aid and CPR to children. Such individuals must be with the children at all times when the center is in operation. If children are at different locations, there must be a First Aid and CPR qualified staff member at each location.

5. Children too ill to remain in the group must be comfortably cared for and supervised until they can be taken home or suitably cared for elsewhere.

6. Portable First Aid kits must be available to staff at all times, including field trips, and must be located out of reach of children and maintained in a sanitary condition. First aid kits must be checked and restocked on at least a monthly basis.

C. Medication

1. Any routine medication, prescription or non-prescription (over-the-counter) must be administered only with a current written order of a health care provider with prescriptive authority and with written parental consent. Home remedies, including homeopathic medications, shall never be given to a child.

2. The written order by the person with prescriptive authority shall include:

a. Child's name

b. Licensed prescribing practitioner name, telephone number, and signature

c. Date authorized

d. Name of medication and dosage

e. Time of day medication is to be given

f. Route of medication

g. Length of time the medication is to be given

h. Reason for medication (unless this information needs to remain confidential)

i. Side effects or reactions to watch for

j. Special instructions

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

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

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

6. Acetaminophen or ibuprofen is able to be used multiple times with one (1) current, signed multi-use medication order for up to three (3) consecutive calendar days if the order is specific about when the medication is to be given. The multi-use medication order must be renewed with each updated health statement.

7. Staff designated by the center director to give medications must complete the four (4) Department-approved medication administration training and have current annual delegation or more often as determined by the Child Care Health Consultant. Delegation must be from the center's current Child Care Health Consultant who must observe and document the competency of each staff member involved in medication administration. All staff administering medication must have current CPR, First Aid and standard precautions training prior to administering medication with the following exceptions:

   a. Staff determined by the director, in consultation with the Child Care Health Consultant, to be responsible for providing routine emergency medications covered in the approved medication administration training for the treatment of severe allergies or inhaled medications for the treatment of asthma must receive training and delegation from their Child Care Health Consultant for those medications only. Staff must then provide those medications to children based on the instructions from the child's individualized health care plan.

   b. Staff determined by the director, in consultation with the Child Care Health Consultant, to be responsible for providing medications not covered in the approved medication administration training shall also be permitted to administer medications and/or medical treatments such as rectal diastat, insulin or oxygen with individualized training and delegation from the Child Care Health Consultant based on instructions from the child's individualized health care plan.

   c. Staff may be trained and delegated in the administration of a single rescue medication or rescue medical intervention by the center's Child Care Health Consultant. Such training and delegation shall qualify the staff member to provide a rescue medication or treatment for a specific child based on instructions from the child's individualized health care plan.

8. Staff of drop-in child care centers must complete training from their nurse consultant delegating medication.

9. All medications, except those medications specified in the Department's approved medication administration training as emergency medications, must be kept in an area inaccessible to children, but available to staff trained in administering medication. If refrigeration is required, the medication must be stored in either a separate refrigerator or a leak proof container in a designated area of a food storage refrigerator, separate from food and inaccessible to children. Controlled medications must be counted and safely secured, and specific policies regarding their handling require special attention in the center's policies. Access to these medications must be limited (see Section 12-22-318, C.R.S.).

10. Emergency medications must be stored in accordance with the Child Care Health Consultant's recommendation. Emergency medications are not required to be stored in a locked area. Emergency medications may be stored in an area easily accessible and identifiable to staff but out of reach of children. When away from the classroom, staff must carry emergency medications in a bag on their person.

11. The center must have a written policy on the storage and access of inhalers and epinephrine carried by school-age children. The policy must include a written contract with the parent(s)/guardian(s) and child acknowledgement assigning levels of responsibility of each individual. This contract will accompany orders for the medication from a health care provider along with confirmation from the health care provider that the student has been instructed and is capable of self-administration of the prescribed medications.

12. The center must have a written policy on the storage and access of inhalers and epinephrine for all children in care. This policy must be reviewed by the Child Care Health Consultant.

13. Children are not allowed to bring medications to child care unless accompanied by a responsible adult. If a medication is out of date or left over, parents are responsible for picking up the medication. If parents do not respond, the center is responsible for the disposal of medications according to center policy and procedures. Disposal of medications must be documented.

14. Topical preparations such as petroleum jelly, diaper rash ointments, sunscreen, bug sprays, and other ointments may be administered to children with written parental authorization. These preparations may not be applied to open wounds or broken skin unless there is a written order by the prescribing practitioner.

15. A written medication log must be kept for each child. This log is part of the child's records. The log must contain the following:

    a. Child's name;

    b. Name of the medication, dosage, and route;

    c. Time medication is to be given;

    d. Special instructions;

    e. Name and initials of the individuals giving the medication; and,

    f. Notation if the medication was not given and the reason.

D. Sun Protection

1. The center must obtain the parent or guardian's written authorization and instructions for applying sunscreen or use of another form of parent or guardian approved sun protection to their children's exposed skin prior to outside play. A doctor's permission is not needed to use sunscreen at the center.

2. The center must apply sunscreen, have the parent or guardian apply sunscreen, or use another form of parent or guardian approved sun protection for children prior to children going outside. Sunscreen must be reapplied as directed by the product label.

3. When supplied for an individual child, the sunscreen must be labeled with the child's first and last name.

4. If sunscreen is provided by the center, parents must be notified in advance, in writing, of the type of sunscreen the center will use.

5. Children over four (4) years of age may apply sunscreen to themselves under the direct supervision of a staff member.

E. Control of Communicable Illnesses

1. When children have been diagnosed with a communicable illness such as hepatitis, measles, mumps, meningitis, diphtheria, rubella, salmonella, tuberculosis, giardia or shigella, the center must immediately notify the local health department or the Colorado Department of Public Health and Environment, all staff members, and all parents and guardians of children in care. Children's confidentiality must be maintained.

2. The director must ask parents to report exposure of a child to communicable illness outside of the center, and, at the discretion of the director, the child should be excluded from the center for the period of time prescribed by the child's physician or by the local health department.

7.702.53 Personal Hygiene [Rev. eff. 2/1/16]

A. Hand Washing

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

2. Children’s hand washing must be taught when necessary.

B. Diapering

(See also Section 7.702.73, A, 3)

All diaper change areas must:

1. Be a minimum of 36 by 18 inches in size and large enough to accommodate the size of the child;

2. Be adjacent to or within reach of a hand washing sink;

3. Have a place inaccessible to children for storing all diaper change supplies and disinfecting solutions and products; and,

4. Have a sufficient supply of diapers at all times.

7.702.54 Physical Care and Supervision [Rev. eff. 2/1/16]

A. General

1. All children must be under direct supervision of a responsible adult at all times.

2. The time a child arrives and leaves the center each day must be recorded. Attendance verification must be made periodically throughout the day by staff members at the center.

3. Staff must be awake, alert and supervising all children.

4. Center staff must directly supervise children and maintain staff to child ratio during special activities that occur with an outside vendor or provider and where the vendor uses their expert staff to facilitate the activity.

5. The center must provide a rest period with rest equipment of at least thirty (30) minutes for all preschool-age children remaining in the center longer than five (5) hours. Quiet activities are permissible during the thirty (30) minute period. Older children requiring a rest time must be given one.

6. Children must not be forced to sleep. Children who do not sleep after thirty (30) minutes must be allowed to move to another area and be provided with quiet toys and equipment to play with such as puzzles or books.

7. Children must be allowed to leave their napping area within ten (10) minutes of waking.

8. The center must provide mats or cots and a designated rest period for all preschool age children. Drop-in child care centers must provide mats or cots for at least fifty percent (50%) of the licensed capacity of the center.

9. The center must ensure that children are dressed appropriately for the weather before going outside.

B. Infant and Toddler Programs

1. The staff must have daily contact with adults who transport the infants and toddlers to and from the center.

2. Children must not be confined for prolonged periods of time to cribs, playpens, swings, high chairs, infant seats, or other equipment that confines movement. They must have an opportunity each day for freedom of movement, such as creeping, crawling, or walking in a safe, clean, open, uncluttered area.

3. Throughout the day, each child must have frequent, individual, personal contact and attention from an adult, such as being held, rocked, taken on walks inside and outside the center, talked to, and sung to.

4. There must be no attempt to toilet train children until they are able to verbalize or otherwise indicate need, help manage their own clothing, and be able to access toileting facilities.

5. For each child who is learning to use a toilet, the child's individual developmental abilities and needs must be accommodated as stated in the written policies and procedures for the center.

6. Staff must investigate whenever children cry.

7. Children must be allowed to form and observe their own pattern of sleep and waking periods. Special provision must be made so that children requiring a morning nap time have a separate area for their nap apart from space used for play.

C. Safe Sleep Environments for Infants

1. Each infant up to twelve (12) months of age must be provided with an individual crib or futon approved for infants or other approved sleep/rest equipment meeting Consumer Product Safety Commission (CPSC) standards.

2. In the infant room, soft bedding or materials that could pose a suffocation hazard are not permitted in cribs, futons approved for infants or other approved sleep/rest equipment. Soft bedding means, but is not limited to, any soft sleep surface like bumper pads, pillows, blankets, quilts, comforters, sleep positioning devices, sheepskins, blankets, flat sheets, cloth diaper bibs, plush toys, and stuffed animals.

3. An infant must be placed on his/her back for sleeping.

4. Alternative sleep positions for infants must only be allowed with a health care plan completed and signed by the child's physician.

5. Swaddling of infants must only be allowed with a health care plan completed and signed by the child's physician.

6. Each infant up to twelve (12) months of age who uses a pacifier must have the pacifier offered when being put down to sleep, unless the parent directs otherwise. If the infant refuses the pacifier, s/he should not be forced to take it. After the infant falls asleep, there is no need to reinsert the pacifier if it falls out. Pacifiers should not be coated in any sweet solution, and they should be cleaned and replaced regularly. The pacifier should be suitable for the age and size of the infant.

7. All sleep/rest equipment must be safe, sturdy, and free from hazards including, but not limited to: broken or loose slats, torn mattress, chipping paint or loose screws.

8. Approved sleeping equipment must be firm and mattresses must fit snugly ensuring no more than two fingers are able to be inserted between the mattress and the side of the approved sleeping equipment.

9. Toys, including mobiles and other types of play equipment that are designed to be attached to any part of sleeping equipment, must be kept away from sleeping infants and out of sleep environments, including hanging toys. Blankets and other items must not be hung from or draped over the sides or any part of sleeping equipment.

10. Drop side and stacking cribs are prohibited.

11. Bassinets and playpens are prohibited in child care centers unless licensed as a teen parent program when the teen parent(s) remain(s) on site.

12. Other sleep equipment not manufactured for commercial use is prohibited.

13. Infant monitors may only be used in separate sleeping rooms for infants under the following conditions:

    a. The sound monitoring equipment is able to pick up the sounds of all sleeping infants.

    b. The receiver of the sound monitoring equipment is actively monitored by staff at all times.

    c. All sleeping infants must be physically observed at least every ten (10) minutes by a staff member.

    d. Sound monitoring equipment must be regularly checked to ensure it is working correctly.

14. After December 31, 2015, separate sleep rooms must be prohibited in new construction, change of governing body and change of capacity in child care centers.

15. Infants who fall asleep in a car safety seat, bean bag chair, bouncy seat, infant seat, swing, jumping chair, play pen or play yard, highchair, chair, sofa, adult futon, adult bed or other piece of equipment not approved for sleep must immediately be moved to their approved sleep area and placed on their back to sleep.

16. Cribs must be used for sleeping, not extended play or confinement.

17. Children who are awake must not be confined for more than fifteen (15) minutes at a time to cribs, playpens, swings, high chairs, infant seats, or other equipment that inhibits freedom of movement. Children who are actively eating may be in a high chair or other approved feeding equipment for longer than fifteen (15) minutes. Children must be moved away from the feeding location once feeding is complete.

18. If music is played in the infant sleep area, the music must not be played at a loud volume that would prevent infants from being heard by staff. Music equipment must not be placed under a crib or within three (3) feet of the sleeping infant.

19. Supervised tummy time must be offered to infants one month of age or older up to twenty to thirty (20-30) minutes per day. If the infant falls asleep during tummy time, immediately place him/her on their back in approved sleeping equipment.

20. When staff place infants in approved sleeping equipment for sleep, they must check to ensure that the temperature in the room is comfortable for a lightly clothed adult, check the infants to ensure that they are comfortably clothed (not overheated or sweaty), and that bibs, necklaces, and garments with ties or hoods are removed. Clothing sacks or other clothing designed for sleep must be used in lieu of blankets if needed for additional warmth.

21. Infants must not be placed to sleep in the same crib or futon as another infant or child, and must never sleep with an adult in a bed, on a couch, or in any other setting or manner.

D. The facility must have a policy on the protection of infants from second hand smoke.

7.702.55 Food and Nutrition [Rev. eff. 2/1/16]

A. Meals and Snacks

1. All meals and snacks provided by the center must meet current USDA child and adult care food program meal pattern requirements and be offered at suitable intervals. Children who are at the center for more than 4 hours, day or evening, must be offered a meal.

2. Centers must not provide sugar sweetened beverages to children. These are liquids that have been sweetened with various forms of sugars that add calories and include, but are not limited to: soda, fruitades, fruit drinks, flavored milks, and sports and energy drinks.

3. If 100% fruit juice, which is not a sugar sweetened beverage, is offered as part of meals and/or snacks, it must be limited to no more than twice per week.

4. The size of servings must be suitable for the child's age and appetite, and sufficient time must be allowed so that meals are unhurried.

5. In centers that do not regularly provide a meal, if a child brings a meal from home that does not appear to meet current USDA child and adult care food program meal pattern requirements, the center must have foods available to offer as a supplement to that meal.

6. Staff members must sit with the children and encourage them to try a variety of food served. During meals, children should be encouraged to engage in conversation and to express their independence.

7. All food prepared by the center must be from sources approved by the local health department or the State Department of Public Health and Environment. All food must be prepared, served, and stored in such a manner as to be clean, wholesome, free from spoilage, and safe for human consumption. Home-canned vegetables, fruits, and meats cannot be served.

8. Meal menus must be planned at least one week in advance, dated, and posted in a place visible to parents. After use, menus must be filed and retained for three (3) months. Records must be available for periodic review and evaluation.

B. Feeding the Infant

1. An individualized diet and feeding schedule must be provided according to a written plan submitted by the parent or by the child's physician with the knowledge and consent of the parent. A change of diet and schedule must be noted on each child's daily activity schedule and posted in an area clearly visible to the staff.

2. Commercially prepared formula must be mixed according to the manufacturer's direction and each bottle marked with the child’s first and last name.

3. All infants less than six (6) months of age must be held for bottle feeding. Bottles must not be propped. Older infants must not be allowed to hold their own bottles when lying flat. Bottles must not be allowed in a crib with the infant.

4. Older infants must be provided with suitable solid foods that encourage freedom in self-feeding and must be fed in safe chairs such as high chairs or baby-feeding tables.

5. When the infant program provides food other than formula, food must be varied and include food from cereal, vegetable, fruit, and protein sources. When the center does not provide solid food, it must supply any additional foods and/or monitor the infant's total nutritional intake.

6. There must be a sufficient supply of bottles provided for the entire day; or if nursing bottles are to be reused, they must be washed, rinsed, and sanitized after each use.

7. Bottles of formula or breast milk must never be warmed in a microwave oven.

8. A staff member may not mix cereal with formula and feed it to an infant from a bottle or infant feeder unless there are written instructions from the child's health care provider.

C. Feeding the Toddler

1. Staff members must either feed toddlers or supervise them when they are eating, and children must be encouraged to try a variety of food served.

2. Toddlers must be sitting when drinking from a bottle.

3. Commercially prepared formula must be mixed according to the manufacturer's direction and each bottle marked with the child's first and last name.

4. There must be a sufficient supply of bottles provided for the entire day; or if nursing bottles are to be reused, they must be washed, rinsed, and sanitized after each use.

7.702.56 Guidance [Rev. eff. 2/1/16]

A. Children must not be subjected to physical or emotional harm or humiliation.

B. The director must not use, or permit a staff person or child to use, corporal or other harsh punishment, including but not limited to pinching, shaking, spanking, punching, biting, kicking, rough handling, hair pulling, or any humiliating or frightening method of guidance.

C. Guidance must not be associated with food, rest, or toileting. No child should be punished for toileting accidents. Food must not be denied to or forced upon a child as a disciplinary measure.

D. Separation, when used for guidance, must not exceed five (5) minutes and must be appropriate for the child's age. The child must be in a safe, lighted, well-ventilated area and be within sight and hearing of an adult. The child must not be isolated in a locked, closed room or closet.

E. Verbal abuse and derogatory remarks about the child are not permitted.

7.702.57 Overnight Care [Rev. eff. 2/1/16]

A. All of the provisions required in Section 7.702 of these rules for child care centers apply to centers offering overnight care of children which includes care that extends beyond midnight. In addition, centers must observe the following provisions:

B. A nutritious evening meal must be made available to children.

C. Quiet activities must immediately precede the children's bedtime.

D. Children's faces and hands must be washed, and children must be changed into comfortable clothing for sleeping.

E. Each child must be provided with a comfortable separate bed, crib, or cot suitable for the child's age or a two (2) inch sleeping mat or mattress. Each child must also be provided with sheets and a clean, washable covering. If mats or mattresses are used, the room temperature at floor level must be 68 to 72 degrees. Pads and mattresses must be fitted with a clean, washable, removable covering. Permission of parents or guardians must be obtained for each child who uses a sleeping mat or mattress placed on the floor.

F. All children must be directly supervised at all times.

G. The staff-child ratio for sleeping children is one (1) adult to every six (6) or fewer children in attendance.

7.702.58 Activities [Rev. eff. 2/1/16]

A. Activity Schedules

1. The center must carry out a planned program suitable to the needs of the children. This program must be described in writing and be available for review when requested by the department or by parents or guardians of children in care.

2. Daily physical gross motor activities, with or without equipment or materials, must be provided outdoors, or indoors during inclement weather, to preschool age and older children for no less than sixty (60) minutes total for full day programs. Activities do not have to occur all at one time.

3. Daily physical gross motor activities, with or without equipment or materials, must be provided outdoors or indoors during inclement weather, to preschool age and older children for no less than thirty (30) minutes total for part day programs operating from three (3) to five (5) hours per day. Activities do not have to occur all at one time.

4. Daily physical gross motor activities, with or without equipment or materials, must be provided outdoors or indoors during inclement weather, to preschool age and older children daily for no less than fifteen (15) minutes total for part day programs operating up to three (3) hours per day. Activities do not have to occur all at one time.

5. Daily physical gross motor activities, with or without equipment or materials, must be provided to toddler age children outdoors for no less than fifteen (15) minutes for part day programs operating up to three (3) hours per day, no less than thirty (30) minutes total for part day programs operating from three (3) to five (5) hours per day, and no less than sixty (60) minutes for full day programs.

6. When inclement weather limits outdoor activities, indoor physical daily gross motor activities, with or without equipment or materials, must be provided to toddler age children outdoors for no less than fifteen (15) minutes for part day programs operating up to three (3) hours per day, no less than thirty (30) minutes total for part day programs operating from three (3) to five (5) hours per day, and no less than sixty (60) minutes for full day programs.

7. Infants must be provided outdoor play at least three (3) times per week, weather permitting.

8. If the center takes children on routine short excursions, such activities and locations must be posted at the center.

9. If a child participates in activities away from the facility, the center must obtain the parent or guardian's written permission for the child to participate in the activity at a specific location and day. Staff ratios found at Section 7.702.55 must be maintained.

B. Screen Time and Media Use

1. Television and video viewing is prohibited for children less than two (2) years of age.

2. All television, recorded media, computer, tablet and media devices are prohibited during snack or meal times.

3. All media that children are exposed to must not contain explicit language or topics.

4. For children two (2) years of age and older, television, recorded media and video time must be limited to thirty (30) minutes per week.

5. For children two (2) years of age and older computer and tablet time must be limited to non-consecutive fifteen (15) minute increments not to exceed thirty (30) minutes per day.

6. For children two (2) years of age and older, television, recorded media, computer, tablet and media device time may only exceed thirty (30) minutes per week for a special occasion. There is no restriction for children using personal adaptive equipment.

C. Field Trips

1. The center must notify the children's parents or guardians in advance of any field trip. The staff-child ratio found at Section 7.702.55 must be maintained at all times.

2. All groups of children must be actively supervised by a qualified early childhood teacher at all times.

3. Children must be actively supervised at all times.

3. An accurate itinerary must remain at the center.

4. When taking children on a field trip, staff must have the following information about each child: name, address, and phone number of the child's physician or other appropriate health care professional and the written authorization from the parent or guardian for emergency medical care.

5. If children attending the field trip require routine medications be administered during the field trip or have special health needs, a staff member with current medication administration training and delegation must attend on the field trip.

6. A list of all children and staff on a field trip must be kept at the center.

7.702.59 Transportation [Rev. eff. 2/1/16]

A. Transportation Provided by the Center

1. The center is responsible for any children it transports.

2. The center must obtain written permission from parents or guardians for any transportation of their child during child care hours.

3. The number of staff members who accompany children when being transported in the vehicle must meet the child care staff ratio found at Section 7.702.45. The driver of the vehicle is considered a staff member.

4. Children must not be permitted to ride in the front seat of a vehicle and must remain seated while the vehicle is in motion. All children must be secured in a child restraint system that is appropriate for the age and development of that child. The child restraint must conform to all applicable Federal Motor Vehicle Safety Standards and Colorado child passenger safety laws.

5. Children must be loaded and unloaded out of the path of moving vehicles.

6. Children must not be permitted to stand or sit on the floor of a moving vehicle, and their arms, legs, and heads must remain inside the vehicle at all times.

7. Children must not be left unattended in the vehicle.

8. Transportation arrangements for school-age children must be by agreement between the center and the children's parents, i.e., whether the child can walk, ride a bicycle, or travel in a car. The center must monitor the children to be sure they arrive at the center when expected and follow up on their whereabouts if they are late. Written permission from parents or guardians for their children to attend community functions after school hours must include agreements regarding transportation.

9. Prior to a field trip or other excursion, the center must obtain information on liability insurance from parents and staff who transport children in their own cars and verify that all drivers have valid driver's licenses.

B. Requirements for Vehicles

1. Any vehicle used for the transportation of children to and from the center or during center activities must meet the following requirements:

   a. The vehicle must be enclosed and have door locks.

   b. The seats of the vehicle must be constructed and installed according to the vehicle manufacturer's specifications.

   c. The vehicle must be kept in satisfactory condition to assure the safety of occupants. Vehicle tires, brakes, and lights must meet safety standards set by the Colorado Department of Revenue, Motor Vehicle Division.

   d. Seating must be comfortable with a seat of at least ten (10) inches wide for each child.

   e. The provider must not transport more children than any vehicle is able to safely accommodate when child restraint systems and seat belts are properly installed in the vehicle. Two (2) or more children must never be restrained in one (1) seat belt or child restraint system.

   f. Modifications to vehicles including, but not limited to, the addition of seats and seat belts must be completed by the manufacturer or an authorized representative of the manufacturer. Documentation of such modifications must be available for review.

2. In passenger vehicles, which include automobiles, station wagons, and vans with a manufacturer's established capacity of sixteen (16) or fewer passengers and less than 10,000 pounds, the following is required:

    a. Each child must be restrained in an individual seat belt.

    b. Two or more children must never be restrained in one seat belt.

    c. Lap belts must be secured low and tight across the upper thighs and under the belly.

    d. Children must be instructed and encouraged to keep the seat belt properly fastened and adjusted.

3. In vehicles with a manufacturer's established capacity of sixteen (16) or more passengers, seat belts for passengers are not required.

C. Requirements for Drivers of Vehicles

1. All drivers of vehicles transporting children must comply with applicable laws of the Colorado Department of Revenue, Motor Vehicle Division, and ordinances of the municipality in which the center operates.

2. All drivers of vehicles owned or leased by the center in which children are transported must have a current department- approved First Aid and safety certificate that includes CPR for all ages of children.

3. In each vehicle used to transport children, drivers must have access to a First Aid kit.

4. The driver must ensure that all doors are secured at all times when the vehicle is moving.

5. The driver must make a good faith effort to ensure that each child is properly belted throughout the trip.

6. The driver shall not eat, smoke or use a cellular device while driving.

7. The required staff to child ratio shall be maintained at all times.

8. All drivers must be at least twenty (20) years of age.

9. Drivers must complete a minimum of four (4) hours of Department approved driver training. The Department’s approval will be based on the review of a training curriculum that includes at a minimum: behind the wheel training; participant transport attendance procedures including taking attendance at the destination; managing behavioral issues; loading and unloading procedures; daily vehicle inspection procedure; proper tire inflation; emergency equipment and how to use it; accident procedures; passenger illness procedures; procedures for backing up; and vehicle evacuation.

D. Transporting Infants and Toddlers

1. Children must be properly fastened into a child restraint system that conforms to all applicable Federal Motor Vehicle Safety Standards pursuant to Colorado law.

2. There must be at least one adult, in addition to the driver, for each five (5) or fewer infants/toddlers being transported. Each adult must have a current department-approved first aid and safety certificate that includes CPR for all ages of children.

3. An adult must accompany each child to and from the vehicle.

4. Infants and toddlers must not be transported in the front seat of a vehicle.

7.702.6 CHILD CARE EQUIPMENT AND MATERIALS [Rev. eff. 2/1/16]

7.702.61 General Requirements [Rev. eff. 2/1/16]

A. Indoor and outdoor play equipment and materials must be appropriate for children's ages, size, and activities.

B. Indoor and outdoor materials and equipment must be sufficiently varied and appropriate for the developmental needs of the children and the number attending.

C. Indoor and outdoor equipment, materials, and furnishings must be sturdy, safe, and free of hazards.

D. Any permanently installed indoor climbing equipment or indoor portable climbing equipment eighteen (18) inches or higher must have protective surfacing meeting current federal safety requirements. Protective surfacing must be installed according to manufacturer’s instructions, underneath and in the use zone surrounding the equipment.

E. Mats manufactured for indoor climbing equipment over eighteen (18) inches or higher must meet current federal safety requirements. Written documentation from manufacturer must be available for review at all times.

F. Durable furniture such as tables and chairs must be child-sized or appropriately adapted for children's use.

G. Children must wear helmets when riding scooters, bicycling, skateboarding, or rollerblading.

H. In infant nurseries, an adequate number of high chairs or other suitable pieces of equipment that meet federal Consumer Product Safety Commission standards must be provided for infant feeding.

I. The infant program must have an adult rocking chair.

J. For every five (5) infants for which the center is licensed there must be at least one (1) piece of sturdy mobile equipment that is easily accessible to effectively evacuate infants.

K. Evacuation equipment must not block exit routes. Nothing may be stored in or under any evacuation equipment.

Evacuation equipment must:

1. Be located in the room or immediately outside the interior classroom door;

2. Be labeled for easy identification;

3. Be ready for use; and,

4. Fit through doorways.

L. If a crib is not designed for emergency evacuation, the crib must be reinforced with a kit manufactured for this purpose.

7.702.62 Play-Equipment and Materials [Rev. eff. 2/1/16]

A. Equipment and materials must be provided for both indoor and outdoor play.

B. Outdoor play equipment must meet the following requirements:

1. Swings must have seats made of a flexible material.

2. Moving equipment must be located toward the edge or corner of a play area or be designed in such a way as to discourage children from running into the path of the moving equipment.

3. Metal equipment must be placed in the shade when possible and must be arranged so that children playing on one piece of equipment will not interfere with children playing on or running to another piece of equipment.

4. The maximum height of any piece of playground equipment is six (6) feet if accessible to children 2-1/2 to 6 years of age, and three (3) feet if accessible to children less than 2-1/2 years of age.

5. All pieces of playground equipment must be designed to guard against entrapment and strangulation.

6. Portable climbing equipment eighteen (18) inches or higher must have protective surfacing, meeting current federal safety requirements, underneath and in the use zone surrounding the equipment, and installed according to manufacturer instructions.

7. All pieces of permanently installed playground equipment must be surrounded by a resilient surface of a depth of at least 4 inches. For equipment over three (3) feet in height, resilient material must be a depth of at least six (6) inches. Mats manufactured for resilient material for both equipment heights must meet current federal safety standards. Written documentation from manufacturer must be available for review at all times.

8. Sand used as a resilient surface must be raked regularly to retain its resiliency and to retain a depth of at least six (6) inches.

9. Department approved resilient surfacing includes loose fill materials such as wood chips, wood mulch, engineered wood fiber, pea gravel, synthetic pea gravel, shredded rubber tires, and fine loose sand. Solid unitary materials include poured in place surfacing, approved rubber mats, playground tiles, and astro turf with built in resilient pad.

C. The center must have enough play materials and equipment so that at any one time each child for which the center is licensed can be individually involved. Separate play rooms or separate interest centers must be provided for each category of equipment required for the program. A variety of material and equipment from the following categories must be available.

1. Art Supplies;

2. Blocks and Accessories;

3. Books and Posters;

4. Dramatic Play Area;

5. Large Muscle Equipment;

6. Manipulative Toys;

7. Musical Equipment;

8. Science Materials.

D. If the center serves school-age children, it must have some age-appropriate materials and equipment from each of the following categories:

1. Arts and Crafts;

2. Games;

3. Sports;

4. Science;

5. Library.

E. An appropriate supply of play materials must be readily accessible to children and must be arranged in an orderly manner so that children can select, remove, and replace the play materials either independently or with minimum assistance.

F. Toys, toy parts, furnishings, equipment and materials accessible to children less than three (3) years of age must not be a choke hazard or able to be inhaled. Any area of the facility accessible to children less than three (3) years of age must be free of any choke or inhalation hazards.

G. Toys, toy parts, furnishings, equipment and materials made of brittle, easily breakable plastic or glass are not permitted for children less than five (5) years of age.

H. In the infant program, some play equipment from the following list must be provided: rubber washable toys, rattles, blocks, balls, record player, radio, tape player.

I. In the toddler program, some play materials easily accessible to children must be provided from each of the following categories:

1. Gross Motor Development;

2. Fine Motor Development;

3. Language Development;

4. Social Interaction.

J. Drop-in child care centers must provide access to indoor large muscle equipment, including, but not limited to, an indoor climbing structure, an open area for indoor large muscle games, and must provide large muscle activities at least two times during each six (6) hour period of time.

K. Drop-in centers providing an indoor climbing structure must have protective surfacing underneath and in the use zone surrounding the equipment meeting current federal safety requirements.

7.702.63 Rest Time Equipment [Rev. eff. 2/1/16]

A. A firm cot or two (2) inch mat with a sheet and blanket or other suitable covering must be provided for each preschool child remaining in the center more than five (5) hours.

B. Cots or pads must be spaced at least two (2) feet apart on all sides during rest time. Children must have a safe area in which to rest.

C. When the room provided for rest is used for other program activities, the cots, pads, and linens must be stored in an area that is not included in the required square footage assigned for play space.

D. In rooms used for napping, the light must be dim at nap time to promote an atmosphere conducive to sleep.

E. In the toddler room, a crib, sleeping cot, or two (2) inch mat must be provided for each child, and there must be a minimum of two (2) feet between each crib or cot. Aisles between cots or cribs must be kept free of all obstructions while cribs are occupied. No child less than the age of two (2) years should use a cot for sleeping without written permission of the parent or guardian.

1. Individual cribs must provide each toddler with sufficient space for the toddler's length, size, and movement, and must meet federal Consumer Product Safety Commission standards. Each crib must be fitted with a firm, comfortable mattress and heavy plastic sheeting or other type of waterproof material. If individual cribs are used, they must be separated by a sturdy divider from the area used for activities.

2. Sleeping cots and mats must be of firm construction and in good repair.

F. In the toddler room, a sheet and a blanket or suitable covering must be provided for each child to be used only by that child.

7.702.7 BUILDINGS AND FACILITIES [Rev. eff. 2/1/16]

7.702.71 Building Site [Rev. eff. 2/1/16]

A. General

1. Centers can be located in a private residence only when that portion of the residence to which children have access is used exclusively for the care of children during the hours the center is in operation or is separate from the living quarters of the family.

2. No other business can operate in the rooms used by the center during the hours of child care.

3. Rooms licensed for specific ages of children cannot be used for other ages of children without the prior written approval of the licensing authority.

B. Infant Programs

1. The infant program must be located on the grade level.

2. If the infant program is in the same building as a facility caring for children of other ages, the infant program must be physically separated in different rooms.

C. Toddler Program

1. The toddler program must be located on grade level.

2. If the toddler program is combined with a large child care center or an infant program, toddler facilities, both indoor and outdoor, must be completely separate from facilities for other age groups, except as allowed by Section 7.702.73, B, 8 and 10. If the facility wishes to provide opportunities for a toddler to have occasional contact with siblings, plans must be approved by the Department licensing representative.

3. A toddler program located in a drop-in child care center licensed for five (5) or fewer toddlers may be separated from the rest of the center by a five (5) foot wall.

7.702.72 Building Plans and Construction [Rev. eff. 2/1/16]

A. The center must comply with applicable state and local building code and zoning regulations.

B. Prior to construction, architectural plans for new buildings or for extensive remodeling of existing buildings must be submitted for review and approval by the Department, the local fire department, and the local building department as to appropriateness, adequacy, and suitability for child care functions.

7.702.73 Space Requirements [Rev. eff. 2/1/16]

A. Indoor Area Requirements

1. There must be open, indoor play space of at least thirty (30) square feet of floor space per child, including space for movable furniture and equipment. Indoor space must be exclusive of kitchen, toilet rooms, office, staff rooms, hallways and stairways, closets, laundry, furnace rooms, and space occupied by permanent built-in cabinets and permanent storage shelves inaccessible to children.

   Child care centers in operation prior to January 1, 1966, and which continue operation under the same governing body, must provide open indoor play space of at least twenty-five (25) square feet of floor space per child, including space for readily movable furniture and equipment, and with the exclusions noted in the preceding paragraph.

2. Adequate storage space must be provided for indoor and outdoor equipment and supplies. Space for reserve supplies must be in addition to the designated space allotment for children's play activities.

3. Diaper change areas must be located and arranged so as to provide privacy for older children in need of diaper changing. See also Section 7.702.53, B.

4. Number of Children Allowed in One Room

AGE OF CHILDREN	MAXIMUM NUMBER OF CHILDREN IN A ROOM
6 weeks to 18 months	10 infants
12 months to 18 months	10 infants
12 months to 36 months	20 toddlers
18 months to 24 months	20 toddlers
24 months to 36 months	28 toddlers
30 months to 36 months	28 toddlers

Toddler centers licensed prior to July 1, 1989 are exempt from the room size requirement.

5. Square Footage Requirement per Child

AGE OF CHILD	SEPARATE FREE PLAY AREA	SEPARATE SLEEP AREA	COMBINED SLEEP AND PLAY AREA
6 weeks to 18 months (infants)	35 square feet	adequate space to accommodate size of cribs and needs of infants and staff	50 square feet
12 months to 36 months (toddlers)	30 square feet	30 square feet	45 square feet
2-1/2 years to 5 years (preschool)	-	-	30 square feet
5 years and over (school-age)	-	-	30 square feet

6. In the infant program, the minimum indoor space per infant for sleep and activities is fifty (50) square feet. This space is exclusive of kitchen, toilet rooms, office, staff rooms, hallways and stairways, closets, laundry, furnace rooms, and space occupied by permanent built-in cabinets and storage shelves.

   a. If a separate sleep room is provided, it must have enough square footage that all babies and cribs are easily accessible to staff members. The activity room must contain at least thirty-five (35) square feet per child.

b. If a combination sleep/activity room is used, the sleep area must be separated by a sturdy divider from the area used for activities, and cribs must be arranged so that all babies and cribs are easily accessible to staff members.

B. Outdoor Area Requirements

1. The center must provide an outdoor play area that is adjacent to or safely accessible to the indoor facilities. When the area is not adjacent, staff members must accompany children to and from the play area. Drop-in child care centers are not required to provide an outdoor play area.

2. The outdoor play area must provide a minimum of seventy-five (75) square feet of space per child for a group of children using the total play area at any one time. The total play area must accommodate at least thirty-three percent (33%) of the licensed capacity of the center or a minimum of 1500 square feet, whichever is greater.

3. The play area must be fenced or have natural barriers, such as hedges or stationary walls at least four (4) feet high, to restrict children from unsafe areas.

4. The play area must be designed so that all parts are visible and easily supervised.

5. The playground area must have at least two (2) different types of surfaces. Each type of surface must cover at least ten percent (10%) of the playground area.

6. A shaded area in the fenced play area of at least one hundred fifty (150) square feet must be provided by means of trees or other cover to guard children against the hazards of excessive sun and heat.

7. In the infant program, the outdoor play area must be a minimum of four hundred (400) square feet.

8. In the infant program, the outdoor area can be used by other age groups at the center, but it must not be used by any other group of children while infants are using it.

9. The total outdoor play area for toddler age groups must be a minimum of seven hundred fifty (750) square feet if licensed for ten (10) toddlers and one thousand fifty (1,050) square feet if licensed for fourteen (14) or more toddlers, or seventy-five (75) square feet per child for the largest group size for which the program is licensed.

10. In the toddler program, the outdoor play area can be shared by infants, but infants and toddlers must not be allowed to use the play area at the same time.

7.702.74 Food Preparation Area [Rev. eff. 2/1/16]

A. See the “Rules and Regulations Governing the Sanitation of Child Care Centers in the State of Colorado.”

B. Infant and Toddler Programs

1. A table, counter, or shelf, separate from the diaper changing area, must be available for preparing infants' and toddlers' food.

2. The program must prepare formula or food in the center's kitchen, or must have a second sink or a covered commercial container with a spigot for preparation of formula and food.

7.702.75 Toilet Facilities [Rev. eff. 2/1/16]

A. Toilet facilities for the staff and other adults must be in separate compartments or separated by a partition from children's facilities, except in centers licensed for thirty (30) or fewer children and in centers with programs of four (4) hours or less.

B. Toilet rooms for children must be separate from rooms used for other purposes and must be located on the same floor as the inside play area.

C. A minimum of one (1) lavatory and one (1) flush toilet must be provided for each 15 or fewer children. Drop-in child care centers must provide a minimum of one 1 lavatory and one 1 flush toilet for each 20 or fewer children.

D. The same toilet facilities must not be used simultaneously by school-age children of both sexes, and toilets for school-age children must be separated by partitions to provide privacy.

E. Toilet facilities are not required for children less than two (2) years of age.

F. Toilet facilities must be provided for children two (2) years of age and older.

G. Toilet rooms for children must be located within the toddler program. Drop-in child care centers need not provide a toilet in the toddler classroom if the facility is licensed for ten (10) or fewer toddlers. A diaper change table and hand washing sink is required in every toddler classroom meeting requirements at Section 7.702.53, B.

H. Each infant classroom must have one diaper changing station and hand washing sink meeting requirements at Section 7.702.53, B.

I. One designated diaper change area is required for every twenty-four (24) preschool age children.

7.702.76 Office Facilities [Rev. eff. 2/1/16]

A. Office space separate from areas used by children, other than for isolation purposes, must be provided for staff to perform administrative duties.

B. The office must have sufficient space for maintenance and safe storage of children's and staff records and the center's business records.

7.702.8 FIRE AND OTHER SAFETY REQUIREMENTS [Rev. eff. 2/1/16]

7.702.81 General Requirements [Rev. eff. 2/1/16]

A. Buildings must be kept in good repair and maintained in a safe condition.

B. Major cleaning is prohibited in rooms occupied by children.

C. Volatile substances such as gasoline, kerosene, fuel oil, and oil- based paints, firearms, explosives, and other hazardous items must not be stored in any area of the building used for child care. Plastic bags and sharp tools and instruments must be stored in areas inaccessible to children.

D. Combustibles such as cleaning rags, mops, and cleaning compounds must be stored in well-ventilated areas, separated from flammable materials, and stored in areas inaccessible to children.

E. All heating units, gas or electric, must be installed and maintained with safety devices to prevent fire, explosions, and other hazards. No open-flame gas or oil stoves, unscreened fireplaces, hot plates, or unvented heaters can be used for heating purposes. All heating elements, including hot water pipes, must be insulated or installed in such a way that children cannot come in contact with them.

F. Nothing flammable or combustible can be stored within three (3) feet of a furnace or hot water heater.

G. In rooms used by children, all electrical outlets that are accessible to children must have protective covers, or safety outlets must be installed.

H. Except in part-day preschools, permanently located battery-powered lights must be provided in locations readily accessible to staff in the event of electric power failure. Batteries must be checked regularly.

I. Closets, attics, basements, cellars, furnace rooms, and exit routes must be kept free from accumulation of extraneous materials such as discarded furniture, furnishings, newspapers, and magazines.

J. Children less than two (2) years of age must be excluded from the kitchen. When children age two (2) and older prepare food at the center, they may use only equipment and appliances that do not present a safety hazard. Staff-child ratios must be maintained.

K. First Aid supplies must be maintained and made accessible to staff throughout the center and stored in areas inaccessible to children.

L. All outdoor areas available to children's activities must be maintained in a safe condition by removal of debris, dilapidated structures, broken or worn play equipment. The center must identify hazardous, high-risk areas. These areas must be made inaccessible to children.

M. Playground surfaces must be checked on a daily basis for the presence of dangerous or other foreign materials. Playground equipment must be checked for safety on a monthly basis.

N. Window blind cords must be secured out of children's reach to prevent strangulation.

O. Items labeled “keep out of reach of children” must be inaccessible to children.

P. Staples must be inaccessible to children less than three (3) years of age.

Q. Thumb tacks must not be used in areas accessible to children less than three (3) years of age.

7.702.82 Fire Safety [Rev. eff. 2/1/16]

A. Every building and structure must have sufficient exits to permit the prompt escape of occupants in case of fire or other emergency. Additional safeguards must be provided for life safety in case any single safeguard is ineffective due to some human or mechanical failure.

B. Every building or structure must be constructed, arranged, equipped, maintained, and operated as to avoid undue danger to the lives and safety of its occupants from fire, smoke, fumes, or resulting panic during the period of time reasonably necessary for escape from the building or structure in case of fire or other emergency.

C. In every building or structure, exits must be arranged and maintained so as to provide free and unobstructed egress from all parts of the building or structure at all times when it is occupied. No lock or fastening to prevent free escape from the inside of any building can be installed. Only panic hardware or single-action hardware is permitted on a door or on a pair of doors. All door hardware must be within the reach of children.

D. No child of less than first grade school level can be cared for in areas above or below the main floor of exit unless allowed by the Uniform Building Code and approved by the local fire department.

E. One exit from each room must be directly to the exterior of the building or to a common hallway leading to the exterior. The exit path must not go through another classroom to get to the hallway.

F. Each center must have at least two (2) approved, alternate means of egress from each floor of the building or to a common hallway leading to the exterior. They must be at different locations.

G. All stairways, interior and exterior, that are used by children must be provided with handrails within reach of the children.

H. If the center has a security lock on outside exit doors, the center must obtain written permission from the local fire department; and there must be a written sign attached to the door instructing center staff that the security lock is not to be utilized when children are present at the center.

I. Every exit must be clearly visible, or the route to reach it must be conspicuously indicated. Each path of escape must be clearly marked.

J. Every building and structure must have an automatic or department- approved manually operated fire alarm system to warn occupants of the existence of fire or to facilitate the orderly conduct of fire exit drills.

7.702.90 RECORDS AND REPORTS [Rev. eff. 2/1/16]

7.702.91 Children's Records [Rev. eff. 2/1/16]

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

A. The child's full name, birth date, current address, and date of enrollment.

B. Names and home and employment addresses and telephone numbers of parents or guardians.

C. Any special instructions as to how the parents or guardians can be reached during the hours the child is at the center.

D. Names, addresses, and telephone numbers of persons authorized to take the child from the center.

E. Names, addresses, and telephone numbers of persons who can assume responsibility for the child in the event of an emergency if parents or guardians cannot be reached immediately.

F. Name, address, and telephone number of the child's physician, dentist, and hospital of choice.

G. Health information, including medical report, chronic medical problems, and immunization history.

H. A dated written authorization for emergency medical care signed and updated annually by the parent or guardian. The authorization must be notarized if required by the local hospital, clinic, or emergency health care facility.

I. Written authorization from a parent or guardian for the child to participate in field trips or excursions, whether walking or riding.

J. Injury and illness record.

K. Reports of serious injuries and accidents occurring during care that result in the hospitalization or death of a child.

L. Significant observations of the child's development.

M. A record of parent conferences, including dates of conferences and names of center staff and parents or guardians involved.

7.702.92 Staff Records [Rev. eff. 2/1/16]

A. The center office must maintain a record for each staff member that includes the following:

1. Name, address, telephone number, and birth date of the individual.

2. Verification of education, work experience, employment, training, and completion of first aid and CPR courses.

3. Immunization record and health examination reports.

4. Date of employment.

5. Names, addresses, and telephone numbers of persons to be notified in the event of an emergency.

6. Information received from the State Department's automated system and the Colorado Bureau of Investigation (may be retained in a confidential file).

B. Each staff member's personnel file must contain all required information within thirty (30) business days of the first day of employment.

7.702.93 Administrative Records and Reports [Rev. eff. 2/1/16]

A. The following records must be on file at the center:

1. Records of enrollment, daily attendance for each child, and daily record of the time the child arrives at and departs from the center.

2. Current health department inspection report issued within the past twenty-four (24) months.

3. Current fire department inspection report issued within the past twenty-four (24) months.

4. A list of current staff members, substitutes, and staffing patterns.

5. Copies of menus.

6. A record of visitors to the center.

B. Each center must immediately report in writing to the Colorado Department of Human Services any accident or illness occurring at the center that resulted in medical treatment by a physician or other health care professional, hospitalization, or death. This report must be made within 48 hours after the accident or illness occurred.

C. A report about a fatality must include:

1. The child's name, birth date, address, and telephone number.

2. The names of the child's parents or guardians and their address and telephone number if different from that of the child.

3. Date of the fatality.

4. Brief description of the incident or illness leading to the fatality.

5. Names and addresses of witnesses or persons who were with the child at the time of death.

6. Name and address of police department or authority to whom the report was made.

D. Within forty-eight (48) hours of the incident, the center must submit a written report to the State Department about any child who has been lost from the center and for whom the local authorities have been contacted. Such report must indicate:

1. The name, birth date, address, and telephone number of the child;

2. The names of the parents or guardians and their ad dress and telephone number if different from those of the child;

3. The date when the child was lost;

4. The location, time, and circumstances when the child was last seen;

5. Actions taken to locate the child;

6. The name of the staff person supervising the child.

E. The center must report to the Colorado Department of Public Health and Environment or its local unit any communicable illness, including but not limited to measles, mumps, diphtheria, rubella, tuberculosis, shigella, hepatitis, meningitis, salmonella, or giardia, contracted by a staff member or a child at the center.

7.702.94 Confidentiality and Retention [Rev. eff. 2/1/16]

A. The confidentiality of all personnel and children's records must be maintained. See Section 7.701.7 in the General Rules for Child Care Facilities.

B. Personnel and children's records must be available, upon request, to authorized personnel of the State Department.

C. If records for organizations having more than one center are kept in a central file, duplicate identifying and emergency information for both staff and children must also be kept on file at the center attended by the child and where the staff member is assigned.

D. The records of children and personnel must be maintained by the center for at least three (3) years.

E. Posting of any personal information or photos of children on social media or advertisement without written parental consent is prohibited.

F. Records of enrollment, daily attendance for each child and daily records of the time the child arrives at and departs from the center for the past twelve (12) months must be on file at the center. The previous two (2) years must be on file at either the center or a central location or storage.

7.703 - 7.704 - None

7.705 RULES REGULATING RESIDENTIAL CHILD CARE FACILITIES [Rev. eff. 6/1/12]

All Residential Child Care Facilities must comply with the "General Rules for Child Care Facilities" found at Section 7.701, et seq., and the 24-Hour Quality Standards at Section 7.714.

7.705.1 DEFINITIONS [Rev. eff. 1/1/12]

A "residential child care facility (RCCF)" shall provide twenty-four (24) hour residential group care and treatment for five or more children, between the ages of three (3) and sixteen (16) years old and for children from sixteen (16)-eighteen (18) years old and for those persons to twenty-one (21) years old who are placed by court order prior to their eighteenth birthday. A residential child care facility shall offer opportunities for a variety of services that can be used selectively in accordance with an individual plan for each child. A residential child care facility is operated under private, public or nonprofit sponsorship.

"Colorado Client Assessment Record (CCAR)" is a clinical instrument designed to assess the behavioral and mental health status of a medically eligible client. The CCAR is used to identify current diagnosis and clinical issues facing the client, to measure progress during treatment, and to determine mental health medical necessity. This instrument is used for children in the custody of a county department of human/social services or Division of Youth Corrections and for those children receiving mental health services in an RCCF through the Child Mental Health Treatment Act.

"Licensed professional person" means the person responsible for determining medical necessity of the therapy services provided to child(ren) in care, on a monthly basis. Mental health services must be provided by either a licensed professional person or an individual who is in the process of obtaining a license and is being supervised by a licensed professional person.

"Medical necessity" means that a covered service shall be deemed a medical necessity or medically necessary if, in a manner consistent with accepted standards of medical practice, it:

A. Is found to be an equally effective treatment among other less conservative or more costly treatment options; and,

B. Meets at least one of the following criteria:

1. The service will, or is reasonably expected to prevent or diagnose the onset of an illness, condition, primary disability or secondary disability.

2. The service will or is reasonably expected to cure, correct, reduce or ameliorate the physical, mental, cognitive or developmental effects of an illness, injury or disability.

3. The service will or is reasonably expected to reduce or ameliorate the pain or suffering caused by an illness, injury or disability.

4. The service will or is reasonably expected to assist the individual to achieve or maintain maximum functional capacity in performing activities of daily living.

"Mental health services" means beneficial activities, which aim to overcome issues involving emotional disturbance of maladaptive behavior adversely affecting socialization, learning, or development. These include and are limited to individual, group, family therapy, evaluation services and medication management.

"Multidisciplinary team" means a group comprised of at least one licensed professional person and other staff responsible for the treatment of the child, and may include a staff member from the referral agency.

"Referral agency" means the Division of Youth Corrections, county department of human/social services who has custody of a child, or a mental health agency (behavioral health care organization or community mental health center) that refers the child to the RCCF for the purpose of placement through the child Mental Health Treatment Act.

7.705.11 Governing Body [Rev. eff. 11/1/98]

A. The governing body is the individual, partnership, corporation or association in whom the ultimate authority and legal responsibility is vested for the conduct of the residential child care facility.

B. When the governing body does not include a board of directors, there shall be an advisory committee of at least two other individuals who act in an advisory capacity to the governing body. The names of the advisory committee members shall be disclosed to the department. The advisory committee shall meet at regularly-stated intervals.

C. The minutes of the advisory committee or the board of directors shall be maintained. The minutes shall be available to the department upon request, except that the minutes containing confidential personnel information need not be shared with the department.

D. The functions of the governing body shall include:

1. The appointment of an administrator who shall be responsible, according to established performance criteria, to the governing body, and shall delegate to him/her the executive authority and responsibility for the administration of the child care facility according to its defined purpose.

2. The formulation and regularly-planned review of policies and procedures to be followed by the facility.

3. The provision of necessary facilities, adequate financing, qualified personnel, services, and program functions for the welfare and safety of children in accordance with these standards.

7.705.12 Fiscal Management [Rev. eff. 7/2/06]

A. Each RCCF shall develop an annual budget reflecting anticipated income by source and expenses by purpose, plus an accompanying balance sheet, which demonstrates that the RCCF has assured resources to carry out its defined purpose. The budget shall be approved by the governing body. The first year's budget shall be submitted with the original license application.

B. A RCCF shall demonstrate that it is financially sound and manages its financial affairs prudently. All funds disbursed by the facility shall be expended in accordance with the program objectives as specified by the governing body.

C. An RCCF must have a double entry accounting system and all financial transactions must be posted to this system. Financial statements, prepared from information provided by this system, shall be presented in conformity with U.S. Generally Accepted Accounting Principles (GAAP). Books and records of the RCCF shall be subject, at any time the RCCF business office is open, to inspection, audit or copying by designated Federal, State or county personnel, or such independent auditors or accountants as may be designated by these personnel.

D. Each private or non-profit RCCF whose total annual expenditures are $100,000 or more shall provide for an annual audit by an independent Certified Public Accountant in accordance with appropriate generally accepted auditing standards. RCCF's with less than $100,000 total annual expenditure may submit an audit as described above or may submit compiled or reviewed financial statements, prepared in accordance with generally accepted accounting principles.

1. Every RCCF shall submit cost reports as prescribed by the State on the required supplementary information form and the administrative expenses for foster care as defined by the State Department.

2. The cost reports submitted shall contain an affidavit signed by the RCCF’s Executive Director and an officer of its board attesting to the authenticity of the information. Submission of falsified information shall be grounds for suspension of the RCCF license.

3. The audit and cost report shall be submitted to the Department within six (6) months of the RCCF’s fiscal year end.

7.705.13 Insurance [Rev. eff. 11/1/98]

A. Every facility shall carry public liability insurance. The applicant or licensee shall submit the amount of the insurance and the name and the address of the insurance agency providing the insurance for the facility. Information about the insurance should be maintained at the facility.

B. Facilities operating their own transportation vehicles shall carry insurance in compliance with the minimum limits required by the Colorado Revised Statutes, Title 10, Article 4.

C. The facility shall carry workman's compensation and unemployment insurance as required by law.

7.705.2 CHILD CARE SERVICES

7.705.21 Case Management Services Provided by the Residential Child Care Facility [Rev. eff. 7/2/06]

A. A staff member qualified as stated at Section 7.705.46, A, small be assigned the responsibility for case management for each child.

B. Each individual assigned the responsibility of providing case management services for a child shall:

1. Participate actively in the admission procedure, treatment planning, discharge and after care planning.

2. Assure that appropriate information concerning the child and her/his background is shared with other staff members who deal with the child regularly and maintain communication with parents, guardians, or referring agency, or the agency responsible for discharge planning and follow-up care of the child.

3. Assure that an individual child's plan is developed for the child and required plan review and necessary modifications are made pursuant to Section 7.714.4, D.

4. Assure that necessary progress reports for court and placing agency requirements are completed and submitted in a timely fashion.

5. Attend Administrative Reviews in person or by conference call.

6. Assure that the individual child's plan developed for each child is implemented, including treatment by specialists, and documented in the child's file.

C. RCCF providers who are serving children enrolled in the Children's Habilitation Residential Program (CHRP) waiver shall be in compliance with rules contained in the Department of Health Care Policy and Financing's Medical Assistance Manual at Section 8.508 (10 CCR 2505-10).

7.705.22 Recreation and Leisure Activities [Rev. eff. 11/1/15]

A. A residential facility shall have a written plan for ensuring that a range of indoor and outdoor recreational and leisure opportunities is provided for children and youth in care. Such opportunities shall be based on the individual’s interests, with personal and treatment needs being considered. The reasonable and prudent parent standard requirement for staff to approve activities for a child or youth in foster care includes the following actions:

1. At least one (1) staff or administrator in a Residential Child Care Facility (RCCF), who is provided training in determining how to use and apply the reasonable and prudent parent standard, shall be designated as authorized to apply the reasonable and prudent parent standard to decisions involving the participation of a child or youth in age or developmentally appropriate activities.

2. The staff shall receive training in how to determine whether approving a child’s or youth’s participation in an extracurricular, enrichment, cultural, or social activity is consistent with the reasonable and prudent parent standard based upon the criteria in Section 7.701.200.

B. Responsibility shall be assigned for supervision and coordination of the total recreation program, including training and supervision of staff and volunteers to assure maximum safety for each participant.

C. Outdoor and indoor recreational areas and equipment shall be provided in sufficient variety and quantity to meet needs of children and to offer some choice of activities.

D. If the facility takes residents on out of state trips, the facility shall develop a written plan for each trip, which includes goals for participants for the trip, selection criteria of participants, necessary skills for staff members, necessary equipment to meet participants' needs on the trip, supervision plan, letter of information to parents and/or guardians, and approval of the guardian.

E. The facility shall obtain the written permission of the guardian for each out of state trip or shall obtain an overall written permission of the guardian for any out of state trip in which the resident will participate.

F. Some facilities may participate in special activities, which are either comprehensively integrated and salient to the total treatment program or which supplement and enhance the treatment process. When the facility participates in any special activities, such as swimming, boating, horseback riding, use of the trampoline, white water rafting, backpacking, camping, and winter sports, the facility shall comply with the rules regulating special activities found at Section 7.719. The child's participation in a special activity shall be included in the individual child's plan.

1. When the residents of the facility participate in a special activity, each facility shall have a plan for action in case of natural disasters relevant to the terrain and activity, lost participants, injuries, and illnesses. These plans shall be in writing and shall accompany the participants and staff, and also be on file at the facility office. The staff shall have received training regarding the implementation of these plans prior to the departure of the participants.

2. There shall be a First Aid kit which contains equipment relevant to the type of injuries which might be sustained in a specific activity and which is located at the site of the activity. There shall be a person holding at least an American Red Cross First Aid/CPR/AED Certificate for schools and communities or equivalent at the site of the activity when the activity is in progress.

7.705.3 PERSONAL CARE OF THE CHILD

7.705.31 Medical and Health Services [Rev. eff. 11/1/98]

Administration of any medication at the facility shall be done only by a person licensed and authorized by law or staff member having passed a Colorado Department of Public Health and Environment approved competency evaluation for medication administration, verification of which is maintained in the staff member's personnel file.

7.705.32 Food and Nutrition [Rev. eff. 11/1/98]

A. Menus shall be planned at least one week at a time, shall be dated, posted and filed for at least one month.

B. If menus are not prepared by a qualified nutritionist or dietitian, there shall be review and approval by a qualified nutritionist or dietitian at least quarterly.

C. Water shall be readily accessible to children by means of an approved water fountain or single-service cups.

7.705.33 Client Eligibility for Mental Health Services in RCCF [Rev. eff. 6/1/12]

A. To be receiving Colorado Medicaid fee for service mental health services in a RCCF, the child shall have a current and valid CCAR assessment that supports medical necessity. The CCAR assessment shall be completed by the agency providing the mental health services. In addition, the child shall be:

1. Medicaid eligible; and,

2. Diagnosed with a psychiatric disorder; and,

3. Determined in an initial assessment to be in need of and capable of benefiting from the mental health services as determined by a licensed professional person.

B. The provider shall use the CCAR to document any changes in diagnosis and, on an annual basis or at time of discharge, to determine the outcome of mental health services provided.

C. Mental health services shall be discontinued when:

1. The child has attained treatment goals; or,

2. The child is no longer able to benefit from the mental health services, is no longer progressing toward therapeutic goals, or is referred elsewhere for treatment; or,

3. The child is discharged from the facility.

D. If a client is discharged during the first seventy-two (72) hours of admission and a service plan has not been completed, then the facility shall assure that available mental health information is included in the discharge summary.

E. Mental health services shall be identified in the plan of care and provided as indicated by the child's need for:

1. Individual therapy sessions, which shall be provided as specified for the acuity level of care. Individual therapy sessions shall be conducted by a licensed professional person.

2. Group therapy sessions, which shall be provided as specified for the acuity level of care. Group therapy may include a therapeutic intervention provided to two or more children that assists in their ability to function. A licensed professional person shall conduct the group therapy sessions.

3. Family therapy sessions, which shall be provided as specified for the acuity level of care. The family therapy sessions shall be provided with a significant other and the child must be present unless contraindicated. Family therapy sessions shall be conducted by a licensed professional person.

4. Other mental health services needed and able to be billed on a fee for service basis to Medicaid, including crisis management and evaluation services.

5. Medication administration services.

7.705.4 HUMAN RESOURCES

7.704.41 Personnel Policy, Orientation and Training [Rev. eff. 11/1/98]

A. The facility shall have a written statement of personnel policies which include:

1. Job descriptions for all positions required. The descriptions shall describe duties of the job, qualifications for performance and supervision to be provided.

2. Salary range and provision for increments.

3. Hours of work, holidays, vacations, sick leave, and other leaves.

4. Conditions of employment, tenure, and promotion.

5. Employment benefits, including retirement plan, social security, hospitalization, and other insurances.

6. Employee evaluation procedure.

7. Grievance procedures which may be used by staff.

8. Termination procedures.

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

7.705.42 Administrative Staff [Rev. eff. 1/1/12]

A. Administrator

The administrator of a residential child care facility shall be qualified as follows:

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

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

3. The administrator shall assume the following duties:

   a. Overall direction and responsibility for the children, program, facility, and fiscal management.

   b. Overall direction and responsibility for supervision of adequate staff.

   c. The selection and training of a capable staff member who can assume responsibility for management of the facility in the administrator's absence.

   d. The establishment of relationships and contact maintenance with allied agencies, services, and resources within the community.

B. Assistant or Acting Administrator

1. In each child care facility, there shall be a specifically designated staff member, age twenty-one (21) or over, capable of acting as a substitute for the administrator during his/her absence. The duties and responsibilities of the substitute administrator shall be clearly defined in order to avoid confusion and conflict among other staff and children.

2. If the administrator is regularly absent from the facility more than fifty percent (50%) of his/her working hours, an assistant administrator shall be appointed who meets the same qualifications as the administrator found at Section 7.705.42, A.

C. Administrative Coverage

1. When there is a change in administrator, or when he/she has left the facility permanently without a replacement, the State Department of Human Services shall be notified immediately in writing or when a possible change in administrator is anticipated, the facility shall notify the State Department prior to the change.

2. The administrator or the staff member to whom the administrator has delegated responsibility shall be available at all times.

7.705.43 Medical, Health, and Clinical Staff [Rev. eff. 1/1/12]

A residential facility shall have a primary physician, licensed to practice medicine, available to establish and maintain the health and medical plan and procedures of the facility.

A. If the physician is not a full-time employee, the description of the physician's consultative services or other duties to be performed shall be set forth clearly in a written agreement with the facility.

B. All medical staff, whether employed by the facility, or whether their services are purchased or volunteered, shall be licensed and responsible to the primary physician for the medical aspects of their job.

C. Clinical staff who provide mental health services shall be a licensed professional person and shall be qualified as a physician licensed pursuant to Article 36 of Title 12, C.R.S., a psychologist licensed pursuant to Part 3 of Article 43 of Title 12, C.R.S., a clinical social worker licensed pursuant to Part 4 of Article 43 of Title 12, C.R.S., a marriage and family therapist licensed pursuant to Part 5 of Article 43 of Title 12, C.R.S., a marriage and family therapist licensed pursuant to Part 5 of Article 43 of Title 12, C.R.S., a professional counselor licensed pursuant to Part 6 of Article 43 of Title 12, C.R.S., a social worker licensed pursuant to Part 4 of Article 43 of Title 12, C.R.S., that is supervised by a licensed clinical social worker, or a mental health professional provisionally licensed pursuant to Part 2 of Article 43 of Title 12, and shall provide therapy services to children in care.

7.705.44 Child Care Staff [Rev. eff. 11/1/98]

A. Each child care worker shall be at least 21 years of age and have completed two years of college education. A high school diploma or equivalent and one year's experience in the human services field may be substituted for the required college.

B. Child care staff aides shall be at least 18 years old and shall work directly under the supervision of a child care staff member in activities specified by the child care staff member or with the approval of the director.

C. Relief staff shall have the same qualifications as regularly assigned child care staff.

7.705.45 Child Care Staff-to-Child Ratios [Rev. eff. 7/2/06]

A. The facility shall know the intended whereabouts of each child in care at all times, and children shall be under the direct supervision of child care staff at all times.

B. There shall be a minimum of one (1) adult qualified as a child care worker on duty and one (1) adult on call who can be summoned at all times when there is one child or more at the facility.

C. At night there shall be at least one awake staff person within each physically separate building, and within hearing of children, and a second person who can be summoned in case of emergency.

D. The ratio of child care staff to children in care shall be dependent on the needs of the children, but the ratio of such staff shall not be less than the following schedule except when transporting children in vehicles (see Section 7.705.56):

Age of Child	Waking Hours	Sleeping Hours
3 - 6 years	1 staff member 6 children	1 staff member: 12 children
7- 12 years	1 staff member 8 children	1 staff member: 16 children
13-16 years and over	1 staff member: 10 children	1 staff member: 20 children

E. For children who are physically and/or mentally disabled, excluding emotionally disturbed children, the ratio of staff to children shall be at least:

Extent of Handicap	Waking Hours	Sleeping Hours
Mildly Disabled Children	3-6 years:	
Functions near appropriate social and personal level and exhibits limited intellectual functioning	1 staff member: 5 children.	1 staff member: 12 children.
	7 years and over:	
	1 staff member:8 children	1 staff member: 12 children
Moderately Disabled Children Can obtain appropriate personal adaptive behavior, yet functions on a limited adaptive behavioral level and will always need some level of supervision	1 staff member: 5 children	1 staff member: 12 children
Severely Disabled Children Incapable of independence in self- help with minimal communication ability; plays primarily alone	1 staff member: 3 children	1 staff member: 6 children
Profoundly Disabled Children Totally unable to manage self	1 staff member: 2 children	1 staff member: 4 children

7.705.46 Case Management Staff and Other Professional Staff [Rev. eff. 7/2/06]

A. Case management shall be provided by:

1. A qualified professional having a master's degree in social work, psychology, or child development from a regionally accredited college or university. This professional shall have two years of treatment-oriented experience, or

2. A designated member of the staff, who shall have a bachelor's degree from a regionally accredited college or university with a major in behavioral science, human services or related fields, and three years experience in working with children, and for whom there is an effective arrangement for consultation from a qualified professional as described above.

3. The qualified professional, as specified in Section 7.705.46, A, 1, may be a full-time or part-time employee of the facility, a staff member of a recognized agency, or an individual with which the facility has a contract to provide the necessary services and/or consultation.

4. The ratio of case management staff to children shall be dependent on the type of facility and the needs of the children therein, but there shall be at least one full-time case management staff member for every twenty (20) children, or a part-time staff member assigned for a fraction thereof.

B. The case management staff shall be responsible for providing case management services as stated at Section 7.705.21.

C. Psychiatrists used by the child care facility shall be qualified and licensed to practice and shall provide, as needed, diagnosis, treatment, and consultation services.

D. Psychologists providing testing and diagnostic services shall have a license in psychology.

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

7.705.47 Volunteers and Students [Rev. eff. 11/1/98]

A. If volunteers or students are used by a facility, the administration shall define specifically the services to be given by that individual.

B. Volunteers and students who are assigned to work directly with the children shall:

1. Be subject to reference checks similar to those performed for employment applicants.

2. Be in good general health. The facility has the right to contact the individual's physician.

C. Volunteers and students shall be:

1. Directly supervised by a paid staff member.

2. Oriented and trained in the philosophy of the facility, confidential nature of their work, and the specific job which they are to do, prior to assignment.

7.705.48 Food Services and Maintenance Staff Members [Rev. eff. 7/2/06]

A. All food services and maintenance staff members shall comply with the general requirements for all personnel as specified in Section 7.714.92.

B. Food service staff of the facility shall meet requirements of the state or local health requirements for food handlers.

C. There shall be one food service staff member who has basic knowledge and understanding of nutrition, food purchasing, menu planning and food preparation. If the staff member is not qualified as a dietitian or nutritionist, there shall be readily available consultation from a specialist in the field.

D. Maintenance staff shall be in sufficient numbers to maintain an adequate physical plant.

7.705.5 BUILDING AND FACILITIES

7.705.51 Building Plans [Rev. eff. 11/1/98]

Prior to construction, architectural plans for new buildings or for extensive remodeling of existing building shall be submitted for review and approval by the State Department of Public Health and Environment or its local unit, the local fire department, and local building department. Plans shall be submitted and reviewed by the State Department of Human Services as to appropriateness, general adequacy, and suitability for child care.

7.705.52 Living Spaces and Equipment Necessary in Residential Child Care [Rev. eff. 11/1/98]

A. There shall be separate sleeping rooms for boys and girls. In sleeping rooms that accommodate two to four children, 60 square feet of floor space per child shall be provided. There shall be no more than four children in any bedroom. Each bedroom for single occupancy shall have a minimum of 80 square feet of floor space. Closet space of 4 square feet per child and drawer space for storage of personal items sufficient for the occupants in each sleeping room shall be provided.

1. Pre-existing licensed facilities with sleeping rooms which accommodate more than four children per room shall have permanent or partial partitions to provide separation and privacy between every four beds. Exceptions to space requirements in preexisting licensed facilities shall be approved by the State Department of Human Services.

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

B. Each child shall be provided suitable sleeping facilities consisting of individual beds or bunks complete with mattresses in good repair and constructed so as to facilitate cleaning while in use by residents and upon each change of occupancy. Single beds shall be spaced not closer than 36 inches laterally, or end-to-end. Triple-deck bunks are prohibited. Beds being used by children shall have a mattress cover, clean sheets, pillows, pillowcases and blankets.

C. Each room of occupancy shall be well-lighted and adequately ventilated by exterior windows or by an approved air-conditioning system. If a mechanical ventilation system is provided, it shall meet requirements of local building codes and fire regulations.

D. When child care staff live in or sleep at the facility, there shall be at least one room adequately furnished and a private bath facility reserved for child care staff. Arrangements where child care staff share sleeping rooms with children who have special needs shall be approved by the State Department of Human Services.

E. Staff rooms shall be located on the same floor or in the general area of children's sleeping rooms so that the child care worker can supervise children and be readily accessible when needed.

F. There shall be a minimum of 25 square feet of space for each child for informal individual or group activities. The area shall be adequately and appropriately furnished to accommodate social and recreational activities associated with such living areas.

G. There shall be a designated space distinct from children's living areas to serve as an administrative office for such activity as secretarial work and bookkeeping.

H. There shall be a designated space to allow private discussions and counseling sessions.

I. Each residential facility shall have a telephone. Each separate living unit within a residential facility shall have 24-hour telephone service or an intercom system connected with an outside telephone service. Emergency telephone numbers, including fire, police, physician, poison control, health agency, and ambulance shall be conspicuously posted adjacent to the telephone.

7.705.53 Outdoor Space and Equipment [Rev. eff. 10/1/03]

A. The grounds of the facility shall be maintained in a manner that is free from any hazard to health or safety.

1. Garbage and rubbish which is stored outside shall be stored securely in noncombustible, covered containers and shall be removed at least once every week or more frequently, if necessary.

2. Garbage and rubbish containers and incinerators, shall be located separate from play areas.

3. Fences shall be in good repair.

4. Areas determined to be unsafe, including steep grades, cliffs, open pits, swimming pools, high-voltage boosters., or high- speed roads, shall be fenced off or have natural barriers to protect children.

5. Playground equipment shall be so located, installed, and maintained as to ensure the safety of children.

B. A residential facility shall have access to outdoor recreational space and suitable recreational equipment.

C. When a swimming pool is provided, it shall meet the requirements of the Colorado Department of Public Health and Environment or its local unit. Safety precautions shall include protective fencing, winter coverage which shall exclude plastic or inflatable-type domes, and a nonskid surface area of at least four (4) feet adjoining pool sides. The use of the pool shall be in accordance with Section 7.705.22, G.

7.705.54 Dining, Kitchen, Laundry, Bathroom Facilities [Rev. eff. 10/1/03]

A. The dining area, whether located in the living unit or in a separate central dining facility, shall meet the following requirements:

1. It shall be well-lighted, properly heated, and ventilated.

2. It shall be large enough to accommodate the children and staff.

3. Floors shall be constructed and maintained with a non- slipping surface.

4. Tables and chairs shall be of sturdy construction, scaled or adjusted to the proper height and size so that children can be comfortably served.

5. Table service and settings shall be of the type, size, and design appropriate to the ages of children served.

6. Dining and recreation areas may be combined if regulations for dining areas are consistently met.

B. The kitchen shall be designed and equipped to meet the requirements of efficiency, fire safety, and comfortable working conditions for the staff. There shall be provision for $C0_2$ or a dry powder fire extinguisher(s) in kitchen. If a restaurant-type range is used, a hood with a filter must be installed.

C. When an institution has a central laundry facility, it shall be located in an area separate from areas occupied by children. Noncommercial types of laundry facilities with ample space for sorting, drying, and ironing shall be made available to children old enough and capable of handling their personal laundry. These facilities shall be in an area supervised by a responsible adult.

D. There shall be a ratio of at least one toilet, lavatory, bathtub or shower for every six (6) children, and readily accessible. Toilet and bath facilities for boys and girls and staff shall be separate. Toilets and bath facilities shall have doors or partitions. Urinals may be substituted for up to one-third of the required number of toilets in facilities which accept boys. Toilets and bath facilities shall be accessible from a common hallway and be on the same floor with sleeping rooms.

7.705.55 Building Safety [Rev. eff. 6/1/12]

A. Maintenance

1. Buildings shall be kept in good repair and maintained in a safe condition. Good housekeeping shall be observed in all areas at all times.

2. All areas available for children's activities shall be maintained in safe condition, including elimination of debris and hazardous items of all kinds, and removal of broken play and recreational equipment and any other devices which are in poor repair.

3. Closets, attics, basements, cellars, furnace rooms; and exit routes shall be kept free from accumulation of extraneous materials such as discarded furniture, furnishings, newspapers, or magazines. Combustibles such as cleaning rags, mops, and cleaning compounds shall be stored in well- ventilated areas. Solutions, cleaning compounds, and other hazardous substances will be properly labeled and stored in areas inaccessible to children.

4. Storage of gasoline, kerosene, fuel oil, and other flammable material shall meet requirements of safety and fire codes.

5. Storage shall not be permitted around water heaters and furnaces.

B. Exits

1. Every building or structure, new or old, shall be provided with exits sufficient to permit the prompt escape of occupants in case of fire or other emergency. Additional safeguards shall be provided for life safety in case any single safeguard is ineffective due to some human or mechanical failure.

2. Each facility shall have at least two approved, alternate, remotely-located means of egress from each floor of the building to safe and open space at ground level.

3. Egress from each dwelling unit, sleeping room, and dormitory shall be directly available without passage through another dwelling or rooming unit to the outside or to a common hallway leading to the outside.

4. In residential child care facilities approved as a therapeutic residential child care facility or psychiatric residential treatment facility, time-delay panic hardware utilizing 30- to 90-second delays before release may be installed on the two approved exit doors on each floor of the facility, provided that such time-delay panic hardware is approved by the fire department having jurisdiction over the facility.

   The two approved exit doors on each floor must release and open automatically after the 30- to 90-second delay without constant pressure being applied to the doors and must remain open for at least 15 seconds. The two approved exit doors on each floor can neither automatically reset themselves nor be reset from a central control panel for a period of at least 15 seconds after release. Magnetic locks in conjunction with time-delay panic hardware that meets these criteria are allowed.

5. In every building or structure, exits shall be so arranged and maintained as to provide free and unobstructed egress from all parts of the building or structure at all times when it is occupied. No lock or fastening to prevent free escape from the inside of any building shall be installed unless specifically authorized pursuant to Section 7.714.53.

6. Every exit shall be clearly visible or the route to reach it shall be conspicuously indicated in such a manner that every occupant of every building or structure who is physically and mentally capable will readily know the direction of escape from any point. Each path of escape shall be so arranged or marked that the way to a place of safety outside is unmistakable.

7. In every building or structure adequate and reliable illumination shall be provided for all exit facilities.

8. Every building or structure shall be so constructed, arranged, equipped, maintained, and operated as to avoid undue danger to the lives and safety of its occupants from fire, smoke, fumes, or resulting panic during the period of time reasonably necessary for escape from the building or structure in case of fire or other emergency.

9. Compliance with this rule shall not be construed as eliminating or reducing the necessity for other provisions for safety of persons using a structure under normal occupancy conditions, nor shall any provision of this rule be construed as requiring or permitting any condition that may be hazardous under normal occupancy conditions.

10. The local fire department shall determine the adequacy of exits and other measures for life safety in accordance with the requirements of the Uniform Building Code and the National Fire Protection Codes. In cases of practical difficulty or unnecessary hardship, the local fire department may grant exceptions from the Uniform Building Code or the National Fire Protection Codes, but only when it is clearly evident that reasonable safety is thereby secured.

C. Electrical Equipment

Electrical wiring systems in all buildings shall conform to the requirements of the state electrical board. Electrical appliances shall be examined frequently for worn or otherwise defective wiring.

D. General Safety Practices

1. A residential facility shall immediately notify the responsible agency or department of a fire or other disaster which might endanger children or require their removal for reasons of health and safety. The Department of Human Services shall be immediately notified of a fire or other disaster.

2. Security guards patrolling the grounds and structures of a residential facility, whether employed by the facility or by a security service under contract to the facility, shall not be permitted to be in possession of any firearm or chemical weapon on the grounds or within the structures of the facility.

3. Porches, elevated walkways, and elevated play areas within a residential facility shall have barriers to prevent falls.

4. Power-driven equipment used by a residential facility shall be kept in safe and good repair. Such equipment shall be used by children only under the direct supervision of a staff member and according to State law.

5. Staff and children shall be trained to report fires and other emergencies appropriately. Children and staff shall be trained in fire prevention.

6. In every building or structure, fire alarm facilities shall be provided to warn occupants of the existence of fire so that they may escape or to facilitate the orderly conduct of fire exit drills.

7. Responsibility for the planning and conduct of fire drills shall be assigned to competent persons qualified to exercise leadership.

8. A residential facility shall maintain an active safety program, including investigation of all accidents and recommendations for prevention.

7.705.6 RECORDS AND REPORTS

7.705.61 Confidentiality [Rev. eff. 6/1/12]

A residential child care facility may make available information in the case record to the child, his parent(s), or guardian and their respective legal counsel if the information being released does not contain material which violates the right of privacy of another individual and/or material that must be withheld from release according to other laws or by order of the court. If in the professional judgment of the administration of the facility, it is felt that information contained in the record would be damaging to a child that information may be withheld except under court order.

7.705.62 Necessary Records and Their Retention [Rev. eff. 6/1/12]

The following records shall be on file at the facility or administrative office:

A. Governing structure, including the charter, articles of incorporation, by-laws, or other legal basis for existence.

B. Current health department inspection report.

C. Current fire department inspection report.

D. A list of current staff and substitutes and staffing pattern.

E. Insurance coverage.

F. Annual financial audit or financial statements.

7.705.63 Personnel Records [Rev. eff. 6/1/12]

Personnel record for each employee shall include name, address, birth date, names and telephone numbers of persons to be notified in event of an emergency; date of employment, and date and reason for separation; official documents verifying education, training, and work experience; pre-employment references; and, the indication of awareness of agency policies. Records for personnel shall be retained for at least three years.

7.705.7 (NONE) [Rev. eff. 6/1/12]

7.705.8 SPECIAL RULES AND REGULATIONS FOR SHELTER CARE

7.705.81 Shelter Care for Placements [Rev. eff. 9/15/12]

A. Applicability of Rules

1. Any residential child care facility may provide shelter or twenty-four (24) hour emergency care for children and homeless youth, defined in general rules at Section 7.701.21, in need of short-term placement resulting from such circumstances as child abuse or running away from home for up to twenty-one (21) consecutive days. Some facilities accept only children for emergency care and are known as shelter care facilities.

2. The acceptance of children for emergency care must be stated in the written purpose of the facility and the admission policy.

3. Residential child care facilities shall make every effort to assure that shelter care placements do not exceed sixty days. Exceptional circumstances shall be documented in the case file. No child shall remain in a shelter care facility for longer than ninety days. Review of placement will be required as appropriate.

4. These rules are specifically for shelter care facilities. The following rules are in addition to corresponding regulations in Sections 7.705.1 through 7.705.6. However, if there is a conflict between those rules and these shelter care rules, these rules shall apply.

B. Admission to Shelter Care and Orientation

1. At the time of emergency shelter care placement of a child, the facility shall obtain at least the following information: name, birth date, if available, physical description of the child, date and time of the admission, name and authority of person bringing child to the facility, and reason for placement. On the next working day following emergency shelter care placement of the child, the facility shall obtain from the county department of social services or the parent of guardian a signed, written authorization to obtain medical care for the child. The county department is authorized to give this authorization pursuant to this staff manual.

2. The facility shall ensure that each newly admitted child is checked by facility staff or physician for signs of illness, symptoms of abuse, and the presence of vermin.

   The facility shall have a medical plan, including staff training, which includes the screening of the child for child abuse and signs of illness requiring immediate medical attention.

3. If a child remains in shelter care for longer than thirty days, a medical examination must be completed in compliance with Section 7.705.31, B.

4. The facility shall provide orientation for the new child. Orientation shall include:

   a. Tour of the facility.

   b. Introduction to staff.

   c. Description of rules, regulations, and discipline policies of the facility.

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

   e. Discussion regarding personal possessions the child is permitted to bring and obtain while in shelter care.

7.705.82 Homeless Youth Shelter Care [Eff. 9/15/12]

A. Applicability of Rules

1. Any residential child care facility may provide shelter to homeless youth age eighteen and under for up to twenty-one (21) consecutive days. A residential child care facility may provide shelter to a homeless youth between the ages of eighteen (18) and twenty-one (21), if such services will not negatively impact the health, safety and welfare of the other children in care. The facility shall obtain approval from the department prior to accepting a homeless youth between the ages of eighteen (18) and twenty-one (21).

2. The acceptance of homeless youth must be stated in the written purpose of the facility and the admission policy.

3. These rules are specifically for shelter care of homeless youth. The following rules are in addition to corresponding regulations in Sections 7.705.1 through 7.705.6. However, if there is a conflict between those rules and these shelter care rules, these rules shall apply.

B. Admission to Homeless Youth Shelter Care and Orientation

1. At the time of entering the facility, the facility shall obtain at least the following information: name, birth date, physical description of the child, date and time of the admission, and reason for needing admission.

2. The facility shall ensure that each newly admitted child is checked by facility staff or physician for signs of illness, symptoms of abuse, and the presence of vermin.

   The facility shall have a medical plan, including staff training, which includes the screening of the child for child abuse and signs of illness requiring immediate medical attention.

3. The facility shall provide orientation for the new child. Orientation shall include:

   a. Tour of the facility.

   b. Introduction to staff.

   c. Description of rules, regulations, and discipline policies of the facility.

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

e. Discussion regarding personal possessions the child is permitted to bring and obtain while in shelter care.

C. Notifications and Referrals

1. Pursuant to Section 26-5.7-105(4), C.R.S., if the facility determines that a referral for additional services needs to be made, it shall make the referral to county department of residence of the parents of the youth.

2. Pursuant to Section 26-5.7-105(7), C.R.S., When a youth under fifteen years of age is admitted to the facility, the facility shall notify the county department of residence of the parents of the youth within seventy-two (72) hours of the youth's admission.

3. Pursuant to Section 26-5.7-105(5), C.R.S., if the facility determines that a referral for additional services needs to be made, it shall make the referral to county department of residence of the parents of the youth. However, the facility will contact the county department of residence of the parents of the youth for the limited purpose of determining whether a County Department is serving the youth.

4. For youth under the age of eighteen (18), if reconciliation with the youth's family has not occurred within forty-eight (48) hours following admission to the facility, excluding Saturdays, Sundays and legal holidays, and the director of the facility or other person in charge does not anticipate that reconciliation will be achieved within twenty-one (21) consecutive days, the director or other person in charge shall provide the youth and the youth's parent with a written statement identifying:

   a. The availability of counseling services;

   b. The availability of longer term residential arrangements; and,

   c. The possibility of referral to the county department.

5. If the facility staff know the youth is away from home without permission, the shelter shall notify the youth's parent or law enforcement pursuant to Section 26-5.7-106, C.R.S.

7.705.83 Education and Treatment [Rev. eff. 11/1/15]

At least one (1) staff or administrator who is present in a Residential Child Care Facility (RCCF) and is trained in determining how to use and apply the reasonable and prudent parent standard shall be the designated staff authorized to make decisions about participation of a child or youth in age or developmentally appropriate activities.

7.705.84 Personnel [Rev. eff. 6/1/12]

A. A shelter care facility shall maintain the staff ratio described at Section 7.705.46.

B. A shelter care facility must have awake staff during the children's sleeping hours.

C. A shelter care facility shall make adequate provisions to ensure the immediate availability of additional staff in the event of an emergency or crisis.

D. Training programs for staff in shelter care facilities shall reflect special emphasis on the following areas:

1. Physical Management.

2. Crisis intervention.

3. Crisis and emergency procedures.

7.705.85 Records [Rev. eff. 11/1/98]

A. A record for a child accepted for emergency care or in a shelter care facility shall include:

1. Information obtained at admission pursuant to Section 7.705.82.

2. Statement from the physician about the child's physical examination pursuant to Section 7.705.31, B.

3. Assessment and permanent placement plan.

4. Record of medication given to the child while in care.

5. Date of discharge, to whom the child was discharged, and physical description of child at time

7.705.100 PSYCHIATRIC RESIDENTIAL TREATMENT FACILITY (PRTF) [Rev. eff. 6/1/12]

Psychiatric Residential Treatment Facility (PRTF) services are a Medicaid benefit statewide when provided in accordance with the provisions of the following sections.

7.705.101 REQUIREMENTS [Rev. eff. 6/1/12]

A. A “Psychiatric Residential Treatment Facility (PRTF)” must be a licensed Residential Child Care Facility (RCCF), which means a facility other than a hospital, that provides psychiatric services to individuals under age twenty-one (21) under the direction of a licensed physician in a residential setting. Psychiatric Residential Treatment Facilities as defined in Section 26-6-102, C.R.S., must have a current provider agreement with the Colorado Department of HealthCare Policy and Financing (HCPF).

B. Each RCCF wishing to provide care as a “Psychiatric Residential Treatment Facility” must comply with the rules for Residential Child Care Facilities and the Quality Standards for 24-Hour Child Care. The following rules shall be in addition to sections 7.705.1 through 7.705.77 and Sections 7.714 through 7.714.933; however, if there is a conflict between those rules and these PRTF rules, these rules shall apply.

C. The PRTF shall comply with all rules promulgated by the Medical Services Board in the Colorado Department of Health Care Policy and Financing for mental health services for clients of Psychiatric Residential Treatment Facilities or residing in Therapeutic Residential Child Care Facilities, Sections 8.765-8.765.13 (10 CCR 2505-10).

7.705.102 ACCREDITATION [Rev. eff. 6/1/12]

The facility shall be accredited by one of the following: Joint Commission on Accreditation of Healthcare Organization (JCAHO), the Commission on Accreditation of Rehabilitation Facilities (CARF), or the Council on Accreditation of Services for Families and Children (COA).

7.705.103 CLIENT RIGHTS [Rev. eff. 6/1/12]

A. A list of client rights and the grievance procedure shall be posted in all facilities in areas frequented by clients and legal guardians.

B. Every client has the right to receive assistance from the client representative in making complaints and to receive copies of the complaint procedure.

C. Written policies pertaining to visitation, communication, dress, and personal possessions may be established and implemented. These policies shall only limit a client's rights to ensure the protection of the client, staff, and program from unreasonable and unnecessary intrusions and disruptions and from health and safety hazards.

D. Client rights may only be denied for good cause by the physician lead inter-disciplinary team providing treatment for that client.

E. If the PRTF enforces any restriction upon the client's rights, the facility shall review any denial or limitation at least every seven (7) days and document in the individual plan of care.

7.705.104 PROFESSIONAL SERVICES [Rev. eff. 6/1/12]

PRTF clientele shall receive six hundred (600) minutes of documented professional clinical services each week they are in PRTF residence, with one hundred twenty (120) of those minutes dedicated to individual treatment. The remainder of the professional clinical services (480 minutes) may include any or all of the following: group therapy, family therapy, medication management, psychological services, weekly physician contact, and post emergency intervention de-briefing, which the client may be excused from if clinically contraindicated. These services will be based on the recommendations of the interdisciplinary team and reviewed each week for clinical appropriateness.

The facility team shall meet weekly to review and document the client’s general progress in treatment and make any needed adjustment(s) to the service plan for each PRTF resident. If it is clinically contraindicated that this (600 minutes) total of professional clinical services be delivered to the client, it shall be documented as such on a weekly basis by the licensed professional managing the care of this client; documentation shall include a description of those services that will be delivered to the client.

7.706 RULES REGULATING DAY TREATMENT CENTERS [Rev. eff. 6/1/12]

All day treatment centers must comply with the “General Rules for Child Care Facilities” found at Section 7.701, et seq., the restraint and seclusion rules found at Section 7.714.53, et seq., the applicable definitions in Section 7.714.1, and these “Rules Regulating Day Treatment Centers”.

7.706.1 DEFINITIONS [Rev. eff. 10/1/15]

A “day treatment center” is a facility which provides less than twenty-four (24) hour care for groups of five or more children from three (3) to twenty-one (21) years of age. Nothing prohibits a day treatment center from allowing a person who reaches twenty-one (21) years of age after the commencement of an academic year from attending an educational program at the day treatment center through the end of the semester in which the twenty-first birthday occurs or until the person completes the educational program, whichever comes first. The center will provide a structured program of various types of psycho-socio and/or behavioral treatments to prevent or reduce the need for placement of the child out of the home or community.

This definition shall not include special education programs operated by a public or private school system or programs which are licensed by other regulations of the Colorado Department of Human Services for less than twenty four (24) hour care of children, such as day care centers or centers for developmentally disabled children.

“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.

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

7.706.11 Governing Body

A. The governing body is the individual, partnership, corporation or association in whom the ultimate authority and legal responsibility is vested for the conduct of the day treatment center.

B. The governing body shall be identified by its legal name. The names and addresses of individuals who hold primary financial control, members of the board of directors and officers of the governing body shall be disclosed fully to the Colorado Department of Human Services. When changes of persons holding any of these positions occur, the department shall be informed of the names and addresses of the new individuals annually.

7.706.12 Statement of Purpose

Each day treatment center shall formulate a written statement which includes the purpose and objective of the day treatment center, description of the services to be offered by the day treatment center, ages of children and type of children to be accepted by the day treatment center, and the geographic area in which children may reside for acceptance by the day treatment center.

7.706.13 Financial Operation

A. An annual budget reflecting anticipated income by source and expenses by purpose, plus an accompanying balance sheet, must demonstrate that the agency has assured resources to carry out its defined purpose through its first year of operation and must be submitted with the original license application.

B. The center shall maintain a competent accounting system, and the financial records of the center shall be available for inspection by staff members of the department.

C. Each day treatment center whose total annual expenditures exceed $100,000 shall provide for an annual audit of all accounts by a certified public accountant who is not an employee of the center nor a member of the governing body. Centers with less than $100,000 total annual expenditures may submit un-audited financial statements compiled by agency personnel.

7.706.14 Personnel

A. Each staff member of the day treatment center shall evidence an interest in and knowledge of children and concern for their proper care and well-being.

B. Each staff member of the day treatment center shall obtain a physical examination which shall be performed during the six-month period preceding employment by the center. This examination shall have been performed by a physician or a qualified nurse practitioner licensed to practice in the State of Colorado and shall verify that she/he suffers from no illness or communicable disease, including tuberculosis, that would adversely affect children in care. A statement, signed by the physician or nurse practitioner, shall be submitted to the center and retained in the personnel files. Subsequent statements shall be submitted annually and as required in a written plan signed by the physician.

C. There shall be at least one written reference regarding each staff member of the center verifying the individual's character and suitability to work with children. This reference shall be retained in the staff member's personnel file.

D. The administrator of the day treatment center shall have received a bachelor's degree from an accredited college and have completed two years of verifiable work experience with children in the field of psychiatry, psychology, social work, child development and child care, education, nursing, or other allied professions.

The director and governing body shall be responsible for assuring that the Rules Regulating Day Treatment Centers are being met.

E. There shall be at least one treatment leader on the staff of the day treatment center who shall be responsible for the coordination of treatment of each child registered at the day treatment center. The treatment leader shall have at least a master's degree in the behavioral science field such as social work, psychology, psychiatric nursing; or the treatment leader shall be a psychiatrist who is qualified and licensed to practice in the State of Colorado. In addition to education, the treatment leader shall have completed three years of treatment-oriented experience.

1. If properly qualified, the treatment leader and the administrator may be the same individual.

2. The treatment center may contract with a recognized agency for the provision of treatment services. The staff IT Member of the agency who is to fulfill the responsibility of treatment leader must meet the requirements stated in Section 7.706.14, E.

3. There shall be at least one treatment leader employed by the day treatment center for each 25 children enrolled at the day treatment center. The treatment leader(s) shall be employed and actively involved in the services prescribed for each child through supervision or direct service for the number of hours per day the treatment program operates.

F. There shall be counselors hired by the day treatment center, sufficient in number, to supervise the children and carry out the program of the day treatment center. Each counselor shall have completed a bachelor's degree in behavioral sciences or four years of experience with appropriate-aged children and be at least 21 years of age. The counselors shall work under the supervision of the treatment leader.

1. The ratio of counselors and/or treatment leader(s) to children in care shall be not less than the following schedule:

Age of Children	Staff Necessary
5 years-13 years	1 staff member: 8 children
13 years-16 years & over	1 staff member: 10 children

2. There shall be at least one counselor or treatment leader on duty at the day treatment center at any time children are present. If only one counselor is on duty, there shall be a second staff member on call and immediately available to be summoned in case of emergency.

3. Substitute counselors shall be of the same minimum qualifications as regularly assigned counselors.

G. Para-professionals must be at least 21 years of age and, under direct supervision, may assist the director, teachers, counselors, and treatment leaders with the children.

H. There shall be one staff member on duty at the center at all times who holds a current Red Cross first aid card or equivalent and CPR card.

7.706.15 Child Care Services [Rev. eff. 6/1/12]

A. Admission of the children to the day treatment center shall be limited to and in keeping with the stated purpose and goals of the center.

1. Intake policies of the center shall be clearly defined in writing and shall be reviewed and modified as necessary.

2. At intake the center shall obtain:

a. Identifying information necessary for the child's record as required at Section 7.706.18, A.

b. Psycho-social history of the child.

c. A statement about the health history of the child which includes at least the immunization record; information and instruction for care of each child who has a chronic or handicapping problem such as seizures, asthma, diabetes, allergies, heart or respiratory illness or drug addiction; date of last physical examination. If child has not had a physical examination within the past twelve months, such examination shall be completed within thirty days of admission to the program. Subsequent examinations shall be obtained as required by a physician or nurse practitioner licensed to practice in Colorado.

d. The center shall obtain written permission for the following from the person or agency having custody:

1) Permission to treat the child.

2) Permission to obtain emergency medical care in the event that the child has an accident or illness requiring medical attention when parent or guardian is unavailable.

3) Permission to provide transportation to and from the center or for center-sponsored activities if necessary.

4) Permissions for physical management, restraint and seclusion as required in Section 7.714.53, et seq.

B. For each child in the day treatment program, long range and short term goals shall be established and a case plan written which includes anticipated behavioral changes of the child and projected length of participation in the day treatment program. Goals and case plans shall be evaluated at least monthly. The discharge plans shall become part of the case plan and shall describe the child's behavior at the time of discharge from the day treatment program. The treatment leader shall be responsible for establishment and signing the case plans.

1. Persons to be involved in the process of case planning and periodic evaluation shall include a staff member of the agency having referred the child, the parent or guardian, as appropriate, and staff members of other agencies serving the child.

2. A monthly progress report shall include a description of the child's behavior, summary of the treatment activities, and revision of the case plan. The report shall be forwarded to the referring agency and reviewed with parent or guardian monthly for the first six months that the child is in the center and quarterly thereafter.

3. The center shall maintain open communication with parents, guardians and/or referring agency and include each party in the treatment plan and reviews, as may be appropriate for each family and student.

C. Treatment shall be provided to each child enrolled in the center pursuant to his/her case plan. Treatment sessions with members of the child's family shall be included, as deemed necessary and as part of the case plan. Each child and/or his/her family shall participate in at least two weekly sessions of individual therapy, group therapy or family therapy. All services shall be documented in the child's file.

D. If the child is attending a school operated by the day treatment program, a plan shall be established with appropriate school personnel of the school most recently or currently attended and with the child's parent(s) or guardian(s) for the education of the child based upon his/her particular needs and special ability.

E. Each day treatment center shall establish a schedule or a plan of activities which shall indicate the plan for educational and treatment services, as well as other services such as recreation and employment as appropriate for children in care.

F. Outdoor and indoor recreational equipment and material shall be provided in sufficient variety and quantity so the center may adequately sponsor and supervise necessary recreational activities. Games, toys, equipment, and arts and crafts material shall be selected according to age, number of children, and with consideration of the needs of children to engage in both active and quiet play. All equipment and materials shall be of quality to assure safety, and shall be of a type which allows for imaginative play and creativeness.

1. The center shall establish a written policy related to the participation of children in potentially dangerous recreational activities which include the use of such equipment as trampolines, trail bikes, snowmobiles, boats, bodybuilding equipment and such activities as archery, riflery, horseback riding and backpacking (see Rules Regulating Children's Camps).

2. A staff member shall be assigned the responsibility for supervision and coordination of the total recreational program including training and supervision of staff and volunteers.

G. As appropriate to the child's age and ability and as indicated in the case plan, the child shall be offered guidance and help in obtaining paid or voluntary work assignments. If employment services are part of the program of the day treatment center, one center staff member shall be assigned the responsibility of coordinating such work arrangement and shall know the employer of the child, the specific type of work and conditions of employment.

H. Each child shall receive assistance or supervision needed to help him/her establish good habits of personal care, grooming and hygiene.

I. Only prescribed medicines labeled with the child's name, name and strength of the medicine, directions for use, date filled, prescription number and name of practitioner shall be given with the written consent from the child's parent or guardian. Medicines must be in the original container. A record of medication administered which includes the child's name, the date and time the medication was administered, the name and dosage of the medication, and the name or initials of the staff person who administered it shall be maintained in the child's file. There shall be one staff member on duty at all times designated to administer and record all medication. The responsible staff person must have completed State approved medication administration training and have documentation on file. All medicines and drugs shall be kept in a locked storage area inaccessible to children.

J. Children who are in the day treatment center for more than four hours, day or evening, shall receive a meal.

1. If the facility provides the meal, menus shall be kept for at least a two week period, and there shall be a documented review periodically by a qualified nutritional consultant. Children shall not be given foods which are contrary to their religious beliefs or which are known to cause an allergic reaction or health hazard.

2. Drinking water shall be freely available to children.

K. Any vehicle used for transportation of children and the vehicle driver shall meet the following regulations:

1. Vehicles shall be licensed in accordance with Colorado state law, and drivers shall comply with applicable laws of the Colorado State Department of Revenue, Motor Vehicle Division, and ordinances of the municipality in which the day treatment center is located.

2. The drivers shall hold a valid Standard First Aid Certificate or equivalent and CPR card.

3. Only enclosed vehicles shall be used to transport children except an enclosed pickup truck shall not be permitted. All seats must be forward-facing and shall be securely fastened to the vehicle body. A seat belt or booster seat for children under 40 pounds shall be provided for each seat. Only the number of passengers that can be comfortably seated on passenger seats shall be permitted in the vehicle. Each occupant shall be sitting when the vehicle is moving. Passengers shall not sit on the floor.

4. Each vehicle shall be equipped with a first aid kit, an operable fire extinguisher and seat belts in the front seats.

5. The day treatment center shall carry public liability insurance on vehicles used for transportation of children in the day treatment program.

6. The staff ratio required at the day treatment center shall be maintained in any vehicle when transporting children from the day treatment center. The driver may be considered in the staff ratio.

7. The center shall receive written permission from parents or guardians for transportation of a child to and from a center or for center-sponsored excursions.

7.706.16 Behavior Management [Rev. eff. 6/1/12]

A. Each day treatment center will have written documentation of policies and procedures that describe the treatment model upon which the behavior management system is based and who shall be responsible for disciplinary measures.

B. The behavior management system must be explained to parents/guardians and to children taking into account the child's developmental and cognitive level.

C. The behavior management system must include, at a minimum:

1. Positive constructive or educational components including but not limited to diversion, withholding of privileges, talk with the child about the situation, positive reinforcement, skill training, and skill development.

2. Clear rules and expectations with predictable, consistent consequences or interventions that will be used by staff members to reinforce positive behaviors and to address disruptive, off-task or unsafe behaviors in the program.

3. A continuum of de-escalation and redirecting techniques to deal with disruptive, escalating or unsafe behaviors.

4. A review process for addressing chronic behavior problems or serious acute problems in which a child is not responding to the behavior management program as being implemented.

D. The program will have a monitoring process of the behavior management system to assure both consistency in implementation and for continuous quality improvement as needed to address changing client needs and behaviors.

E. Physical management will be considered an extreme level of intervention at the day treatment level. The occurrence of restraints for a particular child will require a review as described in Section C, 4 above. The goal of these reviews will be to eliminate restraints for the child by reassessing the identified problem, adjusting the treatment plan, utilizing additional resources or other such interventions including the evaluation of whether day treatment is a level of care at which the child can successfully function.

F. The behavior management system will include, but not be limited to, any of the following:

1. No child shall be punched, shaken, pinched, bitten, roughly handled or struck by an inanimate object by staff members of the day treatment center.

2. Authority to discipline shall not be delegated to other children.

3. Separation when used as discipline shall be brief and appropriate to the child's age and circumstances, and the child shall be within hearing and visual observation of an adult in a safe, lighted, well-ventilated room. No child shall be secluded in a locked room or closet.

4. No child shall be punished for toileting accidents.

5. Verbal abuse or derogatory remarks about the child, his family, his race, religion or cultural background shall not be used or permitted.

6. No child shall be force-fed.

7. Meals may be provided individually, but deprivation of meals shall not be used as punishment.

8. No child shall be subjected to physical harm or humiliation.

9. Seclusion.

G. Disregard of any of the foregoing disciplinary rules or any disciplinary measure resulting in physical injury or abuse of any child shall be grounds for the denial, revocation, suspension, or making probationary of the license.

7.706.17 Physical Management [Rev. eff. 6/1/12]

Any physical management, restraint and seclusion shall comply with the rules found at Section 7.714.53, et seq., and the applicable definitions in Section 7.714.1.

7.706.18 Records

A. A record of admission shall be completed for each child prior to, or at the time of, admission to the day treatment program and shall include:

1. Necessary identifying information including the child's name, address, telephone number, birth date, sex; name, address, telephone number of parent(s) or guardian(s); name and relationship of person with whom child is living, if different from parent(s) or guardian(s); address and telephone number at the location person(s) responsible for child can be reached when child is participating in the treatment program; name, address and telephone number of individual to contact in emergency if parent(s) or guardian(s) is unavailable; name, address and telephone number of referring agency and referring worker; physical description of the child, description of child's behavior and personal habits, health and immunization record; name and address of individual who may call for the child if the child is not to leave the center on his own; name, address and telephone number of child's physician or the clinic where medical care is obtained.

2. A current medical statement, records of medication provided to the child and records of all injuries occurring while in care at the center.

3. Written permissions as required at Section 7.706.15, A, 2, d.

4. A case plan, a summary of the periodic evaluations of the child's progress and resultant changes in the case plan. The evaluation summary shall include the date and the individuals who participated, as well as a description of the child's progress toward the objectives outlined in the case plan.

5. A summary of the discharge of the child from the center which includes at least the date of the discharge and reason for child's discharge from program.

B. A daily attendance chart indicating the names of children who attended each session each day shall be maintained.

C. Personnel record for each staff member which includes the following shall be maintained: name, address, telephone number, birth date, education and training, work experience, employment reference, statements of physician or nurse practitioner; names, addresses and telephone numbers of persons to be notified in event of an emergency; date of employment; copy of first aid card or equivalent and CPR training, and medication administration training, if appropriate.

D. Administrative records which shall be on file at the center include: current health department inspection report, current fire department inspection report, a list of current staff members and substitutes, and a staffing pattern.

7.706.19 Physical Requirements for a Safe and Adequate Center [Rev. eff. 4/1/15]

A. The day treatment center must declare to the Colorado Department of Human Services the address of each building which will be used by the day treatment center, the anticipated hours of use of the building by the day treatment center, and the type of use of each building by the day treatment center.

B. The licensing representative must inspect and approve the entire premises of each facility to be used or in use by the day treatment center, including, but not limited to, the building, the grounds surrounding the building, the basement or attic, if accessible, any other buildings on the grounds, such as garage, storage areas and carports.

C. Each facility used by the day treatment center must be equipped with adequate heat, light and ventilation for safe and comfortable occupancy.

D. All heating units must be installed and maintained with safety devices to prevent fire, explosions, and other hazards. No open-flame gas or oil stoves, hot plates or un-vented heaters must be used or heating purposes.

E. Closets, attics, basements, cellars, furnace rooms and exit routes must be kept free from accumulation of extraneous material such as discarded furniture, furnishings, newspapers or magazines. Combustibles, such as cleaning rags, mops, cleaning compounds, must be labeled and stored in well-ventilated areas. Storage of gasoline, kerosene, fuel oil and other flammable materials must meet requirements of the safety and fire code.

F. In each facility there must be at least two approved, alternate, widely-separated means of egress from each floor of the building to safe and open space at the ground level.

G. No lock or fastening to prevent free escape from the inside of the room or building used by children must be permitted. Exit hardware must be of the single-action type.

H. Exit doors must be obvious and marked by exit signs.

I. The route to each exit must be conspicuously indicated in such a manner that each occupant of a building or structure who is physically and mentally capable will readily know the direction of the escape from any point. Each path of escape must be so arranged or marked in such a manner that the way to a place of safety outside is unmistakable. Exitways and pathways to exitways must be unobstructed at all times.

J. Any accessible areas beneath stairways which will be used as exitways by children must be enclosed with one-hour fire resistant material.

K. In each building used by the treatment center, fire alarm facilities must be provided to warn occupants of the existence of a fire so that they may escape, or to facilitate the orderly conduct of fire exit drills.

L. Each facility must have a telephone, and near the telephone must be located the numbers of an emergency medical facility, the local fire and police departments, and other emergency numbers including poison control, if available.

M. If weapons are on the property of the facility, they must be rendered totally inoperable and must be locked up to prevent unauthorized use. Ammunition, projectiles such as arrows or other items which can be used to make the weapon operable, must be; locked separately. Weapons must not be transported in any vehicle in which children are riding unless the weapons are made inoperable and inaccessible.

N. When a swimming pool is provided, it must meet the requirements of the Colorado Department of Public Health and Environment or local unit. Safety precautions must include protective fencing, nonskid surface of at least four feet adjoining pool sides, and winter coverage which must exclude plastic or inflatable-type domes. A lifeguard, who holds an advanced life saving certificate, must be in attendance at all times when the pool is in use.

O. The Colorado Department of Human Services will establish the number of children who may be served at any one time in the building(s) used by the day treatment center for school, recreation or therapy, established on the basis of one child per twenty square feet of space within the rooms which are to be used. Areas within the building which are to be used for bedroom, kitchen, office, hallways, or bathroom cannot be counted as space available for use by the children at the day treatment center.

P. Within the buildings to be used by children in the day treatment program, there must be one toilet and one lavatory for every thirty children in attendance.

Q. Arrangement must be made for personal belongings of each child while in attendance at the center.

7.707 RULES REGULATING FAMILY CHILD CARE HOMES [Rev. eff. 1/1/10]

All family child care homes must comply with the "General Rules for Child Care Facilities", "Rules Regulating Special Activities", and the "Rules Regulating Family Child Care Homes."

7.707.1 (None) [Rev. eff. 6/1/12]

7.707.2 DEFINITIONS AND TYPES OF FAMILY CHILD CARE HOMES [Rev. eff. 1/1/10]

7.707.21 Definitions [Rev. eff. 1/1/10]

"AAP" means the American Academy of Pediatrics.

"ASTM" means the American Society for Testing and Materials. ASTM is an organization that coordinates the development of voluntary industry standards that supplement mandatory standards such as information to the public on Standard Consumer Safety Specification on Toy Safety (ASTM F-963) and other voluntary standards that cover specific children's products.

"Accessible" means children being able to obtain equipment and materials without adult aid, may be age/development specific.

"Adverse or negative licensing action" means a final agency action resulting in the denial of an application, the imposition of fines, or the suspension or revocation of a license or the demotion of such a license to a probationary license.

"Age of child(ren) in child care" means any child(ren) that will count towards provider's license capacity, is between the age of birth to eighteen years of age, is in care for supervision in the parent(s) absence for a part or the whole of any day, and is not the provider's own child(ren).

"Age of provider's own child(ren) that counts towards license capacity" means any birth, adopted, step or foster child(ren) of a provider whose age ranges from birth to twelve years of age.

"Aide or staff aide" means an individual who assists the provider or substitute provider in the care of children at a family child care home. An aide or staff aide must never be allowed to supervise a child(ren) alone. The provider or substitute provider must always be present at all times when the aide or staff aide is providing care for a child(ren).

"Approved sleeping equipment" means equipment that is appropriate for the age of the child, is intended for sleep or rest, and allows the child freedom of movement in a safe and sanitary manner.

"Available" means materials or equipment that is not immediately accessible to children, but which may be introduced with adult aid.

“Blocked telephone” means a telephone that will not accept telephone calls when caller ID says “unavailable”. This does not include telephones that require the caller to enter a ten digit telephone number from the telephone that is being called from or require the provider to have their name listed in a telephone directory.

“Choking hazard” means an item that presents the possibility of restriction or elimination of airflow into the lungs.

“CPR training” means cardiopulmonary resuscitation for adult, infant, and child.

“Clean” means to be free of visible dirt and debris or to remove dirt and debris by vacuuming or scrubbing and washing with soap and water.

“Complaint severity level” means the level of seriousness (zero to five) the State Department assigns to a complaint reported against a family child care home based on the severity of the allegation(s). The severity level assigned determines the timeframe in which the allegation(s) must be investigated by the licensing specialist.

“Compromise” means to expose to possible loss or danger.

“Culturally sensitive” means to encourage, share and explore the differences and similarities of heritage and culture, and its effect on learning, values, and behavior.

“Custodial or control speech” means using speech to direct or influence authority over a child(ren) by the use of directive speech to change a behavior.

“Danger” means exposure to harm or injury.

“Decorative pond” means an artificially confined body of water which is usually smaller than a lake. The pond can be decorated with large and small rocks, water lilies, pond plants, tadpole, fish, and have features such as lights, waterfalls and fast moving water.

“Derogatory” means to belittle, diminish, and express criticism or a low opinion of.

“Developmentally appropriate” means to provide an environment where learning experiences are meaningful, relevant, and are based upon a child’s individually identified strengths and weaknesses, interests, cultural background, family history and structure.

“Director” means an individual that has been evaluated and received a written letter that verifies that he/she meets the Colorado State Director qualification requirements for a large child care center.

“Discipline” means to punish in order to bring a child’s behavior under control.

“Disinfect” means to eliminate germs from inanimate surfaces through the use of chemicals (e.g., products registered with the U.S. Environmental Protection Agency as “disinfectant”) or a solution of household liquid chlorine bleach and water.

“Early Childhood Mental Health Consultant” (ECMHC) means a consultant who provides culturally sensitive and primarily indirect services for children, birth through six years of age in group care and early education settings.

"Early Childhood Mental Health Consultation services" means the provision of services that promote social and emotional development in children and transform children's challenging behaviors. This includes capacity building for providers and family members; directly observing and interacting with children and the care giving environment; and, designing and modeling interventions that involve changes in the behaviors of family members and caregivers. It also includes collaboration with providers, employees, volunteers, and family members and caregivers who intervene directly with children in group care, early education and/or home settings.

"EQ I/T" means the Department approved Expanding Quality Infant/Toddler training for child care providers.

"Emergency" means a sudden, urgent, usually unexpected occurrence or occasion requiring immediate action.

"Emergency or urgent situation" means a personal or family situation that is critical in nature, which requires the provider to take immediate action; and leave the home to handle the emergency situation.

"Employee" means paid or unpaid individual that cares for or assists with the care of children.

"Equally qualified" means that the employee or substitute provider has the same required training and qualifications as the primary provider as specified in the Rules Regulating Family Child Care Homes.

"Extreme weather" means weather conditions that require unusual or immediate action to reduce exposure to harm or injury.

"Fall zone" means the distance that a child can fall from elevated equipment based upon the child's age and size.

"First Aid training" means training in which a person reacts to injuries and performs simple emergency medical care procedures before emergency medical professionals are available as necessary.

"Flexibility" means the provider has the ready capability to adapt to new, different, or changing requirements of parent(s) or guardian(s) for child care.

"Frequently" means to occur often; many times and at short intervals.

"Gentle physical holding" means to carefully hold a child with the arms, without force.

"Guidance" means a way of teaching that empowers children to make decisions that are ethical, intelligent, and socially responsible.

"Guidance approach" means the use of guidance, distinct from discipline, to reduce the need for and resolve the occurrence of mistaken behavior in ways that are non-punitive.

"Harsh treatment" means treatment that is ungentle and unpleasant in action or effect; unpleasantly severe; stern; or cruel.

"HealthCare Plan" means the document contains written instructions about a specific health condition including the when and how specific interventions are to be carried out in a school or child care setting. This document should be signed by the child's health care provider and parent. Health Care Plans can be collaboratively created by the child care health consultant, the child's parents, health care provider and center staff, and are necessary for the care of children with chronic health care conditions such as asthma, seizure disorder, diabetes, or severe allergy. Health Care Plans may also guide the care of children with acute conditions that may need short-term special management in the group care setting such as child returning to care with a cast, or after a surgical intervention.

"Health care professional" means an organization or person who delivers proper health care in a systematic way professionally to any individual in need of health care services.

"Health care provider's scope of practice" means the boundaries and rules within which a fully qualified medical practitioner, with substantial and appropriate training, knowledge, and experience, may practice in a field of medicine or other specifically defined field. Such practice is governed by requirements for professional accountability.

"Home remedy" means a non-medical treatment to attempt to cure or treat an ailment with common household items or foods.

"If applicable" means if the rule should be applied depending on the circumstances of the situation.

"Immediately" means without delay or hesitation, without any interval of time.

"Interactive learning" means a method of learning through hands on activities that help a child gain knowledge and skills by connecting with information and experiences provided by the provider.

"Intoxicated" means that a person is under the influence of drugs or alcohol to the point that his/her actions and/or behavior presents an immediate danger to her/himself or others.

"Language development materials" means materials that focus on the development of listening and speaking skills, and contains experiences which familiarize children with pre-reading and pre-writing activities.

"Lead poisoning" means poisoning by a toxic metal that is found in and around homes, in lead-based paint, chipping paint, or lead dust from deteriorated paint. Lead may cause a range of health effects, from behavior problems and learning disabilities, to seizures and death.

"Legal signature" means the parent's full signature that includes both the first and last name.

"Lockdown drill" means a drill in which the occupants of a building are restricted to the interior of the building and the building is secured.

"Lost child" means the provider is unable to find the child. The child is no longer in the care or supervision of the provider.

"Mental Health Practitioner" means a mental health professional who offers services for the purpose of improving an individual's mental health or to treat mental illness.

"Nationally recognized" means to be known in the majority of businesses or residential areas of the United States and that may meet local or national accreditation standards.

"Offered" means materials, equipment or activities, including meals, which are presented as options to children but are not required or forced, to be utilized or engaged.

"On occasion" means from time to time, a special event or ceremony, or irregularly.

"Organic materials" means materials relating to, or derived from living organisms.

"Pattern" means repeating an activity at regular intervals.

"Pedodontist" means a pediatric dentist, specializing in children from birth to four years of age.

"Periodically" means an ongoing event or activity that occurs without an established pattern.

"Permanent climbing equipment" means climbing equipment installed that is stable, cannot be overturned or displaced, and cannot be moved or relocated to another area without assistance.

"Physical restraint" means the use of bodily, physical force to involuntarily limit an individual's freedom of movement; except that physical restraint does not include the holding of a child by one adult for the purposes of calming or comforting the child.

"Place of residence" means the place or abode where a person actually lives and provides child care on a regular, ongoing basis.

"Potential threat" means the possible exposure to harm or injury.

"Prescriptive authority" means the legal right of a medical person to prescribe medications under Colorado law.

"Protective equipment" means the use of protective head, knee, elbow and ankle equipment to protect a child riding on a scooter, bicycle, skateboard or rollerblades.

"Protective surfacing" means an approved material that is used beneath climbing equipment and is designed to protect a child who falls from the highest designated play surface on a piece of equipment to the protective surfacing below.

"Provider" means the person that resides in the home and provides direct care, supervision and education to child(ren) in care at least 60% of the daily hours of operation of the family child care home.

"Psittacine birds", means all birds commonly known as parrots, cockatoos, cockatiels, macaws, parakeets, lovebirds, lories or lorikeets, and other birds of the order psittaciforme, may also be called hookbills because the upper beak is turned downward.

"Punished" means to impose a penalty on a person. The causes for punishment may be for a fault, offense or violation.

"Regionally accredited" means colleges and universities which earn regional accreditation status by meeting acceptable levels of quality and performance. The accrediting bodies for higher education are Middle States Association of Colleges and Schools, Northwest Association of Colleges and Schools, North Central Association of College and Schools, New England Association of Colleges and Schools, Southern Association of Colleges and Schools, and Western Association of Colleges and Schools.

"Regular basis" means occurring with normal frequency or routine schedule.

"Relative" means any of the following direct relationships by blood to the first degree, marriage, or adoption: parent, grandparent, son, daughter, grandson, granddaughter, brother, sister, stepparent, stepbrother, stepsister, stepson, stepdaughter, uncle, aunt, niece, nephew or first cousin.

"Reside" means to be in a residence, to dwell permanently or continuously, to occupy a place as one's legal domicile.

"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.

"Reverse evacuation drill" means a drill in which persons seek shelter and safety inside a building when said persons are outside the building and are faced with a threat, such as an armed individual or a dangerous animal.

"Routine medications" means any prescribed oral, topical, or inhaled medication, or unit dose epinephrine, that is administered pursuant to Section 26-6-119, C.R.S.

"Safe" means free of hazards posing danger of injury including, but not limited to, "keep out of reach" items, protrusions, broken items, areas of entrapment, strangulation or choking hazards, insufficient cushioning, poisonous chemicals, etc.

"Sanitized or sanitary" means to remove filth or soil and some small bacteria. For an inanimate surface to be considered sanitary the surface must be clean and the number of germs must be reduced to such a level that disease transmission by that surface is unlikely. This procedure is less rigorous than disinfection and is applicable to a wide variety of routine housekeeping procedures.

"Satisfactory experience" means the adequate practical knowledge, skill or practice necessary.

"Serious" means an injury or illness of an urgent nature needing immediate emergency attention.

"Serving" means an amount of food or beverage that is appropriate to meet a child's nutritional and developmental needs.

"Severe weather drill" means a drill in which occupants of a building seek shelter appropriate to the severe weather threat, such as a blizzard, electrical storm, flood or tornado.

"Shelter-in-place drill" means a drill in which the occupants of a building seek shelter in the building from an external threat.

"Social-emotional development" means the development of self-awareness and self-regulation as reflected in the desire and growing ability to connect with others and the ability to experience, express and regulate a full range of emotions, to pay attention, make transitions from one activity to another, and cooperate in the context of relationships with others.

"Soft bedding" means, but is not limited to, any soft sleep surface like a water bed, sofa, pillows, bumper pads, soft materials like fluffy blankets, thick blankets and/or comforters, sheep skins, plush toys, and stuffed animals.

"Special need" means a child may have mild learning disabilities or profound developmental disabilities of mental functioning and/or bodily movement; food allergies or terminal illness; developmental delays that catch up quickly or remain entrenched; occasional panic attacks or serious psychiatric problems.

"Substitute provider" means a paid, volunteer or contract individual responsible for caring for the children in the capacity of the provider during the provider's absence.

"Sweet foods" means a sweet bread or grain product that is high in fat and /or sugar.

"Under the influence" means that a person is under the influence of drugs or alcohol to the point that his/her actions and/or behavior present an immediate danger to her/himself or others.

"Universal precautions" means safe work practices to prevent exposure to blood and bodily fluids.

"Urgent" means an unforeseen combination of circumstances that requires immediate attention.

"USDA" means the United States Department of Agriculture.

"Varying" means to be at different times or different days; to give variety to activities; to bear no resemblance to a prior activity.

"Verbal abuse" means abusive behavior involving the use of language that is demeaning and is intended to insult, manipulate, ridicule, or offend. Harmful acts and the use of harsh or coarse language often characterize it.

"Volunteer" means a person who performs a service willingly and without pay.

"Written medication order" means a document for a specific medication for a specific child signed by the child's health care provider. This must be a person with prescriptive authority. The order shall include the child's name, medication, dose, time, route, and for how long the medicine is to be given. Orders for children over two years of age can only be valid for a period of up to one year, but may only be for a very brief duration of time as well. Children over two may need written medication orders more frequently since the dosage of the medication will change with the child's weight. Written orders may also include information on the reason the medication is being given, potential side effects and any special instructions for administration.

7.707.22 Types of Family Child Care Homes [Rev. eff. 6/1/12]

All Family Child Care Home licenses, except infant/toddler, are issued with an age range for children from birth to eighteen (18) years of age. This allows for the care of older children with special needs. Each individual provider will determine the age range of children that he/she will enroll in the provider's child care home. The providers own birth, adopted, step or foster children twelve (12) years of age and older do not count in the provider's license capacity.

The capacity for a Family Child Care Home (generally referred to within these rules as "the home") is determined by the amount of indoor and outdoor space designated for child care, as well as the following factors.

A. A "Family Child Care Home" (FCCH) is a type of family care home that provides less than twenty-four (24) hour care at any time for two (2) or more children that are unrelated to each other or the provider, and are cared for in the provider's place of residence.

B. In a regular (FCCH) home, care may be provided for six (6) children from birth to eighteen (18) years of age with no more than two (2) children under two (2) years of age.

   1. Care also may be provided for no more than two (2) additional children of school age attending full-day school. School-age children include children six (6) years of age and older who are enrolled in the first grade or above. A child enrolled in a kindergarten program is not considered a school-age child until the child begins attending kindergarten a year before they enter first grade.

   2. Residents of the home under twelve (12) years of age who are on the premises and all children on the premises for supervision are counted against the approved capacity, except where specifically indicated otherwise. Residents of the home include, but are not limited to, birth, adopted, step or foster children of the provider.

C. A three (3) under two (2) license is a type of license that allows a provider to care for six (6) children from birth to eighteen (18) years of age with no more than three (3) children under two (2) years of age, with no more than two (2) of the three (3) children under twelve (12) months; the capacity includes the provider's own children under twelve (12) years of age. This license type may be approved with the following conditions:

   1. The licensee has held a permanent license to operate a family child care home for at least two (2) years in Colorado immediately prior to the issuance of the license that would authorize the care of three (3) children under two (2) years of age; and,

2. The licensee has completed the State Department approved Expanding Quality Infant/Toddler course of training; and,

3. In the past two years, the licensee has had no substantiated complaints with a severity level of one (1) to three (3), consistent or willful substantiated rule violations of ratio, supervision, safety, or injury to a child observed during any licensing visit, or adverse licensing action.

4. Care of additional children of school age is not authorized; and,

5. Licensees issued a three (3) children under two (2) years of age license are approved for both the three (3) under two (2) and the regular license capacities and may switch between the two (2) capacities without notifying the State Department as long as they are in compliance with all licensing rules.

D. An infant/toddler license is a type of family care home that provides less than twenty-four (24) hour care only for children who are between birth and three (3) years old. This license type may be approved with the following conditions:

1. If there is one (1) provider, there may be a maximum of four (4) children, with no more than two (2) of the four (4) children under twelve (12) months of age, including the provider's own children. The provider’s own children, under the age of twelve (12), count in the capacity of four (4).

2. If there are two (2) equally qualified providers, as specified in Section 7.707.31, B, 3, caring for children at all times when children are present, there may be a maximum of eight (8) children between birth and three (3) years old, and no more than four (4) of those children can be between birth and one (1) year old, including both providers' own children.

3. The provider has completed the State Department approved Expanding Quality Infant/Toddler (EQ I/T) course of training.

4. A provider that has also been licensed as a regular and three (3) under two (2) provider in the past, and is approved for an infant/toddler license, has the flexibility to provide care on any given day for the ages and capacities of a regular or three under two license without written approval of the State Department, as long as the provider is in compliance with all applicable rules at all times.

E. A large child care home is a family child care home that provides care for seven (7) to twelve (12) children.

1. Child care may be provided to children from birth to eighteen (18) years of age. The provider needs an assistant when the ninth child arrives at the facility.

2. Care may be provided to no more than two (2) children under two (2) years of age.

F. The Experienced Child Care Provider

1. An Experienced Child Care Provider (ECCP) home is a licensed child care home where care is approved for no more than nine (9) children of different age combinations depending upon which option the home is operating.

2. The requirements for an Experienced Child Care Provider are:

a. Have been a licensed family child care home provider in Colorado for at least the last six (6) consecutive years; equal experience operating as a licensed military family child care home is acceptable; and,

b. Have completed ninety (90) clock hours of training within the preceding six (6) years, including the State Department approved infant/toddler course. The ninety (90) hours of training does not include licensing training universal precautions, First Aid and CPR, and medication administration training; and,

c. Have had no adverse licensing action;

d. Have had no adverse action taken against the provider's license in the preceding two (2) years; and,

e. Comply with local zoning restrictions.

3. Applying for the Experienced Provider License

At least sixty (60) calendar days prior to the proposed date of operation as an experienced provider, the applicant must submit to the State Department a completed and signed experienced provider application form, which:

a. Affirms compliance with all the rules for family child care home providers and experienced providers; and,

b. Affirms that the 90 clock hours of training have been completed; and,

c. Includes an agreement to waive the right to appeal rules related to capacity and space requirements; and,

d. Affirms the provider understands that the experienced provider's license will immediately revert to a regular license if capacities are exceeded at any time.

4. ECCP Options Table

The following chart describes the various options available to the experienced family child care home. Providers may change options without notifying the State Department, as long as the home is in compliance with one option at any one time and all licensing rules.

Experienced Child Care Provider License

All options include provider's own children under twelve (12) years of age.

Number of Children	Total Children in Care at a Given Time	Birth Up to School-Age	Additional School-Age	Number of Children Under 2 Allowed	(Of Those Under 2) Number Under 12 Months Allowed
Option 1	9	7	2	2	2
Option 2	9	8	1	2	2
Option 3	9	5	4	2	2
Option 4	9	6	3	3	2
Option 5	4	4	0	4	2

7.707.3 PERSONNEL [Rev. eff. 1/1/10]

All infant/toddler family child care homes and large family child care homes must meet all of the personnel requirements in Section 7.707.31, except where rules specific to infant/toddler homes and large family homes replace other rules.

7.707.31 Requirements for Personnel [Rev. eff. 6/1/12]

A. General Requirements

1. Primary providers must physically reside at the family child care home and must provide the child care.

2. Primary providers and/or substitutes must be at least eighteen (18) years of age. Aides must be at least sixteen (16) years of age. Aides and volunteers shall work under the direct supervision of a primary provider at all times.

3. Providers, employees, substitutes, and volunteers must demonstrate an interest in and knowledge of children and a concern for their proper care and well-being.

4. Children for whom the provider has custody and responsibility must not have been placed in foster care or residential care because the provider or other resident of the home was abusive, neglectful, or a danger to the health, safety, or well-being of those children.

5. Providers must not be under the influence of any substance that impairs their ability to care for children.

6. The primary provider is responsible for ensuring that all employees, substitutes and volunteers are familiar with the children in care, the Rules Regulating Family Child Care Homes rules, the home's policies, and the location of children's files and emergency numbers.

7. The primary provider must plan for the selection, orientation, training and/or staff development of any employee, volunteer, or substitute.

8. The primary provider must plan for and supervise the care and activities of children.

9. All providers and all persons residing in the home must submit to the State Department at time of original application on the form required by the State Department, a health evaluation signed and dated by a licensed physician or other health professional.

10. Subsequent health evaluations for the provider and children residing in the home who are less than twelve (12) years of age must be submitted every two (2) years or as required in a written plan signed by a physician or other health professional. A new family member and/or a new resident of the home must submit to the State Department, within thirty (30) days from the date the individual began living in the home, a State Department approved health evaluation form signed and dated by a licensed physician or other health professional.

11. If, in the opinion of a physician or mental health practitioner, a physical, medical (including side effects of medication), emotional, or psychological condition exists at any time that may jeopardize the health of children or adversely affect the ability of a provider to care for children, an equally qualified substitute provider must be employed, or child care services must cease until the physician or mental health practitioner states in writing that the health risk has been eliminated.

B. Infant/Toddler Home Provider Requirements

1. For an infant/toddler home with one (1) provider, that provider must be at least twenty-one (21) years of age.

2. For an infant/toddler home with two (2) providers, one (1) provider must be at least twenty-one (21) years of age and the second equally qualified provider must be at least eighteen (18) years of age.

3. Each provider must have completed one (1) year of supervised experience caring for children who are younger than three (3) years old. The provider must be able to submit to the State Department official written verification of the required experience. The experience may have been obtained as:

   a. A Colorado licensed family child care home; or,

   b. A military licensed child care home; or,

   c. A provider, in a family foster home certified for children younger than three (3) years of age; or,

   d. An employee in a licensed child care center in an infant and/or toddler program.

C. Large Home Provider Requirements

1. The licensee must be at least eighteen (18) years of age, the primary provider, and must reside in the large child care home.

2. The primary provider at a large child care home must meet one of the following:

   a. A minimum of three (3) years of documented satisfactory experience in the group care of children under the age of six (6) years or as a licensed home provider in Colorado. Equal experience operating as an approved military child care home is accepted; or,

   b. A minimum of two (2) years of college education from a regionally accredited college or university, with at least one (1) college course in early childhood education, plus one (1) year of documented satisfactory experience in the group care of children as:

      1) A licensed home provider in Colorado; or,

      2) A military licensed child care home; or,

      3) A Colorado certified family foster home; or,

      4) A staff member in a licensed child care center.

   c. Current certification as a Child Development Associate (CDA); or,

   d. Completion prior to licensing of the State Department approved Expanding Quality Infant/Toddler course; and,

1) A minimum of two (2) years of experience as a licensed child care provider holding a permanent license in Colorado immediately before becoming a licensee of a large child care home; or,

2) A minimum of two (2) years of full-time experience in a licensed program. The group care shall have been with children who are under the age of six (6) years.

3. If the provider was previously licensed to operate a family child care home, there must have been no:

a. Substantiated complaints for severity one (1) to three (3) violations in the last two (2) years; and,

b. Adverse action on the license within the last three (3) years;

c. Substantiated specific rule violations of ratios, supervision, safety, or injury to a child observed during any licensing visit in the past two (2) years.

4. Staff aides must be at least sixteen (16) years of age and must work directly under the supervision of the primary provider in charge and responsible for the care of the children. If left alone with children, the staff aide or assistant provider must meet all same age and training requirements as the provider.

7.707.32 Training [Rev. eff. 6/1/12]

A. Prior to issuance of the license, the licensee and primary provider must complete:

1. A State Department approved fifteen (15) clock hour pre-licensing course of training that includes nine (9) core knowledge standards. The content of one of the standards must specifically address appropriate guidance with children and that corporal discipline is never allowed. The clock hours of pre-licensing training do not include certification in First Aid, CPR, and medication administration training; and,

2. A monitored written test or approved alternate method to verify knowledge and comprehension of the content of the training materials must be administered by the trainer to the trainee at the end of the pre-licensing training course. The trainee must have a passing score of no less than 80%. Part of approval of pre-licensing is that the provider must be able to access and understand the Rules Regulating Family Child Care Homes. The provider must take pre-licensing training for any original application except for change of address; or,

3. Individuals who are currently director qualified or have a two (2) or four (4) year degree in early childhood education from a regionally accredited college or university are exempt from pre-licensing training, except for the one and one-half (1½) hours of universal precautions training, and the section of the pre-licensing training that covers the business requirements for operation of a home; and,

4. A minimum of one and one-half (1½) clock hours of State Department approved training in universal precautions. This one and one-half (1½) hours of universal precautions training can be included as part of the pre-licensing training, in which case the total number of hours required is sixteen and one-half (16½) clock hours; and,

5. Documentation of this training must include the number of hours of training, completion date, and expiration date. This training must be renewed every three (3) years. Renewal of universal precautions training can be taken as a part of the first aid training, but must be in addition to the renewal First Aid training; and,

6. First Aid and CPR training, for all ages of children from infant to twenty-one (21) years of age; and,

7. The State Department approved course of training for medication administration.

B. Licensees requesting continuation of a permanent license shall:

1. Complete fifteen (15) clock hours of training each year. Three (3) of the fifteen (15) clock hours must be in social emotional development; and,

2. Document the ongoing training on the form designated by the State Department that is required to be submitted to the State Department every year.

3. Demonstrate a direct connection to one or more of the following core knowledge areas:

   a. Child growth and development,

   b. Healthy and safe environment,

   c. Developmentally appropriate practices,

   d. Guidance,

   e. Family relationships,

   f. Cultural and individual diversity,

   g. Professionalism,

   h. Social emotional development.

4. The fifteen (15) clock hours of training do not include recertification in First Aid and CPR.

5. To be counted for ongoing training, a provider must receive for each training, a training certificate that includes:

   a. The title of the training; and,

   b. The core knowledge area; and,

   c. The clock hours of the training; and,

   d. The name and signature of the trainer or an other approved method of verifying the name and qualifications of the trainer.

6. The trainer must have documentation of the qualifications for each topic of training conducted, which must be available for review by representatives of the State Department.

7.707.33 Substitutes [Rev. eff. 1/1/10]

All infant/toddler family child care homes and large family child care homes must meet all of the substitute requirements, except where rules specific to infant/toddler homes and large family homes replace other rules.

7.707.331 General Substitute Information [Rev. eff. 1/1/10]

A. The provider must have a plan for an urgent, emergency, personal or family situation that requires the provider to leave the family child care home immediately.

B. Any substitute must be at least eighteen (18) years old and capable of providing care and supervision of children, and handling emergencies in the absence of the provider.

C. Prior to caring for children, any substitute, except a substitute used in an urgent, emergency, personal or family situation, shall become familiar with:

1. The Rules Regulating Family Child Care Homes; and,

2. The home and provider's policies and procedures; and,

3. The names, ages and any special needs or health concerns of the children; and,

4. The location of emergency information.

D. Parents or guardians must be notified each time a substitute is used to provide supervision of all children in care in the absence of the primary provider.

E. Substitutes used in an urgent, emergency, personal or family situation must:

1. Be given the names, ages of the children, and any special needs or health concerns; and,

2. Immediately call each parent(s) or guardian(s) to notify them that the provider has been called away from the family child care home for a personal or family emergency; and,

3. If the substitute does not meet all the requirements for the position, must notify parent(s) or guardian(s) immediately to pick up their children.

F. In the infant/toddler family child care home, the substitute for the provider(s) must meet the same age requirements as the provider as specified in Section 7.707.31, C).

G. In the large family child care home, the substitute for the:

1. Primary provider must be equally qualified, as specified in Section 7.707.31, C, to provide care and supervision of children in the absence of the primary provider; and,

2. Staff aide must be equally qualified, as specified in Section 7.707.31, A, 2, to substitute for the staff aide when necessary.

7.707.34 Employees [Eff. 1/1/10]

A. Any employee who is eighteen (18) years of age and older must complete:

1. A fingerprint based criminal background record check as required at section 7.701.33.

2. The State Department mandated automated system background check for child abuse and neglect as required at Section 7.701.32.

B. Any employee who is sixteen (16) years of age to eighteen (18) years of age must only complete the State Department mandated automated system background check for child abuse and neglect.

C. Additionally, employees and substitutes for the primary provider, who provide care to children for fourteen (14) days (112 hours) or more per calendar year must complete:

1. A fingerprint based criminal background record check as required at Section 7.701.33.

2. The State Department mandated automated system required background check for child abuse and neglect as required at Section 7.701.32.

3. Verification of current certification of First Aid and CPR for all ages of children.

4. A statement of a current health evaluation, signed by an approved health care professional, that was completed within the last twenty-four (24) months.

5. Verification of current State Department approved medication administration training.

6. Verification of current State Department approved universal precaution training.

7.707.35 Volunteers [Eff. 1/1/10]

A. Volunteers cannot be used to meet staff to child ratio.

B. Volunteers must be directly supervised by the child care provider and have clearly established written duties.

C. Volunteers must be made familiar with the Rules Regulating Family Child Care Homes and the provider's written policies and procedures prior to assisting with the care of children.

D. Any adult volunteer eighteen (18) years of age or older who works more than fourteen days (112 hours) a calendar year must complete:

1. A fingerprint based criminal background record check as required at Section 7.701.33; and,

2. The State Department required automated system background check for child abuse and neglect, as required at Section 7.701.32.

7.707.36 Employee, Volunteer, and Substitute Records [Eff. 1/1/10]

A. Personnel files for each employee, substitute, and volunteer must contain all required information within thirty (30) calendar days of the first day of employment, volunteering, or functioning as a substitute.

B. The personnel files for each employee, substitute, and volunteer shall be available for review by any representative of the State Department and must include:

1. The name, address, telephone number, and birth date of the individual; and,

2. Information received from the state automated systems check on child abuse; and,

3. Information received from the fingerprint based criminal record background check as required at Section 7.701.33 for individuals eighteen (18) years of age and older; and,

4. A record of the dates and hours of employment, volunteering, or functioning as a substitute, including the first date and the final date; and,

5. Names, addresses, and telephone numbers of persons to be notified in the event of an emergency; and,

6. A signed statement:

   a. Clearly defining child abuse and neglect pursuant to state law and outlining the employee, substitute, or volunteer's personal responsibility to report all incidents of suspected child abuse or neglect according to state law; and,

   b. Verifying that the employee, substitute, or volunteer has read and understands the home's policies and procedures.

7. Official written verification of training, completion and expiration dates as required for the position including:

   a. Current First Aid and CPR for all ages of children; and,

   b. Universal precautions; and,

   c. Medication administration training.

8. Official written verification of education, work experience, and previous employment, as applicable for the position; and,

9. If obtained, a copy of a current Colorado Early Childhood Professional Credential.

7.707.37 Administrative Records and Reports [Rev. eff. 1/1/10]

A. The provider must report in writing to the State Department any critical incident as defined at Section 7.701.52 and any fire that occurs at the home which a local fire department has responded.

B. The provider must immediately telephone and also submit to the State Department within twenty-four (24) hours, excluding weekends and holidays, a written report about any child who has been lost from the provider's care and whether authorities have been contacted or not. Such report must indicate:

   1. The name, birth date, address, and telephone number of the child.

   2. The names of the parents or guardians and their address and telephone number if different from those of the child.

   3. The date, location, time, and circumstances when the child was last seen.

   4. All actions taken to locate the child, including whether local authorities were notified.

   5. The name of the provider and/or person supervising the child at the time the child was last seen.

C. The home must have a written plan and emergency response procedures that explain, at a minimum, the life saving procedures that will be followed, and how the home will function during a fire, severe weather, lockdown, reverse evacuation, or shelter-in-place emergency situation. The plan must include, but not be limited to:

1. Prompt notification of parents or guardians.

2. When local authorities will be notified.

3. How emergency transportation will be provided.

D. The following records must be kept and maintained in the files at the home for three (3) years after termination of care or employment:

1. A daily attendance sign in/sign out sheet for each child, including the time the child arrives at and departs from the home.

2. Children's records per Section 7.707.51.

3. A list of current employees, volunteers, and substitutes work schedules.

4. Employee, substitute, and volunteer records per Section 7.707.36.

5. A record of visitors and volunteers in the home during scheduled business hours.

E. Confidentiality and Retention

1. Information and records concerning all employees, substitutes, volunteers, children and their families must be maintained confidential and all required records must be stored in a secure location.

2. Employee and children's records must be available, upon request, to authorized representatives of the State Department.

7.707.4 POLICIES AND PROCEDURES

7.707.41 Statement of Policies [Rev. eff. 1/1/10]

A. At the time of enrollment, the provider must give the parent(s) or guardian(s) a written statement of the home's policies and procedures. By signing the policies and procedures document, the parent or guardian agrees to follow, accepts the conditions, and gives authorization and approval for the activities described in the policies.

B. The written policies and procedures must be developed, implemented and followed, which includes all updates, changes, and must include at a minimum the following information:

1. Admission and registration procedures.

2. Authorization of parents or other designees to pick up children, including the policy for how the provider will respond to individuals not authorized by parents/guardians to pick up a child and if a parent arrives under the influence of a controlled substance.

3. An itemized fee schedule or individual fee agreement; fee expectations when fees may be reimbursed, when child does not attend program; when child is requested to leave the program; and, authorization for field trips.

4. Procedure, including fees, when a child arrives or departs other than expected agreed upon care hours.

5. Parent and provider responsibilities for special activities or programs outside of the licensed facility, such as inclusion and/or exclusion of children and the payment of additional fees.

6. Hours of operation or individual hours agreement to include regularly closed days and applicable special program hours; policy on closure due to provider illness or family emergency and unscheduled closures.

7. Procedure for managing a situation where children remain after the scheduled closure of the facility and the parent, guardian or other emergency contacts cannot be reached. This may include notification of the local county department of social services or police, if necessary. In the event that the provider has not been approved for overnight care, the provider cannot keep the children in care beyond midnight.

8. Activities and snacks for children who remain at the home after closing.

9. Services offered for children with special needs in compliance with the Americans with Disabilities Act.

10. Acceptance of non-immunized children and notification if the provider's own birth, adopted, or step children have not been immunized.

11. Substitute care, and the clarification of responsibility for obtaining back-up care.

12. How and by whom children are supplied with appropriate clothing and equipment necessary to participate in indoor and outdoor activities, including helmets, wrist protection, and knee and elbow pads when riding a scooter, bicycle, skateboard or rollerblades.

13. Storage, loss, damage or theft of provider's or child's personal belongings.

14. Scheduled and unscheduled trips away from the family child care home; the requirement of notification of the excursion prior to the event and need for signed permission from the parent(s) or guardian(s) for the excursion and a phone number where the provider can be reached during a field trip.

15. Transportation availability, vehicle restraint requirements, and seating capacities.

16. Written authorization or denial for media use including, but not limited to, television shows, video, music, software used at the facility and time limits for all media use.

17. Meals, snacks, and parental notification of menus, and how children with food allergies are accommodated.

18. Policy on transitioning a child from either breast feeding to a bottle and/or cup, or from a bottle to a cup.

19. Behavior guidance and discipline appropriate to the age and development of the child.

20. Rest time and equipment.

21. Diapering and toilet training, including, but not limited to, process, communication, time frames, supplies, and expectation.

22. Provision of daily outside play time.

23. Use of and how often sunscreen is applied, including authorization for use of sunscreen, and how infants are protected from sun exposure without the use of sunscreen.

24. Protection of children from exposure to second hand smoke.

25. Notification of parents or guardians for handling children's illnesses, accidents, injuries, or other emergencies.

26. Specific circumstances and symptoms for not admitting ill children and conditions for re-admittance.

27. Storing, administering, recording and disposing children's medicines in compliance with the State Department approved medication administration course.

28. Adverse weather precautions to include temperature extremes; inclement weather expectations and procedures, and fee expectations if home is closed during inclement weather and notification of how to find out.

29. Emergency response procedures that explain, at a minimum, the life saving procedure that will be followed and how the home will function during a fire, severe weather, lockdown, reverse evacuation, or shelter-in-place emergency situation.

30. Reporting of child abuse, including the name of the county department of social/human services and phone number of where a child abuse report should be made.

31. Filing a complaint about a family child care home, including the name, address and telephone number of the Colorado Department of Human Services, Division of Child Care, where a complaint may be filed.

32. Where a parent may obtain the official Rules Regulating Family Child Care Homes, including the Secretary of State's website.

33. Regularly identifying on a routine basis recalled toys, equipment and furnishings and developing a plan to remove the recalled items from the home.

7.707.5 ADMISSION PROCEDURE [Rev. eff. 1/1/10]

A. An admission process must be completed prior to the child's attendance at the home and must include:

1. A pre-admission interview, by telephone or in person, with the child's parent(s) or guardian(s) to determine whether the services offered by the home will meet the needs of the child and the parent(s) or guardian(s).

2. An explanation of the provider's written policies and procedures. The child's parent(s) or guardian(s) must sign a statement indicating that they have read, received, and understand the provider's current policies and procedures.

3. A plan for payment of fees.

4. Completion of the registration information and authorizations required for inclusion in the child's record.

B. At the time of admission, the provider must obtain:

1. Contact information for parents or guardians; and,

2. Contact information for other responsible adults; and,

3. Where the parent or guardian and can be reached in the event of an accident, illness or other emergency; and,

4. The telephone number of the child’s health care provider; and,

5. Written authority to arrange for medical care in the event of an emergency; and,

6. Names of individuals authorized to take the child from the home.

7.707.51 Children's Records [Rev. eff. 1/1/10]

A. An admission record must be completed for each child prior to or at the time of the child's admission and updated annually, unless otherwise specified in these rules. The admission record must include:

1. The child's full name, date of birth, current address, and date of enrollment.

2. Family member names.

3. Parent(s) and guardian(s) home and e-mail addresses; telephone numbers, including home, work, cell and pager numbers, if the parent chooses to provide those numbers; employer name and work address; and, any special instructions as to how the parent(s) or guardian(s) may be reached during the hours that the child is in care at the child care home.

4. Names and telephone numbers of persons other than parent(s) or guardians(s) who are authorized to take the child from the family child care home.

5. Names, addresses, and telephone numbers of persons who can assume responsibility for the child in the event of an emergency if the parent(s) or guardian(s) cannot be reached immediately.

6. Names, addresses, and telephone numbers of the child's health care provider, dentist, pedadontist, and hospital of choice, if applicable.

7. Health admission information, including a health care plan, chronic medical conditions, allergies, and immunization history, shall be provided to the child care provider the first day the child attends the family child care home.

8. A dated, written authorization for emergency medical care signed and updated annually by the parent(s) or guardian(s).

9. A written record of any serious accident, illness, or injury occurring during care must be retained in each child's record, with a copy provided to the parent or guardian.

10. Written authorization, obtained in advance of the event from a parent or guardian, for a child to participate in field trips or excursions, whether walking or riding in an approved vehicle.

11. Written authorization for media use including, but not limited to, television and video viewing, music, video games, and computer use. The authorization must include approved time limits. The authorization form only needs to be on file if media use is not addressed in the home policies and procedures statement.

12. Written authorization for special activities (see Section 7.714.1).

B. All forms contained in the admission record must be current and accessible to providers, substitutes and to representatives of the State Department.

C. The complete file for each child in care must be retained by the home for at least three years after the child leaves the home. It must be available without restriction to the licensing agency and to the child protective services worker, police, child's parent(s) or guardian(s).

D. Except for the licensing authority, child protective services worker, police, and the child's parent(s) or guardian(s), children's reports and records and facts learned about children and their families must be kept confidential.

7.707.6 COMMUNICATION, EMERGENCY AND SECURITY PROCEDURES [Rev. eff. 4/1/15]

A. The home must have a working unblocked telephone that has the capacity to receive all incoming and Reverse 911 calls, and record messages during child care hours.

1. The telephone must be on the premises in the general area of the primary provider.

2. The telephone number must be made available to each parent and the licensing authority.

3. The following emergency telephone numbers must be posted near the telephone:

a. 911 or the alternate emergency number for local fire or police; and,

b. Name and phone number of at least one (1) designated emergency substitute for the provider; and,

c. Name and physical address of the family child care home; and,

d. Hospital or emergency medical clinic; and,

e. Local health department; and,

f. Rocky Mountain Poison Center number at 1-800-222-1222; and,

g. Location of children’s personal emergency numbers.

4. The telephone and alternative emergency telephone numbers for parent(s) or guardian(s) and other authorized emergency contacts of each child in care must be accessible in one designated place.

5. If 911 is not available, the provider must have a plan for accessing emergency transportation at all times.

6. The provider or substitute must notify parent(s) or guardian(s) when accidents, injuries, or illnesses occur.

7. Emergency health care providers' numbers must be accessible in one designated place.

B. Release of Children

The provider must release the child only to the person(s) to whom the parent or guardian has given written authorization. Written authorization must be maintained in the child's record. In an urgent and/or emergency situation, the child may be released to a person twelve (12) years of age or older for whom the child's parent or guardian has given verbal authorization. If the provider who releases the child does not know the person, picture identification must be required to assure that the person is authorized to pick-up the child.

C. Sign In/Out Procedure

The provider must maintain a daily sign in/out method containing the date, the child's name, the time that the child arrived at and left the home, and the parent, guardian, or authorized person's signature. A full signature is required by the parent or guardian every time the child arrives at or leaves the home. The provider may sign in or out children who arrive directly from school or an activity as needed on a daily basis. The provider must use their full signature. The parent/guardian must provide a signature on a weekly basis to verify the record.

D. Visitors

Visits from all non-family members to the home must be on the sign in/out log, including the name, date, and arrival/departure times.

7.707.7 CHILD CARE SERVICES

7.707.71 Health Care, Medication, Communicable Disease, Sun Protection, Second Hand Smoke, and First Aid Supplies [Rev. eff. 6/1/12]

A. Statements of Health Status and Immunization

1. At the time of admission, the parent or guardian must provide the following information to the provider for each child entering the home:

   a. Health information, including any known allergies, medication being taken and possible side effects, special diets required, and chronic health conditions; and,

   b. Information and health care plan on the care of each child who has an identified health condition or developmental concerns, including, but not limited to seizures, asthma, diabetes, allergies, heart or respiratory conditions, and physical or emotional disabilities; and,

   c. Documentation of immunization status or exemption, including month and year each immunization was administered. Immunizations must be updated and recorded as specified on the certificate of immunization or alternate certificate of immunization as supplied and approved by the Colorado Department of Public Health and Environment. Colorado law requires that proof of immunization be provided prior to the first day of admission.

2. Within thirty (30) days after admission, and within thirty (30) days following the expiration date, the parent or guardian of each child must submit a statement of the child's current health status or written verification of a scheduled appointment with a health care practitioner. The statement of the child's current health status must be signed and dated by a health care provider who has seen the child within the last twelve (12) months, or within the last six (6) months for children under two and one-half (2-1/2) years of age. The statement must include when the next visit is required by the health care provider. All health statements must be kept at the licensed child care home.

3. If the parent or legal guardian of a child wishes an exemption from the requirement for immunizations due to religious or personal beliefs, the child's parent or legal guardian, must complete and sign the current Colorado Department of Public Health and Environment immunization card which states the reason for such an exemption. The home has the right to refuse to admit any child if a completed current immunization card is not submitted.

4. Parent(s) or guardian(s) must be notified in the written policies if the provider's children are non-immunized, if children attending facility are non-immunized, and if children with personal and religious exemptions to immunization are accepted in care.

5. Statements of health status of children under two (2) years of age must be updated in accordance with the national pediatric recommended schedule for routine health supervision or as required in writing by health care provider.

6. Health statements for children over two (2) years to seven (7) years of age must be updated annually.

7. For children seven (7) years of age and older, health statements must be updated every three (3) years as long as the children are in care.

B. Emergency Medical Care

1. The provider must obtain written authority to arrange for emergency medical care for each child. Written authorization to obtain emergency medical care must be on file prior to or on the first day of admission and must be re-authorized annually.

2. In the event of injury or illness, the affected child must be separated from the other children in the room or area where child care is being provided and made as comfortable as possible. First Aid care must be provided as required. If additional care, medical attention, or removal from the home is indicated, the child's parent or guardian must be contacted by telephone, if possible, and medical assistance obtained without undue delay.

C. Medication

1. Any routine medication, prescription or non-prescription (over-the-counter), homeopathic or vitamin, may be administered by the provider only with a current written order of a health care provider with prescriptive authority and with written parental consent. Home remedies may never be given to a child.

a. If the routine medication involves; the administration of unit dose epinephrine, the administration must be accompanied by a written individual health care plan by the prescribing health care provider that identifies the factors for determining the need for the administration of the medication, and is limited to emergency situations;

b. If the routine medication involves the administration of a nebulized inhaled medication, the administration must be accompanied by a written health care plan by the prescribing health care provider that identifies the factors for determining the need for the administration of the medication;

c. Topical preparations used for prevention on unbroken skin including, but not limited to, petroleum jelly, diaper rash ointments, sunscreen, and insect repellant can be administered solely with written parent authorization. Topical preparations used as treatment on open wounds or broken skin must have a written order from a prescribing health care provider in addition to parent authorization.

2. The provider can accept such medicines only in the original container. Prescription medicine containers must bear the original pharmacy label that shows the prescription number, name of medication, date filled, physician's name, child's name, and directions for dosage. When no longer needed, medications must be returned to the parent or guardian or destroyed.

3. Over-the-counter and homeopathic medication must be labeled with the child's first and last name. The provider can administer medication only to the child whose name appears on the written order from the prescribing health care provider.

4. All providers who administer medication must have daily face-to-face verbal contact with parents of children needing medication and must be currently trained through the State Department-approved medication administration course and must administer meditation in compliance with the concepts taught in the course.

5. Medication must be stored in a locked cabinet, cupboard, or locked box so that it is inaccessible to children. If refrigeration is required, it must be stored in a leak- proof container in a designated area of the refrigerator separated from food.

6. Medication must be administered, documented and disposed of in accordance with the State Department approved training in medication administration.

7. A written medication log must be kept for each child. This log is a part of the child's record. The log must contain the child's name, time medication was given, name of the medication, dosage and route, special instructions, name or initials of the individual giving the medication, notation if the medication was not given, and the reason.

D. Control of Communicable Illness

1. When a child in care, resident of the home or provider has been diagnosed with a reportable communicable illness, including, but not limited to, chicken pox, hepatitis, measles, mumps, meningitis, diphtheria, rubella, salmonella, giardia, tuberculosis, and shigella, the provider must immediately notify the parents or guardians of all children in care and report to the local county department of health or the Colorado Department of Public Health and Environment.

2. Any individual diagnosed with a reportable communicable illness must be excluded from contact with children in care at the home for a period of time determined by the individual’s health care provider or by the local health department.

E. Sun Protection

1. The provider must inform the parent or guardian, through the policies and procedures statement or an authorization form, that sunscreen will be applied to the children's exposed skin prior to outside play. A doctor's permission is not needed to use sunscreen at the home. When a parent or guardian supplies sunscreen for an individual child, the container must be labeled with the child's first and last name. If sunscreen is provided by the provider, parents must be notified in advance, in writing, of the type of sunscreen the provider will use. Parent(s) or guardian(s) must notify the provider if sunscreen has been applied to the child's skin prior to arriving at the home. Sunscreen must never be applied to an infant's skin.

2. Children over four years of age may apply sunscreen to themselves under the direct supervision of the provider.

3. Sunscreen used must be full spectrum UVA/UVB with an SPF of thirty or greater and applied according to manufacturer's instructions.

F. First Aid Supplies

Supplies must be maintained and stored in an area inaccessible to children. Supplies shall include band aids, tape, gauze, disposable gloves and compression bandages.

7.707.72 Personal Hygiene, Hand Washing and Bathing, Diapering and Toileting, and Cleaning Toys [Rev. eff. 1/1/10]

A. Hand Washing and Bathing

1. All providers must wash their hands thoroughly with soap under warm running water, when available, and dry with an individual use and/or single use disposable towel before preparing, serving, and eating food; before administering medication; after helping a child with toileting or diapering; after provider's own toileting; after wiping a child's nose; whenever possible on field trips, at a park, or at another location away from the home; after handling animals, their toys, or food and water bowls; after contact with bodily fluids or secretions; and, any other time the hands become soiled or contaminated.

2. All children must wash their hands thoroughly with soap under warm running water, when available, and dry with an individual use and/or single use disposable towel; before preparing and eating food; after toileting or diapering; after wiping his/her nose; whenever possible on field trips, at a park, or at another location away from the home; after handling animals, their toys, or food and water bowls; after contact with bodily fluids or secretions; and, any other time the hands become soiled or contaminated.

3. The hand washing area should promote self-help skills to include, but not be limited to, step stools, soap, and towels accessible to children.

4. If paper towels are not used, each child shall have an assigned towel that is used consistently, doesn't touch other towels, and is laundered weekly or more often if needed.

5. Children's towels and drinking cups must not be shared.

6. Hand washing areas shall be routinely disinfected when visibly dirty or prior to use different from hand washing.

7. Hand sanitizers and wipes are not acceptable alternatives to hand washing, except on outings where running water may be unavailable. Alcohol based hand sanitizers shall not be used for children under three (3) years of age.

8. When a child is bathing, the bath water must be between ninety (90) and one hundred (100) degrees. Children under five (5) years of age must not be left unattended while being bathed.

B. Diapering and Toileting

1. The home must have a designated diaper change area for all children in need of diaper changing. The diaper change area must:

   a. Have a smooth, durable, nonabsorbent, and easily cleanable surface.

   b. Be large enough to accommodate the size of the child being changed.

2. The following procedure must be followed each time a diaper is changed:

   a. Soiled or wet diapers and clothing must be changed promptly and be replaced with clean diapers and clothing whenever necessary.

   b. The child must be placed on a clean, sanitized, dry changing table or mat.

   c. Providers must use single use disposable gloves.

   d. Use closest hand washing sink to the diaper changing area that is not used for food preparation.

   e. Children's hands must be washed with soap and water after diapering

   f. Providers must clean and disinfect the diaper changing area after each diaper change.

   g. Providers must vigorously clean all parts of their hands with soap and warm running water and dry their hands with individual paper or cloth towels after diapering each child.

   h. During child care hours, clothing soiled by bodily fluids must be placed in a leak proof container. The container must be stored inaccessible to children and sent home on a daily basis.

   i. Parent(s) or provider(s) must provide extra clothing.

   j. For each child who is learning to use a toilet, the provider must accommodate the child’s individual developmental abilities and needs, in accordance with nationally recommended procedures, and as contained in the provider’s written policies and procedures.

   k. Toilets must be flushed between uses.

   l. If potty chairs are used, all parts of the potty chair must be disinfected immediately after each use.

C. Cleaning Toys

1. Toys that are not mouthed or otherwise contaminated by body fluids shall be cleaned and sanitized at least once a week and whenever visibly soiled.

2. Toys that are placed in children's mouths or are otherwise contaminated by body fluids shall be cleaned and sanitized prior to use by another child.

7.707.73 Food and Nutrition [Rev. eff. 1/1/10]

A. A nutritious snack or meal must be offered during the midmorning and mid-afternoon hours. A mid-day meal must also be provided and must meet at least one-third (1/3) of the child's daily nutritional needs as required by the USDA child and adult care food program meal pattern requirements. Arrangements must be made for feeding children who are in care before 6 a.m. or after 6 p.m.

B. Food must be offered to children when they are awake at intervals not more than three hours apart.

C. Food must be wholesome and nutritious and stored in a safe and sanitary manner. A wide variety of foods, including fresh fruits and vegetables and whole grain products must be provided to children to ensure adequate intake of dietary fiber, vitamins, minerals, and other important nutrients.

D. If the provider does not regularly provide meals, the provider must supplement children's meals that are inadequate with foods to meet the nationally recognized meal pattern requirements.

E. Provider(s) and parent(s) must have ongoing communication regarding special diet and feeding needs of the child(ren).

F. Foods offered shall be age appropriate and not pose a choking hazard.

G. Children are encouraged, but not forced, to eat food or drink fluids.

H. Children with special needs are included in regular meal areas and routines.

I. All milk and juice offered to children must be pasteurized.

J. Juice must be limited to one (1) serving a day. Sweet type foods must be limited to on more than two (2) servings per week.

K. Water must be offered and available at all times and cannot be a substitute for milk during meals.

L. Food must be offered to the child from the child's individual dish and utensil(s). If uneaten portion(s) from the child's plate are saved, they must be refrigerated and stored safely and must be served, eaten or discarded within four hours of being prepared.

M. Children must not be given foods that are contrary to the religious beliefs of their families or that are known to cause an allergic reaction or a health hazard.

N. Dishes, cookware, high chair trays and utensils must be washed, sanitized, and stored in a safe and sanitary manner. When used, disposable dishes and utensils must be disposed of after use. Food preparation and service areas including, but not limited to, sinks, faucets, counters, and tables must be sanitary.

O. Bottles and Formula

1. Bottles of milk, formula or breast milk must never be warmed or thawed in a microwave oven. Infant formula and breast milk cannot be reused If a child does not finish the bottle of formula or breast milk within one (1) hour, the contents must be thrown out.

2. If the infant is breast fed, the provider must not offer formula, water, or other liquids without discussing substitutions or supplementation with the infant's parent.

3. The provider must make an area in the home available for a breast feeding mother to breast feed her infant while visiting the home during business hours.

4. All infants unable to hold their own bottles must be held by the provider during bottle feedings and should be held so they can see the face of the provider if it is appropriate for the child.

5. Infants and toddlers must not be allowed to hold their own bottles or sippie cups when lying flat to prevent choking, ear infections, bottle mouth or tooth decay.

6. There must be a sufficient supply of bottles provided for the entire day; or, if bottles are to be reused, they must be washed, rinsed, and sanitized after each use.

7. Commercially prepared formula must be mixed in accordance with the directions of the manufacturer or the child's health care provider.

8. Each bottle must be marked with the child's name when there is more than one (1) child in care that drinks from a bottle.

P. Solid Foods

1. At a minimum, meals and snacks provided for infants under the age of one (1) year must contain the foods listed in the USDA child and adult care food program meal pattern for infants.

2. Foods must be appropriate for infants' developmental stages as determined by instructions obtained from the infant's parent(s), guardian(s), or health care provider.

3. No new foods shall be introduced to children under twelve (12) months of age without parental permission.

4. Infants who are eating solid foods shall be provided with developmentally appropriate solid foods that encourage freedom in self-feeding.

5. Provider(s) must either feed infants and toddlers or directly supervise them while they are eating.

6. Honey and products containing honey must never be served to infants under twelve (12) months of age.

7.707.74 Direct Care of Children

7.707.741 Supervision [Rev. eff. 1/1/10]

A. The primary provider must supervise and know the location and activity of all children at all times while they are in care.

B. The provider's own children who are age twelve (12) years of age and over may each have one (1) friend over during child care hours if the following conditions are met:

1. The visiting children are not present for supervision; and,

2. The visiting children can immediately be sent home if needed; and,

3. The visiting children must be age twelve (12) years or over; and,

4. Visiting children must not compromise or participate in the care and supervision of children.

C. The provider may have other children over on occasion if the following conditions have been met:

1. The visiting children are under the active supervision of their parent or guardian or their own child care provider; and,

2. The square footage requirements for the home accommodates all children present.

7.707.742 Physical Care [Rev. eff. 1/1/10]

A. Children must be provided a developmentally appropriate environment.

B. Provider(s) must provide for children's appropriate care and well-being, taking into consideration the individual needs of each child.

C. Throughout the day, each child must have frequent, individual personal contact and attention from an adult, such as being held, rocked taken on walks inside and outside the home, talked to, and sung to.

D. Infants in care who are unable to hold a bottle must be held during bottle feedings.

E. Infants must be held frequently while in care.

F. Provider(s) must pick-up children appropriately around their upper chest and under their arms, and based on the developmental needs of the child.

G. Children leaving the family child care home for school or other activities must be dressed appropriately to protect the health and safety of children for the weather.

H. Provider(s) must respond to the needs of a child, including, but not limited to: crying, toileting, hunger, and thirst. The timing of the response must not result in physical harm to the child.

I. Providers must investigate whenever children cry.

J. Providers must develop/provide an environment that minimizes the risk to children from hurting themselves or each other.

K. Greetings/Departures

1. Children should be greeted individually and pleasantly upon arrival and departure.

2. Parent(s) or guardian(s) shall be allowed access to their children and all approved and licensed areas at all times.

3. When necessary, upon arrival and departure, the parent or guardian and provider shall share information related to the child's health and safety including, but not limited to, special diets, accident reports, specific fears, and family traumas.

L. Providers must not use any controlled substance or consume any alcoholic beverage during the operating hours of the facility or be under the influence of a controlled substance or alcoholic beverage during the operating hours of the facility; and use any substance that impairs their ability to care for children.

M. Providers, substitutes, visitors, volunteers, and residents of the provider's home who consume or are under the influence of alcohol are not permitted to work with children or be in the area used for child care during business hours.

N. Illegal drugs or paraphernalia must never be present on the premises of the child care home.

7.707.75 Sleep and Waking Time [Rev. eff. 4/1/15]

A. Children must be allowed to form and observe their own pattern of sleep and waking periods. Provision must be made so that children requiring a nap time have a separate area for their nap away from other children currently playing.

B. Children who are awake must not be confined for more than thirty (30) minutes at a time to cribs, high chairs, swings, playpens or other equipment that inhibit freedom of movement, unless they are eating. Confinement must never be used as a form of discipline. They must have an opportunity each day for freedom of movement, such as creeping, crawling, or walking in a safe, clean open, uncluttered area.

C. The provider must provide a rest period for all preschool-age children remaining in the home for longer than four (4) hours. A rest period and rest equipment must also be provided for older children who require a rest time.

D. Rest or sleep periods must be scheduled appropriately for the age and development of the child(ren) and not forced. Children who do not sleep after thirty (30) minutes must be provided with developmentally appropriate alternative activities. Infants and toddlers must be placed in their approved sleeping equipment within ten (10) minutes of falling asleep, unless being held by the provider, while being transported on a field trip, or if children are not at the provider's home.

E. Toddlers, preschoolers, and older children, as necessary, must have a suitable mat not less than two inches thick, cot, bed, or sofa, with a clean washable sheet that has been sanitized between uses by different children. Children must be provided with a clean blanket.

F. (repealed)

G. During rest/nap time the provider must remain alert and supervise all children by sight or sound. The atmosphere should be calm and conducive to rest or sleep.

H. Safe Sleep Training for Family Child Care Staff

All staff who work with infants must complete Department-approved safe sleep training prior to working with infants and on an annual basis

I. Safe Sleep Environments for Infants

1. Each infant up to twelve (12) months of age must be provided with an individual crib or futon approved for infants or other approved sleep/rest equipment meeting Consumer Product Safety Commission (CPSC) standards.

2. In the infant room, soft bedding or materials that could pose a suffocation hazard are not permitted in cribs, futons approved for infants or other approved sleep/rest equipment.

   Soft bedding means, but is not limited to, any soft sleep surface like bumper pads, pillows, blankets, quilts, comforters, sleep positioning devices, sheepskins, blankets, flat sheets, cloth diapers, bibs, plush toys, and stuffed animals.

3. Infants must be placed on their back for sleeping.

4. Alternative sleep positions for infants must only be allowed with a health care plan completed and signed by the child's physician.

5. Swaddling of infants must only be allowed with a health care plan completed and signed by the child's physician.

6. Each infant up to twelve (12) months of age must have the pacifier offered when being put down to sleep, unless the parent directs otherwise. If the infant refuses the pacifier, s/he should not be forced to take it. After the infant falls asleep, there is no need to reinsert the pacifier if it falls out. Pacifiers should not be coated in any sweet solution, and they should be cleaned and replaced regularly.

7. All sleep/rest equipment must be safe, sturdy, and free from hazards including, but not limited to: broken or loose slats, torn mattress, chipping paint or loose screws.

8. Approved sleeping equipment mattresses must be firm and must fit snugly ensuring no more than two adult fingers are able to be inserted between the mattress and the side of the approved sleeping equipment.

9. Toys, including mobiles and other types of play equipment that are designed to be attached to any part of sleeping equipment must be kept away from sleeping infants and out of sleep environments, including hanging toys. Blankets and other items must not be hung from or draped over the sides or any part of sleeping equipment.

10. Drop side and stacking cribs are prohibited.

11. Other sleep equipment not manufactured for commercial use is prohibited.

12. Infant monitors may only be used in separate sleeping rooms in a family child care home for infants under the following conditions:

    a. The sound monitoring equipment is able to pick up the sounds of all sleeping infants.

    b. The receiver of the sound monitoring equipment is actively monitored by staff at all times.

    c. All sleeping infants must be physically observed at least every ten (10) minutes by a staff member.

    d. Sound monitoring equipment must be regularly checked to assure it is working correctly.

13. Infants who fall asleep in a car safety seat, bean bag chair, bouncy seat, infant seat, swing, jumping chair, play pen or play yard, highchair, chair, sofa, adult futon, adult bed or other piece of equipment not approved for sleep must immediately be moved to their approved sleep area and placed on their back to sleep.

14. Cribs must be used for sleeping, not extended play or confinement.

15. Children who are awake must not be confined for more than fifteen (15) minutes at a time to cribs, playpens, swings, high chairs, infant seats, or other equipment that inhibits freedom of movement. Children who are actively eating may be in a high chair or other approved feeding equipment for longer than fifteen (15) minutes. Children must be moved once feeding is complete.

16. If music is played in the infant sleep area, the music must not be played at a loud volume that would prevent infants from being heard by staff. Music equipment must not be placed under a crib or within three (3) feet of the sleeping infant.

17. Supervised tummy time be offered to infants one month of age or older up to twenty to thirty (20-30) minutes per day. If the infant falls asleep during tummy time, immediately place him/her on their back in approved sleeping equipment.

18. When staff place infants in approved sleeping equipment for sleep, they must check to ensure that the temperature in the room is comfortable for a lightly clothed adult, check the infants to ensure that they are comfortably clothed (not overheated or sweaty), and that bibs, necklaces, and garments with ties or hoods are removed. Clothing sacks or other clothing designed for sleep must be used in lieu of blankets if needed for additional warmth.

19. Infants must not be placed to sleep in the same crib or futon as another infant or child, and must never sleep with an adult in a bed, on a couch, or in any other setting or manner.

J. The facility must have policies for safe sleep environments for infants.

K. The facility must have a policy on the protection of infants from second hand smoke.

7.707.76 Overnight Care [Rev. eff. 1/1/10]

A. Regular overnight care (care that past midnight) of children is permitted only when licensed to do so.

B. All children in care must be provided with a comfortable cot, crib, bed, or couch suitable for the child's age, two (2) sheets, and a suitable warm covering. At least forty (40) square feet of floor space must be available for each bed. Beds arranged in parallel must be at least two (2) feet apart.

C. Sheets must be changed weekly, between use by different persons, and more frequently if needed. No provider shall knowingly allow a child to sleep in a wet bed.

D. Children’s faces and hands must be washed, teeth brushed, and children must change into comfortable clothing for sleeping. Extra sleepwear must be available in the event that a change is necessary.

E. When the provider goes to sleep, the provider must sleep on the same level of the home where children under eight (8) years of age are sleeping.

F. Written permission must be obtained from parent(s) or guardian(s) on where the child sleeps, whether the child shares a room with another individual, and the equipment that the child is sleeping on.

7.707.8 GUIDANCE, LEARNING ACTIVITIES, MATERIALS AND MEDIA USE

7.707.81 Guidance [Rev. eff. 1/1/10]

A. At the time of admission, the provider shall discuss with the parent or guardian, the home's guidance expectations and consequences of a child's behavior.

B. Guidance must be appropriate to the developmental age of child, constructive or educational in nature, and may include such measures as diversion, separation, talking with the child about the situation, praise for appropriate behavior, and gentle holding.

C. Children must not be subjected to physical or emotional harm or humiliation. The provider must not use, or permit anyone else to use, corporal or other harsh punishment, including, but not limited to pinching, shaking, spanking, punching, biting, kicking, rough handling, hair pulling, or any humiliating or frightening method of discipline.

D. Physical, mechanical, and chemical restraint shall never be used.

E. Guidance must not be associated with food, rest or toileting. Children must not be punished for not resting or sleeping, toileting accidents, failure to eat all or part of meals or snacks, or failure to complete an activity. Food or drink may not be denied or forced upon children as a disciplinary measure.

F. Meals and snacks can be temporarily postponed or provided individually, but deprivation of meals, snacks and beverages must not be used as punishment.

G. Separation, when used as guidance, must be brief and appropriate for the child's age and circumstances. The child must be in a safe, lighted, well-ventilated room within hearing and vision of the provider or other qualified adult. Children must never be isolated in a locked room, attic or closet area.

H. Verbal or emotional abuse and derogatory remarks about any child and/or any child's family and home environment is prohibited.

I. The provider or approved substitute is responsible for and shall supervise all guidance used within the home. The provider must not allow one child to punish another child.

J. A child must not be punished for the actions of a parent or guardian. This includes, but is not limited to, failure to pay fees, failure to provide appropriate clothing, failure to provide materials for an activity, or any conflict between the provider and the parent or guardian.

7.707.82 Learning Activities [Rev. eff. 1/1/10]

A. Talking with children is generally social and not limited to only custodial or control speech.

B. Children must be encouraged to relate or to communicate with each other and with adults using developmentally appropriate behavior.

C. Provider(s) shall respond to children's attempts to communicate, using culturally sensitive eye contact and making an effort to create two-way conversation.

D. Each child in care must be provided with an opportunity for both group and individual play.

E. The provider shall encourage individual expression and adult directed projects shall be kept to a minimum, since children's work is varied and individual.

F. Children shall not be forced to participate in activities; alternate developmentally appropriate activities shall always be available.

G. Activities must be available to the children that are culturally sensitive and represent diversity in ethnicity, race, gender, and age. Variety shall exist in toys, books, and pictures.

H. Boys and girls should not be restricted to specific roles in play.

I. At least one (1) provider-initiated language activity shall be offered daily, such as in reading, story telling, flannel boards or puppetry.

J. The provider(s) shall initiate at least one (1) interactive musical activity weekly, such as singing, dancing, playing instruments, marching, listening to tapes or recordings, radios and musical videos.

7.707.83 Materials [Rev. eff. 1/1/10]

A. A selection of at least four (4) books must be available for the group of infants/toddlers in care.

B. A selection of at least ten (10) books must be available for all children over two (2) years of age in care and must be organized and accessible to children most of the day. If children over five (5) years of age are in care, books relevant to that age of child must be included within the ten (10) books.

C. Materials must be available to the children that are developmentally appropriate, culturally sensitive and represent diversity in ethnicity, race, gender, and age. Variety shall exist in toys, books, and pictures.

D. At least four (4) language development materials appropriate to age of the children shall be available, such as telephones, puppets, story boards, dolls, and chalk boards.

E. At least four (4) types of age-appropriate eye-hand materials shall be available for use daily which should include at least some of the following: crayons, paper, scissors, non-chokable small building toys, developmentally appropriate multi-size stringing beads, pegs, sewing cards and puzzles.

F. Age-appropriate blocks and accessories shall be accessible for free play daily allowing at least two (2) children to play independently, yet simultaneously.

G. A selection of at least four (4) types of developmentally appropriate nature or science related games, materials, or activities shall be available: natural object collections, plants, gardens, pets, magnets, magnifying glasses or science props.

H. At least four (4) types of developmentally appropriate math or number materials shall be available, such as: counting objects, balance scales, rulers, number puzzles, magnetic numbers, and dominoes.

I. At least four (4) types of art materials shall be available: crayons, pencils, markers, paints, play dough, scissors and glue. Some art materials must be readily available each day.

J. At least four (4) types of dramatic play materials shall be accessible for free play daily such as: backpacks, purses, hats, dress up clothing, housekeeping toys, dolls and accessories, toy telephones, play houses, toy animals, cars and trucks, costumes, and safe jewelry.

K. Outdoor physical free play materials shall consist of at least four (4) age appropriate toys and equipment including, but not limited to, the following in good repair: push toys, riding toys, tossing toys, climbing equipment, balance boards, stationary swings, slides, balls, toss games, and sports equipment. These must be provided daily except in extreme weather, such as rain, snow, or extreme temperatures when indoor physical play may be substituted.

L. Materials provided in large homes must be double the requirements for the regular home as listed above.

M. Some sand or equivalent dry material or water play should be offered indoors or outdoors at least monthly and year round. If used, food and/or organic material must be discarded each week.

7.707.84 Media Use [Eff. 1/1/10]

A. Media use including, but not limited to, television, video viewing, music, video games, and computer use should be permitted only with:

1. The written approval of a child's parent(s) or guardian(s). The authorization may be included in the parent handbook or contract.

2. Parent-approved time limits.

3. Activities must not contain violence, profanity, nudity, or sexual content, and must have a rating appropriate for the age of children in care.

B. All children must be provided with a developmentally appropriate alternative activity once the child(ren) loses interest in the media activity.

7.707.9 FACILITY REQUIREMENTS AND TRANSPORTATION

7.707.91 General Requirements [Rev. eff. 1/1/10]

A. The entire premises are subject to inspection for licensing and safety purposes including, but not limited, to the entire residence and where care is to be provided, the grounds surrounding the residence, the basement, the attic (if accessible), the storage shed, garage and/or carport, and any vehicles used for transportation of children in care.

B. A business of a nature and any activity that might be hazardous to the health, safety, or well-being of children, or that interferes with the supervision of children, cannot be operated or conducted on the premises of the home during child care business hours.

C. Mobile homes used as family child care homes must have at least two (2) exits, be secured, attached, skirted, and properly installed and stabilized.

D. The promises of the family child care home must be kept safe and free from hazards to health at all times.

E. All weapons must be locked and inaccessible to children. Ammunition and arrows must be locked and stored separately. This includes, but is not limited to, firearms, air rifles, bb guns, paintball guns, bows, hunting knives, swords, hunting sling shots, and martial arts weapons. Trigger locks are acceptable. Antique and other guns used for decoration must be unloaded, inoperable and have the firing pin removed. An unstrung bow need not be stored in a locked container. Weapons must not be transported in any vehicle in which children are riding unless the weapons are made inoperable and inaccessible. The provider, employees and substitutes must know the location of any weapons in the home.

F. All garbage and other wastes must be stored in a manner that is inaccessible to children and disposed of in a manner that does not constitute a health hazard or nuisance.

G. Fire hazards, such as defective electrical or gas appliances and electric cords, dangerous or defective heating or cooking equipment, exposed wiring and flammable material stored in such a manner as to create a risk of fire must be corrected or eliminated.

H. All stairways must be free from hazards, and those with more than five (5) steps must be equipped with banisters or handrails within reach of children. The slats on all railings must be no wider than four (4) inches apart or modified to prevent entrapment.

I. Drinking and food preparation water from any source other than a regular municipal water supply or commercially bottled water must be tested annually and the results available for review. The water must be in compliance with water quality requirements of the Colorado Department of Public Health and Environment.

J. Any provider’s, employee’s, substitute’s, volunteer’s, and/or visitor’s animal(s) and/or fish that are dangerous, and/or pose a potential threat to a child's safety or health must be confined in a place away from the child care area and inaccessible to children. The provider’s animals must be vaccinated as required by state law and local ordinance, and proof of vaccination must be available for review by the licensing specialist.

K. Psittacine/hooked beak birds must be in a separate room inaccessible to children in care.

L. Children must not be permitted to mistreat animals.

M. All play equipment must be designed to guard against entrapment and strangulation. Swing sets and other outdoor play equipment must be correctly assembled, well maintained, and securely stabilized or anchored. All swings for children three (3) years of age and older must have seats made of flexible material.

N. All exercise equipment must be inaccessible to children.

7.707.92 Indoor Requirements

7.707.921 General Indoor Requirements [Rev. eff. 1/1/10]

A. There must be open, indoor play space of at least thirty-five (35) square feet of floor space per child, including space for moveable furniture and equipment exclusive of:

1. Hallways,

2. Bathrooms,

3. Stairways,

4. Closets,

5. Laundry rooms,

6. Furnace rooms,

7. Space occupied by permanent built-in cabinets and permanent storage shelves.

B. The large home must provide sufficient floor space in the specific room(s) designated for use for child care that does not include space used by household furniture.

C. One room or area in the home, within sight or sound of the provider, that contains a bed, cot or sofa must be available for a child in the event of an illness or injury where a child can be separated from other children and comfortably cared for. A crib or playpen with a pad must be provided for children under twelve (12) months of age. A clean, washable sheet and blanket must be provided for each child, and shall be cleaned and changed after each use by a sick or injured child.

D. All floors must have an easily cleanable finish including, but not limited to, carpets, tile, wood or concrete.

E. Interior walls must be free of holes and constructed of solid material with a smooth finish that can be easily cleaned. Painted finishes shall be maintained free from peeling, chipping or otherwise deteriorating paint.

F. The home must be equipped with adequate light, heat, ventilation, and plumbing for safe and comfortable occupancy. The heating facility must be capable of maintaining a draft-free temperature of a minimum of sixty-eight (68) degrees Fahrenheit at floor level in all rooms used for child care.

G. All rooms must be kept in a clean and sanitary condition and be free of any evidence of pest or rodent infestation.

H. Stairways of more than four (4) steps that are accessible to children must have gates that prevent access from the area being used when children under two (2) years old are present. The gate may be taken down as long as the provider is providing direct supervision of the child who is learning climbing skills on the stairs. Because of the risk of serious physical injury to a child, providers, employees, substitutes, volunteers, and visitors must never lift children over the gates while on a stairway.

I. Because of the risk of serious physical injury to a child, providers, employees, substitutes, volunteers, and visitors must never step over a gate while holding a child or lift a child over a gate.

7.707.922 Indoor Equipment, Materials and Furnishings [Rev. eff. 1/1/10]

A. Toys, toy parts and any material accessible to children under three (3) years of age must be large enough that they cannot be swallowed or inhaled, to prevent a choking hazard.

B. An adequate number of high chairs and other child size suitable equipment that meets nationally recognized standards must be provided when feeding each child under two (2) years of age.

C. Children's use of walkers with wheels is prohibited unless specifically provided for a child’s special needs as ordered in the child’s health care plan.

D. Furnishings and equipment in the area approved for child care must be in good repair.

E. Furnishings for relaxation and comfort shall include, but not be limited to:

1. Soft play areas, which may include rugs, carpets, mats, and cushions.

2. Clean and soft toys.

7.707.923 Indoor Safety [Rev. eff. 6/1/12]

A. All hazardous items and materials must be inaccessible to children including, but not limited to, office supplies, matches, plastic bags, cleaning and laundry materials, medicines, perfumes, curling irons, adult sharp scissors and knives, cosmetics, shaving lotions, hair products, poisonous plants, and all items labeled by manufacturer as “keep out of reach of children.

B. In rooms accessible to children, all electrical outlets and power strips must nave protective covers, or safety outlets must be installed; and all exposed light bulbs must have protective covers. Electrical cords must be in good condition and not posing a hazard, such as strangulation, falling or tripping.

C. Window blind cords and coverings must be secured out of children's reach or other wise made safe to prevent strangulation.

D. During child care hours, fans that pose a safety hazard to children (such as dangling cords, fans that can be pulled onto the child, and those where the child can stick fingers in the blades) must be inaccessible to children.

E. Although exterior doors can be locked, they must be maintained so as to permit easy exit; interior doors must be designed to prevent children from becoming trapped.

F. No locks or fastening devices can be used that would prevent emergency evacuation.

G. Any level where child care occurs must have two (2) means of escape. A basement exit may include a window large enough for the provider, employees, substitute, volunteers, visitors, and children to individually exit.

H. If the window sill height is over thirty (30) inches, there must be permanent access to the window. This includes a ladder bolted to the wall or sturdy and easily climbed furniture or steps.

I. Upper levels where child care occurs, without a second exit, must have escape ladders designed specifically for the purpose of evacuation of children.

J. All heating units, unvented gas or electric, must be installed and maintained with safety devices to prevent fire, explosions, and other hazards. No open-flame gas or oil stoves, unscreened fireplaces, hot plates, or unvented heaters can be used.

K. Any cooking stoves with controls within reach of a child shall have a safety guard.

L. Flammable or combustible items must be stored in a locked area remote from the kitchen, at least three (3) feet from the furnace, hot water heater or any other heating device. These items include, but are not limited to, paints, fuels, insecticides, and other hazardous chemicals.

M. A smoke detector in working condition must be installed on each level of the home.

N. There must be a carbon monoxide detector installed in the area of the home as recommended by the manufacturer and in the area where children sleep.

O. The home must contain at least one (1) fire extinguisher in working condition with the minimum weight of five (5) pounds, and minimum rating of 2A-10-BC. The fire extinguisher or identifying sign where the fire extinguisher is located must be highly visible and easily accessible.

P. The use of indoor and/or climbing equipment indoors is subject to Section 7.707.932.

7.707.93 Outdoor Requirements

7.707.931 General Outdoor Requirements [Rev. eff. 1/1/10]

A. At least seventy-five (75) spare feet of useable outdoor play space must be available for each child.

B. The outdoor play space must be enclosed with at least a forty-two inch (42”) fence or natural barrier. If a natural barrier is used, it must begin no higher than three and one-half inches (3-1/2”) from the ground. If the home does not have a fenced play space, provisions must be made for outdoor play in an area approved by the State Department.

C. All parts of the play area must be visible and easily supervised.

D. Shade must be available.

E. Decks that are more than twelve (12) inches high must have or be modified to have a protective railing or other barrier with slats no wider than four (4) inches apart. Additionally, for decks installed at ground level with more than a twelve inch (12”) gap between flooring and ground, the gap must be inaccessible to children.

F. Tiered yards that have drop offs of more than twelve inches (12”) must have a protective railing or other barrier with slats no wider the four inches (4”) apart.

G. All outdoor areas where children may pass or play shall be kept free of animal contamination. All animal wastes must be promptly removed and placed in a lidded container or otherwise inaccessible to children.

H. Window wells accessible to children must have covers that are in good condition and will protect children from falling into the window well. Window well covers must not prevent exiting from a basement window designated as the second exit.

I. Swimming pools, permanent wading pools, and above ground pools located on the property of the home must be enclosed with a five foot (5’) fence and a locked gate.

J. Water used by children in play areas, including wading pools, must be clean and not left to stand more than one (1) day.

K. All hot tubs must have bolted and securely locked covers.

L. Decorative ponds in the designated play area must use childproofing grates to prevent risk of drowning when there is no fence.

M. The use of a trampoline by children in care is prohibited. If there is a trampoline on the property of the home, it must be stored in a way that makes it totally inaccessible to children.

N. Tree houses must be inaccessible to children in care.

O. Walkways must be cleared of snow and ice to provide safe entry and exit from the home.

7.707.932 Outdoor Equipment, Materials and Surfaces [Rev. eff. 1/1/10]

A. Protective Surfacing Requirements

1. All pieces of permanently installed climbing equipment must be surrounded by and have at least four inches (4”) of a nationally recognized protective surface underneath the equipment.

2. By December 31, 2010, all pieces of permanently installed playground equipment must be surrounded by and have at least six inches (6”) of a nationally recognized protective surface underneath the equipment.

B. Sand may be used as a protective surfacing when regularly raked, rototilled or replaced to retain its resiliency.

C. If during any type of licensing visit the sand has become compacted and lost resiliency or depth, the provider must immediately replace the sand with one of the other approved protective surfacing materials.

D. Portable climbing equipment over two feet (2’) in height, whether indoor or outdoor, must be on a protective surfacing. No equipment can be placed on cement or grass.

E. By December 31, 2010, all swing sets or permanent climbing equipment must ensure a minimum fall zone consistent with the nationally recognized standards.

7.707.933 Outdoor Activities [Rev. eff. 1/1/10]

A. The home program must include outdoor play for all ages each day except when the severity of weather, including temperature extremes, makes it a health hazard or when a child must remain indoors as indicated in writing by a health care provider or in a health care plan.

B. Developmentally appropriate supervision must be provided during outdoor play in the approved, adjoining fenced play area.

C. Children playing in an unfenced area or any other outdoor play area, other than the required, approved fenced play area must be under direct supervision at all times.

D. Children must wear helmets, wrist protection, and knee and elbow pads when riding a scooter, bicycle, skateboard or rollerblades. Motorized riding toys are not permitted.

E. All protective surfacing (excluding sand, wood chips, wood mulch, engineered wood fiber, pea gravel, synthetic pea gravel, and shredded rubber tires) and rubber mats must be manufactured for such use consistent with federal guidelines and be approved by the State Department.

F. With written permission of the parent(s) or guardian(s), children in care shall be permitted to use the permanent pool in the presence of an adult who holds a current Red Cross basic lifeguarding certificate or equivalent, and is actively responsible for lifeguarding protection.

7.707.934 Outdoor Safety [Rev. eff. 1/1/10]

A. Children must be directly and actively supervised near standing water including, but not limited to, fountains, buckets, wading pools, and animal troughs.

B. All outdoor play areas shall frequently be surveyed and must be kept safe and free from hazardous materials or debris that could cause harm to children.

C. Outdoor play space, including areas under decks must be free from safety hazards including, but not limited to, lawn mowers, tools, propane, gasoline, building scraps, and scrap metal. Gas grills with propane tanks must have a safety on/off knob on it.

7.707.94 Transportation [Rev. eff. 1/1/10]

A. The driver of a vehicle used to transport children must follow required state laws, including possession of a current valid Colorado drivers license, automobile insurance, and meet the requirements of Colorado child passenger safety laws.

B. At least one (1) adult in the vehicle transporting children must have a current State Department-approved First Aid and safety certificate that includes CPR for all ages of children. A First Aid kit must be available in the vehicle.

C. Any child transported must be properly restrained in a child restraint system that meets the requirements of the Colorado child passenger safety law that requires:

1. Children must ride in a rear-facing child safety seat until they are at least one (1) year old and weigh at least twenty (20) pounds.

2. Children ages one (1) to four (4) years and who weigh twenty (20) to forty (40) pounds must be restrained in a forward-facing car seat.

3. Children at least four (4) years of age and are less than six (6) years old must continue to ride in achild restraint (unless they are fifty-five inches tall); typically, this is a booster seat.

4. Children between six (6) and sixteen (16) years old or are fifty-five inches (55”) tall must be properly restrained in a seat belt.

D. When any vehicle is used by the home to transport children in care, the following requirements must be met:

1. Each child under four years of age and weighs less than forty pounds must be properly fastened into a child restraint system in a seating position equipped with a safety belt or other means to secure the system according to the manufacturer’s instructions.

2. Two or more children must never be restrained in one (1) seat belt or child restraint system.

3. It is the responsibility of the driver transporting children to ensure that such children are provided with and that they properly use a child restraint system or safety belt system.

4. Children between six (6) and sixteen (16) years of age or are fifty inches tall or more must be instructed and monitored to keep the seat belt properly fastened and adjusted.

5. Children, who are appropriately placed in a safety belt system according to state law, must be properly secured by the safety belt system. The shoulder belt must never be placed behind the back or under the arm. The lap belt must be secured low and tight across the upper thighs.

6. Children under thirteen (13) years of age must never be transported in the front seat of a vehicle.

7. Children must never be left alone in a vehicle.

8. Children must be loaded and unloaded safely and out of the path of moving vehicles.

9. The total number of passengers being transported shall never exceed the manufacturer's specifications.

10. The provider cannot transport more children than any vehicle can safely accommodate with child restraint systems and seat belts that are properly installed in the vehicle.

11. The seats of the vehicle must be constructed and installed according to the manufacturer's specifications.

12. Modifications to vehicles including, but not limited to, the addition of seats and seat belts must be completed by the manufacturer or an authorized representative of the manufacturer. Documentation of such modifications must be available for review.

13. The vehicle must be enclosed and have door locks in proper working order.

14. The vehicle must be kept in satisfactory condition to assure the safety of occupants. Vehicle tires, brakes, and lights must meet safety standards set by the Colorado Department of Revenue, Motor Vehicle Division (Section 42-4-236, C.R.S.).

15. At a large home, there must be at least one (1) adult supervisor, in addition to the driver, for nine (9) to twelve (12) children using the vehicle.

E. The home must obtain written permission from the parent or guardian for transportation of the child.

F. If the child care home provides transportation to and from care, the provider must monitor the child between the vehicle and the child's home or another home authorized by the child's parent or guardian until the child is safely in the care of another adult.

G. Transportation arrangements for school-age children must, be by agreement between the home and the child's parent or guardian (e.g., whether the child can walk, ride a bicycle, or travel in a car). The home must exercise reasonable precaution to see that the children arrive at the home from school when expected and must follow up on their whereabouts if late. Written permission from a parent or guardian for the child to attend community functions after school hours must include agreements regarding transportation.

H. If transportation is provided between the home and school for school-age children, the required adult-to-child ratio and supervision must be maintained for children remaining at the home.

7.708 RULES REGULATING FAMILY FOSTER CARE HOMES [Rev. eff. 1/1/16]

All foster care homes must comply with the "Rules Regulating Foster Care Homes" and the "General Rules for Child Care Facilities".

7.708.1 FOSTER CARE HOMES [Rev. eff. 1/1/16]

A. "Foster care home" (refer to Section 7.000.2 in 12 CCR 2509-1), as defined at Section 26-6-102, C.R.S., means a facility that is certified by the county department or a child placement agency for child care in a place of residence of a family or person for the purpose of providing twenty-four (24) hour family care for a child under the age of eighteen years who is not related to the head of such home, except in the case of relative care. The term includes any foster care home receiving a child for regular twenty-four (24) hour care and any home receiving a child from any state-operated institution for child care or from any child placement agency.

The number and age of foster children for which a certificate may be issued is determined by the following factors:

1. No foster child shall be placed in a foster home if that placement will result in more than four foster children in that home, or a total of eight children (foster and non-foster), or more than two children under two years of age, except in those instances in which the placement of a sibling group in a foster home would exceed the limits. If the placement of a sibling group results in exceeding the above limits, no other foster children can be placed in the home.

2. A foster care home may serve a maximum of one foster child enrolled in Children's Habilitation Residential Program (CHRP) and 2 other foster children or 2 foster children enrolled in CHRP and no other foster children, unless there has been prior written approval by the CHRP waiver administrator. Placements of three (3) children approved for CHRP funding may be made if the agency can demonstrate to the CHRP waiver administrator that the provider has sufficient knowledge, experience, and supports to safely meet the needs of all of the children in the home. In any case, no more than three (3) children enrolled on the CHRP waiver and no (0) non-CHRP children will be placed in one foster home. Emergency placements will not exceed maximum established limits. Facilities that exceed established capacity at the time the rule takes effect will be grandfathered in; however, with attrition, capacity must comply with the rule.

FOSTER HOME (COUNTY OR CPA) MAXIMUM CAPACITY

CHRP	Non-CHRP	Total Children
1	2	3
2	0	2
3	0	3

3. Foster care providers who are serving foster children enrolled in the Children's Habilitation Residential Program (CHRP) waiver shall be in compliance with rules contained within the Department of Health Care Policy and Financing's Medical Assistance Manual at Section 8.508 (10 CCR 2505-10).

4. Foster care may be provided to children from birth to eighteen (18) years of age and to those persons to 21 years of age who are placed by court order prior to their eighteenth birthday.

5. When a foster care home only provides temporary emergency care for foster children, the home may be certified for up to six foster children with no more than two foster children, including the caretaker's own children, under two years of age. There can be no more than a total of six foster children in the home except in sibling placements. The number of additional foster children under six years of age to be cared for shall be specified on the certificate and in the home study. Such a foster care home shall be designated as a receiving home. The designation shall appear on the certificate.

   a. No foster child shall remain in that foster care home at the receiving home rate longer than 90 consecutive days, in accordance with the requirements of Section 7.417.4.

   b. The number of foster children to be cared for at the receiving home rate and any foster children to be cared for at the regular foster home rate shall be included on the certificate.

   c. Each receiving home parent shall have two years experience as a foster parent, although the certifying agency may take into account other relevant education and experience.

   d. Each receiving home parent shall complete 32 hours of on-going training every year as identified in his/her training development plan. This training shall include the following competencies.

      1) Issues regarding emergency and crisis placement of children with unknown histories; and,

      2) Dynamics of victimization issues, with emphasis on appropriate age and developmental levels; and,

      3) Cultural, spiritual, and religious awareness, consideration for, sensitivity to, and tolerance of each child individually.

   e. Because receiving homes are likely to have quick turn-over of the children in care, supervision and monitoring of the receiving home shall be carried out according to the following:

      1) One face-to-face contact shall be made with the receiving home parent(s) at least every week when children are in placement in the home, with a minimum of two visits per month occurring in the receiving home.

      2) Documentation of such contact shall be in the provider file, as well as in each file of all foster children in the home.

      3) The purpose of the contact is to address any questions the receiving home parent has about the children in care, to observe child care when appropriate and to provide support to the receiving home parent.

   f. A receiving home shall have a comprehensive annual evaluation, which includes a review of any critical incidents, any allegations of institutional abuse, and the skills, needs, and competencies of the receiving home parent(s).

6. A foster care home may not be operated without a license or a certificate as required by law and Section 7.701.4 of these rules, and the number of foster children cared for in such facility may not exceed the number authorized by such license or certificate.

B. Foster care homes may be licensed host family homes.

1. A foster home may be a licensed host family home pursuant to the rules at Section 7.721.

2. Pursuant to 26-5.7-105(6), C.R.S., a foster care home approved as a licensed host family home shall not accept a homeless youth for placement under this section if there are any foster children currently placed in the home. No foster children may be placed while a homeless youth resides at the foster home.

3. A foster care home acting as a host family home for homeless youth shall receive additional training regarding homeless youth services and shall be designated as a host family home on the foster home certificate.

4. Pursuant to Section 26-5.7-105(5), C.R.S., if the county or child placement agency referring the youth to the host family home or the host home parents determine that a referral for additional services needs to be made, they shall make a referral to the county of reference of the parents of the youth.

5. Notification

Pursuant to Sections 26-5.7-105(4) and (7), C.R.S:

a. When a youth under fifteen years of age is admitted to a host family home, the county or child placement agency referring the youth to the host family home or the host family home's parents shall notify the county department of residence of the parents of the youth within seventy-two (72) hours of the youth's admission.

b. If a youth who is at least eleven (11) years of age but less than fifteen (15) years of age has been served up to twenty-one (21) consecutive days and returns again to the licensed host family home after leaving the home, the county or child placement agency referring the youth to the host family home or the host family home shall notify the county department of residence of the parents of the youth within seventy-two (72) hours of the youth's admission.

7.708.11 Definitions [Rev. eff. 1/1/16]

"Certifying authority" means licensed child placement agencies and county departments of human or social services that have the authority to certify foster care homes, including kinship foster care homes.

"Child specific foster care" is care where the foster child has a prior relationship to the foster parent(s).

"County designee" is the representative of a county department designated by the county executive director to make certain key decisions regarding foster children.

"De-escalation" is the use of therapeutic interventions with a foster child during the escalation phase of a crisis. The interventions are designed to allow foster children to contain their own behavior so that acute physical behavior does not develop which would lead to the need for use of a physical restraint.

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

"Kin": Refer to Section 7.000.2 (12 CCR 2509-1) for the definitions of "kin" and "non-certified kinship care".

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

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

"Therapeutic foster care" means a program of foster care that incorporates treatment for the special physical, psychological, or emotional needs of a child placed with specially trained foster parents.

"Treatment Foster Care" means a clinically effective alternative to residential treatment facilities that combines the treatment technologies typically associated with more restrictive settings with a nurturing and individualized family environment.

"Whole Family Placement", also known as "shared family care", is a situation in which adult parent(s) and foster child(ren) are placed together in the home of a family trained to mentor and support the biological parents as they develop skills and supports necessary to care for their foster child(ren) and move toward living independently.

7.708.2 REQUIREMENTS FOR CERTIFICATION OF FAMILY FOSTER CARE HOMES

7.708.21 Character, Suitability, and Qualifications of Family Foster Parents [Rev. eff. 1/1/16]

A. A certificate shall be denied in accordance with Section 7.500.312, D.

B. Each foster parent in the foster care home shall demonstrate an interest in, and a knowledge of, foster children and a concern for their proper care and well-being.

C. A certificate may be denied or revoked if the foster parent(s)' own children have been placed in foster care or a residential treatment facility under circumstances which demonstrated that the foster parent or another resident of the home was abusive, neglectful, or a danger to the health, safety, or well-being of those foster children.

D. The foster care home parents shall be able to provide for a foster child's proper physical, mental and character development.

E. Applicants shall demonstrate stability in family relationships within the home where foster care is to be provided.

F. The licensing or certifying authority must receive at least three written statements which describe the applicant's character, interpersonal relations, and ability to provide care for foster children from references provided by the applicant, at least two from a source/person who are not related to the applicant and who have known the applicant one year or longer (references need not be residents of Colorado). Licensing or certifying representatives may contact others who may have knowledge or information regarding the applicant's character or suitability.

G. The foster home parent shall possess basic knowledge of child care and good nutrition, and shall cooperate with the licensing or certifying agency in programs designed to increase such knowledge.

H. Licenses or certificates shall not be granted to applicants who are less than twenty one years of age on the date of application for such license or who lack adequate physical stamina to care for children.

I. Foster parents shall protect foster children from exposure to second hand smoke.

1. Smoking is prohibited inside the foster home at all times when a child(ren) is in placement.

2. Smoking is prohibited in a foster parents' or substitute caregiver's motor vehicle when a foster child(ren) is in placement in the foster care home.

J. The financial resources of foster parents shall be adequate to assure that the home where the care is provided is maintained in safe repair and in conformity with standards and that the requirements of these regulations can be fulfilled.

K. A license or certificate shall not be granted for a foster care home unless the applicant has demonstrated the ability to manage a household so that the licensing or certifying authority may determine that the applicant is able to acquire food, materials and other equipment as may be required for child care and to maintain records pertaining to foster children, including records required by statute or regulations.

L. Each foster parent shall have a health assessment within one year prior to certification or within 30 calendar days after certification and thereafter as required, in writing, by a licensed health care professional. The reports of the medical examinations shall be dated and signed by the examining physician or nurse practitioner and shall be provided to the certifying authority. Reports shall include a statement of the evaluation of the person's physical ability to care for foster children.

If, in the opinion of the licensed health care professional or the assessment worker, an emotional or psychological condition exists which would have a negative impact on the care of foster children, the issuance of a license shall be conditioned upon the satisfactory report of a licensed mental health practitioner.

M. Children of the foster home parents and any other persons not placed by the agency and living in the foster care home shall obtain a medical statement from a licensed health care professional verifying that each such person suffers from no illness or communicable disease which would adversely affect foster children in care. This statement shall be obtained annually or as required in writing by an approved health care professional. A licensed health care professional is defined as a physician, nurse practitioner, or a physician's assistant. This statement shall have been signed within the twelve month period preceding the original license or full certificate granted to the home.

7.708.22 Physical Requirements for a Safe and Adequate Foster Care Home [Rev. eff. 1/1/16]

A. Licensing or certifying representatives are authorized but not required to consult the state or county department of health regarding sanitary standards and to consult local fire departments regarding questions of fire safety. A license or certificate may be denied or revoked in the event an applicant or licensee refuses to permit an investigation by these authorities if requested by a licensing or certifying representative, or if such authority advises, that a license or certificate not be issued.

B. The following shall be required of all foster care homes:

1. There shall be an outdoor play space free from hazards of not less than 75 square feet per child in care who is between 12 months and five years of age. This area shall be fenced or otherwise protected. If the area is not fenced, outdoor play shall be supervised by the foster care provider or designee and a specific plan for how safety is to be assured shall be documented in the case file.

2. The presence of firearms and ammunition is strongly discouraged in any home in which foster children are 'cared for. Any weapons such as firearms, air rifles, bows, hunting knives or hunting sling shots shall be unstrung and unloaded at all times when foster children are in the home and shall be stored in locked containers out of the reach of foster children. Ammunition and arrows shall be stored in separate locked containers. Firearms which are solely ornamental are excepted from the storage requirement. Weapons shall not be transported in any vehicle in which foster children are riding unless the weapons are made inoperable and inaccessible. Law enforcement professionals are exempted from the requirements of this section if conditions of their employment require them to carry weapons.

3. At least 35 square feet of usable indoor space exclusive of halls, baths and sleeping area shall be available for each child. However, when a sibling group is placed together in a single foster home, a variance from the minimum space standards is permitted.' All floor space shall have carpets, tile or smooth finish which may be easily cleaned, interior walls shall be constructed of solid material and be free from holes. Unfinished basements must be inaccessible to foster children when safety hazards are present.

4. Exterior doors shall be maintained in such a manner which would permit easy exit. Interior doors shall be designed to prevent children from being trapped.

5. A basement which will be used regularly in the care of children in any manner shall be equipped with more than one exit; such exit may be an accessible window. See Section 7.708.31.G, for additional requirements for nighttime care.

6. The home shall-be equipped with refrigeration, and provisions shall be made for the washing, rinsing and storing of dishes in a safe and sanitary manner.

7. Toys and outdoor play equipment meeting the requirements of Section 7.708.31, F.2.a. shall be available.

8. A comfortable bed or crib in a clean, well-ventilated room, which not customarily used for other purposes such as a kitchen, dining room hall or bathroom, shall be available for all children in the home, including birth or adoptive children or foster children. There shall be a minimum of forty (40) square feet of floor space for each foster child's bed, and the be should be placed at least two feet apart when arranged in parallel.

9. No foster care home shall be used for a rental income business an adult foster care facility. A business of a nature which might hazardous to the health, safety, morals or welfare of foster children shall not be operated on the premises of the foster home. In order to support youth with an independent living stipend, a foster care home may provide a home for a youth that previously resided in foster care in the home on or before the youth’s eighteenth (18th) birthday. The youth shall solely occupy a bedroom and shall not occupy a bedroom with a child or youth in foster care. The foster care home may accept a negotiated portion of the independent living stipend. Negotiation shall include the youth, caseworker, and foster parent(s).

10. Mobile homes used as foster homes shall have at least two exits, be skirted and properly installed and stabilized.

11. Safety issues related to swimming pools shall be assessed by the certification worker, addressed by the county or state health department as necessary, and documented in the case file.

12. If there is a trampoline on the foster home property, safety issues regarding its use must be agreed upon with, the foster parents a addressed in writing in the case file.

C. A certificate shall be denied, suspended, revoked or made probationary for failure to repair or otherwise comply with any of the preceding requirements when a defect or noncompliance with such requirement has been noted by the licensing or certifying representative and brought to the attention of the licensee or applicant in writing.

7.708.23 Foster Home Site [Rev. eff. 1/1/16]

A. The foster care home must be located in an area that is accessible to health resources, public and private utilities, adequate and safe water supplies, sewage disposal, and fire and police protection.

B. The foster care home must comply with local zoning department requirements.

C. The entire premises of the foster care home are subject to inspection for licensing or certification purposes, including, but not limited to, me residence where care is to be provided, the grounds surrounding the foster care home, the basement, the attic (if accessible), any storage buildings, and a garage or carport, if applicable.

D. The foster care home, including indoor and outdoor space, shall be maintained in a clean and safe condition free from hazards to health and safety.

7.708.24 Foster Home Maintenance [Rev. eff. 1/1/16]

A. The foster care home shall be kept in good repair and maintained in a safe, clean, and sanitary condition.

B. All areas of the foster care home available to foster children's activities including equipment, materials and furnishings shall be of sturdy, safe construction, easy to clean, and free of hazards, such as sharp points or comers, splinters, protruding nails, broken play and recreational equipment, or paint that contains lead or other poisonous materials and might be dangerous to the life or health of foster children.

C. All areas of the foster care home shall be kept free from accumulation of significant amounts of non-essential materials such as furnishings, newspapers, or magazines that could pose a fire or health hazard.

D. Provision shall be made for collection, storage, and disposal of trash to prevent infestation by rodents.

7.708.25 Fire Safety [Rev. eff. 1/1/16]

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 foster care home shall contain at least one U.L-approved fire extinguisher, highly visible, easily accessible, and in working condition, weighing not less than five pounds, that has a rating of 2A, 10BC. This requirement may be waived if more extensive fire-control measures are required by a local fire department.

C. A smoke detector, in working condition, must be installed on each level of the foster care home and near sleeping areas.

D. No gas space heaters, open-flame gas or oil stoves, hot plates, or un-vented heaters shall be used in the foster care home for heating purposes. No electric space heaters shall be used in the foster care home for permanent heating purposes.

E. Flammables aerosol paints, insecticides, chemicals, and other dangerous materials shall be locked or stored so they are inaccessible to foster children and must be stored in areas separate from sleeping or living areas. Flammables shall be stored in an approved container.

F. Heating devices such as radiators, registers, fireplaces, wood-burning stoves, and steam and hot water pipes that pose a fire or bum hazard to foster children shall be screened or otherwise protected.

G. Flammable material must not be stored near a furnace, hot water heater, or other heating device.

H. There shall be no candles or other burnable objects permitted in foster children's sleeping areas. Foster children shall not be permitted to smoke inside the foster care home or in any vehicle used to transport children.

I. Exit doors shall be clearly identified to all foster children. No lock or fastening to prevent free escape from the inside of any room used by the foster children shall be permitted.

J. Exit routes shall be kept free of discarded furniture, furnishings, laundry, and stacks of newspapers or magazines that could interfere with the prompt evacuation of the foster care home.

7.708.26 General Comfort and Safety [Rev. eff. 1/1/16]

A. All hazardous chemicals, tools, and other equipment, including matches, plastic bags, paints, gasoline, medicines, insecticides, and cleaning and laundry materials, shall be stored out of reach of young foster children. Products which could cause poisoning or contamination shall not be stored in areas where food is stored or prepared.

B. Water from any source other than a regular municipal water supply shall be tested annually for compliance with water quality requirements.

C. The foster care home shall be equipped with adequate light, heat, ventilation, and plumbing for safe and comfortable occupancy.

D. The foster care home must be equipped with hot and cold running water.

E. All stairways containing more than four steps shall be equipped with a handrail.

F. The foster care home shall have immediate access to a working telephone, and emergency numbers shall either be posted near the telephone or be immediately available, including those related to medical care, fire, law enforcement, and poison control where available. Numbers for the agency or person having legal custody of each foster child shall also be readily available.

7.708.3 REQUIREMENT FOR THE ONGOING OPERATION OF FOSTER CARE HOMES

7.708.31 Care of Foster Children [Rev. eff. 1/1/16]

A. Foster parents shall provide supervision and care appropriate to each child's age, level of development and ability to accept independence and responsibility.

B. Within twenty four (24) hours of arrival at the foster care home, a foster child shall be given an orientation to the home, consistent with the foster child's age and ability to participate, which includes at least the following:

1. Tour of the home and instruction on fire alarm and fire evacuation procedures, escape routes and exits.

2. The rules/regulations of the home.

3. Procedures affecting the foster child's behavior, including limiting or restricting a foster child's rights where allowed, the type of discipline used in the foster care home, and consequences for certain behaviors.

4. The complete foster children's rights and foster children's grievance procedures as developed by the foster care home or by the certifying authority.

C. Substitute care in the foster care home occurs when foster parents are unable to provide supervision and care. The foster parents shall arrange for a qualified substitute who is familiar with these rules and with the foster children in care to provide temporary supervision and care to the foster children in the child(ren)'s identified foster care home.

1. If in care for up to six (6) hours, it is preferable that the provider of substitute care be at least sixteen years old. Exceptions based on age and maturity can be made with concurrence of the foster parent and the certifying authority, but in no case should the provider of substitute care be less than fourteen (14) years of age.

2. If care is provided for more than six (6) hours including overnight care, the substitute care provider must be at least eighteen (18) years of age, trained in first aid and CPR, and must have completed the following background checks:

a. Colorado Bureau of Investigation (CBI);

b. Federal Bureau of Investigation (FBI); and,

c. State Department's automated system.

3. Exceptions to these requirements may be requested by filing an appeal and receiving approval from the Colorado Department of Human Services' designated appeal panel. Appeals must be documented in the provider and foster child's record.

D. Respite Care

Respite care for a foster child(ren) in a certified foster home other than the foster child(ren)'s identified foster home, that exceeds the license capacity of the foster home, shall occur for short term temporary relief of the foster parent(s) for not more than seven (7) consecutive days per month not to exceed 28 days in a calendar year. During the time when respite care for a foster child(ren) is occurring, the respite home may not exceed six (6) foster children or a maximum of eight (8) total children with no more than two (2) children under two years of age. The respite home must be in compliance with all other applicable rules for foster care homes.

E. Health Care

1. Suspected mental or emotional disorders which are observed by foster parents shall be reported to the certifying authority and the child's caseworker so that appropriate care may be obtained.

2. Where pets or other animals are present, additional precautions shall be taken as required to insure both safety and good hygiene. Dogs and cats shall be vaccinated as required by State law or as designated by a veterinarian. Foster children shall not be permitted to mistreat animals. Any animal that poses a threat to a foster child's safety or health must be confined in a place away from the foster child(ren).

F. Home Environment and Family Activity

1. It is the purpose of foster care to provide constructive family living experiences for foster children during the period of placement.

2. Daily activities shall be designed to encourage normal physical, mental, social and emotional development of foster children. This requirement shall be met in the following manner:

   a. Materials and equipment appropriate for the age of foster children in care shall be available for both active and quiet play.

   b. An effort shall be made to provide for contact and friendship between children in foster care and other children of a comparable age. Opportunities shall be provided for both group and individual play.

   c. Foster children shall be encouraged to relate or to communicate with each other and with adults.

   d. Outdoor activity shall be available to each foster child each day, weather permitting.

3. Foster parents or a designated representative from the certifying authority with knowledge of the child shall attend Administrative Reviews for the foster children in their care and participate in the planning for such foster children. They shall receive a copy of the child's Family Services Plan for each foster child in their care.

G. Nighttime Care Requirements

1. Foster children shall be provided with a bed, cot or crib as required by Section 7.708.22, B, 8.

2. Two sheets and suitable warm covering shall be provided to each foster child. Sheets shall be changed weekly or more frequently if needed, and no foster child shall be allowed to remain sleeping in a wet bed.

3. Except for emergency placements, foster children over the age of eighteen (18) months shall not sleep in the same room as unrelated adults on a regular basis. Sleeping rooms for unrelated foster children shall not be shared by foster children of the opposite sex when one foster child is over four (4) years old. Siblings of the opposite sex that are over the age of four (4) years and share bedrooms shall do so only with the written approval of the certifying authority and the county designee. The written documentation must be maintained in the foster child's and provider's file. Adolescent parents and their children may share a room.

4. Each foster child shall be provided with adequate sleep wear, and a complete set of clean sleep wear shall be available in the event that a change is necessary.

5. Sleeping rooms for foster children under five (5) years of age shall be near the bedroom of the foster parents or other responsible person. Monitoring systems may be utilized to ensure safety. Foster children under twelve (12) years of age shall not be permitted to sleep in a detached structure unless a responsible person sleeps in the same structure. Foster children who sleep in a detached structure must have written approval of the county department that placed the foster child, who will assess the foster child's abilities and needs.

H. Infant Care

1. Not more than two infants, whether birth, adoptive or foster children under the age of two years, shall be cared for in a foster care home, except under unusual circumstances such as multiple births.

2. In addition to the applicable provisions of paragraphs A through G, above, infant care shall include the following:

a. Infants shall be held during bottle feeding and at other times during the day. Infants shall not be confined but shall be allowed freedom of movement insofar as practical and shall be provided with an environment designed to stimulate their senses.

b. Diapers shall be changed as required and used diapers cleaned or disposed of consistent with the practices of good hygiene. Toilet training shall not be attempted with any foster child less than eighteen (18) months of age and shall be done in a non-disciplinary manner.

7.708.32 Suspected Child Abuse

Where child abuse is suspected, the foster parent shall be alert for evidence of signs of abuse and report such evidence promptly to the county department of social/human services. A written report of any external signs of injury, such as bruising, scratching or swelling, shall be placed in the foster child's record. If there is any suspicion of abuse or illness, the foster child shall be seen by medical personnel immediately.

7.708.33 Foster Children's Rights [Rev. eff. 1/1/16]

A. The certifying authority shall have written policies and procedures that address and ensure the availability of each of the following core rights for foster children in residence. These rights may not be restricted or denied by the foster care home or certifying authority. Every foster child has the right to:

1. Enjoy freedom of thought, conscience, cultural and ethnic practice, and religion.

2. A reasonable degree of privacy.

3. Have his or her opinions heard and considered, to the greatest extent possible, when any decisions are being made affecting his/her life.

4. Receive appropriate and reasonable adult guidance, support and supervision.

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

6. Receive adequate and appropriate medical care.

7. Receive adequate and appropriate food, clothing, and housing.

8. Live in clean, safe surroundings.

9. Participate in an educational program that will maximize his/her potential in accordance with existing law.

10. Communicate with “significant others” outside the foster care home, such as a parent or guardian, caseworker, attorney or guardian ad litem, current therapist, physician, religious advisor, and, if appropriate, probation officer.

B. The following foster children's rights may be limited; to reasonable periods during the day or restricted according to routine of the foster care home to ensure the protection of the foster children and foster family. Every foster child has the right to:

1. Have access to letter-writing materials, including postage, and to have a foster parent(s) assist him/her if unable to write, prepare, and mail correspondence.

2. Have access to telephones to both make and receive calls in private.

3. Have convenient opportunities to meet with visitors.

4. Wear his/her own clothes, keep and use his/her own personal possessions, and keep and be allowed to spend a reasonable sum of his/her own money.

5. Receive and send sealed correspondence.

C. Foster care homes must develop a plan, in conjunction with the certifying authority, regarding the following rights of foster children and these rights must be explained to the foster children upon admission. The notification must be communicated in a language or mode of communication the foster child can understand. There must be plans for:

1. How and when telephone, including cell phone use, and written communications, including, but not limited to, social networking and other electronic communication, will take place.

2. Extenuating circumstances and emergency situations affecting the foster child and his/her family.

7.708.34 The Prohibited Use of Cruel and Aversive Therapy [Rev. eff. 1/1/16]

The foster care home shall refrain from engaging in all cruel and aversive behavior management, treatment or therapy including, but not limited to, the following:

A. Any intervention designed to or likely to cause a foster child physical pain

B. Releasing noxious, or toxic, sprays, mists, or substances in proximity to the foster child's face.

C. Any intervention that denies a foster child sleep, food, water, shelter, access to bathroom facilities, adequate bedding, or appropriate physical comfort.

D. Any intervention or type of treatment that subjects a foster child to verbal abuse, ridicule, humiliation or that can be expected to cause excessive emotional trauma.

E. Interventions that use a device, material, or object that is designed to simultaneously immobilize all four of the foster child's extremities.

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

G. Physical management, restraint and seclusion except as described at Sections 7.708.36 and 7.714.53.

H. 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.

7.708.35 Discipline [Rev. eff. 1/1/16]

A. The foster care home or certifying authority shall have written policies and procedures regarding discipline that must be explained to all foster children, parent(s), guardian(s), staff, and placing agencies. These policies must include positive responses to a foster child's appropriate behavior.

B. Discipline shall be constructive or educational in nature and may include talking with the foster child about the situation, praise for appropriate behavior, diversion, separation from the problem situation, and withholding privileges.

C. Basic rights shall not be denied as a disciplinary measure.

D. Separation when used as discipline must be brief and appropriate to the foster child's age and circumstances. The foster child shall always be within hearing of an adult in a safe, clean, well-lighted, well-ventilated room in the foster care home that contains at least fifty (50) square feet of floor space. No foster child shall be isolated in a bathroom, closet or pantry.

E. Foster children in care at the foster care home shall not discipline other foster children.

F. A foster care home shall prohibit all cruel and unusual discipline including, but not limited to, the following:

1. Any type of physical hitting or any type of physical punishment inflicted in any manner upon the body of the foster child, such as spanking, striking, swatting, punching, shaking, biting, hair pulling, roughly handling a foster child, striking with an inanimate object, or any humiliating or frightening method of discipline to control the actions of any foster child or group of foster children.

2. Discipline that is designed to, or likely to, cause physical pain.

3. Physical exercises such as running laps, push-ups, or carrying heavy rocks, bricks, or lumber when used solely as a means of punishment.

4. Assignment of physically strenuous or harsh work that could result in harm to the foster child.

5. Requiring or forcing a foster child to take an uncomfortable position such as squatting or bending, or requiring a foster child to stay in a positron for an extended length of time such as standing with nose to the wall, holding hands over head, or sitting in a cross-legged position on the floor, or requiring or forcing a foster child to repeat physical movements when used solely as a means of punishment.

6. Verbal abuse or derogatory remarks about the foster child his/her family, his/her race, religion, or cultural background.

7. Denial of any essential/basic program service solely for disciplinary purposes.

8. Deprivation of meals or snacks, although scheduled meals or snacks may be provided individually.

9. Denial of visiting or communication privileges with family, clergy, attorney, or caseworker solely as a means of punishment.

10. Releasing noxious, toxic, or otherwise unpleasant sprays, mists, or aerosol substances in proximity to the foster child's face.

11. Denial of sleep.

12. Requiring the foster child to remain silent for a period of time inconsistent with the foster child's age, developmental level, or medical condition.

13. Denial of shelter, clothing or bedding.

14. Withholding of emotional response or stimulation.

15. Discipline associated with toileting, toileting accidents or lapses in toilet training.

16. Sending a foster child to bed as punishment. This does not prohibit a family foster care home from setting individual bed times- for foster children.

17. Force feeding a foster child.

18. Physical management, restraint and seclusion.

7.708.36 Physical Management and Seclusion [Rev. eff. 1/1/16]

A. Seclusion is prohibited.

B. Physical management to attain and maintain control or for behavior management, treatment, or therapy is prohibited and/or seclusion is prohibited, unless the foster care home is pre-approved by the certifying authority to perform physical management and/or seclusion and the foster care home is in compliance with Section 7.708.61, K, 2, Section 7.714.53, et seq., and the applicable definitions found in Section 7.714.1. The foster care home must notify the placing caseworker when a child is subject to physical management and/or seclusion.

7.708.37 Religion [Rev. eff. 1/1/16]

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

B. Foster children in care at the foster care home shall be allowed and encouraged to celebrate their religious holidays.

C. Opportunity and assistance shall be provided for each foster child to practice the chosen/preferred religious beliefs and faith of his/her family. If the family has no preference, the individual preference of the foster child shall be respected. This includes, but is not limited to, making necessary arrangements for attendance of foster children at the appropriate religious institution or at a study group for religious instruction.

D. A foster child may be invited to participate in religious activities of the foster care home.

E. A foster child shall not be coerced or forced to participate in the religious activities of the foster care home or to attend religious services.

F. Any form of religious intervention used by the foster care home to control or change a foster child's behavior, or treat or heal a medical condition, must be approved, in writing, by the legal guardian(s) of the foster child prior to the use of the intervention.

G. A foster care home cannot deny medical care to a foster child because of religious beliefs.

H. The foster child's family and/or guardian must be consulted prior to any planned change in religious affiliation made by the foster child while he/she is in care at the foster care home.

7.708.38 Education [Rev. eff. 1/1/16]

A. Foster children shall attend educational/vocational programs in the most appropriate and least restrictive educational setting for the foster child, including, but not limited to, attending regular classes conducted in accredited elementary, middle, and secondary schools within the community.

B. Regular school attendance or an educational plan is required for each foster child according to school attendance laws; a suitable, quiet, well-lighted place for study shall be provided together with necessary books, papers, pencils and other equipment which are reasonably required by school-age children. Foster parents shall review grade reports and other information received from teachers or school authorities with foster children in care and shall counsel and assist foster children regarding adequate classroom performance. The parent, guardian or authority with responsibility for the foster child shall be advised of school performance. Reasonable efforts shall be made to involve a foster child in extracurricular activities. The foster parents shall attend school staffings, conferences, and Individualized Educational Plan meetings when possible.

C. Foster children attending school shall be permitted to participate in school extracurricular activities to the extent of their interests and abilities and in accordance with each individual foster child's plan.

D. In order to ensure that all students who may have disabilities are provided an appropriate education, the foster care home, in cooperation with the certifying authority, shall ensure that adequate “Child Find” procedures are utilized. Such procedures shall be developed cooperatively with Local Education Agencies (LEA) in accordance with Exceptional Children's Educational Act rules and regulations and LEA procedures. Child Find includes a process for screening, referring, assessing and staffing students suspected of having a disabling condition.

7.708.39 Community Participation [Rev. eff. 1/1/16]

A. Community activities shall be supported. The foster parent shall receive training in how to determine whether to approve a child’s or youth’s participation in an extracurricular, enrichment, cultural, or social activity, based upon the criteria in Section 7.701.200.

B. The foster care home shall consider and be sensitive to identity of the child and/or youth, including, but not limited to, cultural, spiritual and/or religious needs. The foster care home shall involve a foster child in activities appropriate to his/her identity, including, but not limited to, consideration of the child's family, community, neighborhood, school activities, friends, and the child's and family's primary language.

C. The foster care home shall utilize available services, facilities, and activity programs of the community, and foster children shall be given opportunities to participate as individuals or as a group in agency-sponsored recreational and cultural programs.

D. With the approval of the certifying authority, the foster care home may deduct reasonable sums from a foster child's allowance as restitution for damages done by the foster child. Restitution must be negotiated with the foster child and based on the foster child's ability to pay. A written record of damages and any restitution paid by a foster child must be maintained by the foster care home and certifying authority.

E. Chores at the foster care home are considered part of the participatory responsibility of living together. They shall provide constructive experiences in accordance with the age and ability of the foster child.

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

G. The foster care home shall comply with all child labor laws and regulations in making work assignments, with consideration for agricultural work assignments in those communities.

H. Paid or voluntary work assignments outside of the foster care home shall be approved by foster parent(s) and the county designee for the foster child, who shall know the employer, the specific type of work, and the conditions of employment.

I. A foster child shall not be exploited. A foster child may not participate in solicitation on behalf of the foster care home or certifying authority for a fund-raising activity without the written permission of the parent(s) or guardian(s) for each specific activity, and the foster child must be willing to participate in the activity.

7.708.4 PERSONAL CARE AND SAFETY OF THE FOSTER CHILD

7.708.41 Medical and Health Services [Rev. eff. 1/1/16]

A. A general medical examination for each foster child must be completed or scheduled with a physician or a nurse practitioner prior to or within fourteen (14) calendar days following placement at the foster care home. If the child has received a medical examination within the previous twelve (12) months, another medical examination is not required during that year as long as the foster home has written documentation of the previous medical exam. A statement from the examiner shall be retained in the foster child's file. This exam shall include the following:

1. An examination for physical injury and disease.

2. Vision and hearing screening.

3. A current assessment of the foster child's health, including immunizations.

B. Whenever indicated, a foster child shall be referred to an appropriate specialist for either further assessment or treatment.

C. Subsequent physical and other examinations shall be done annually or as directed, in writing, by the physician or other qualified health professional.

D. Dental examinations, appropriate to the age of the foster child, must have been completed within four months prior to placement or scheduled or completed within eight (8) weeks following placement. The foster care home or governing body shall ensure that each foster child receives a dental examination every six months or as required in writing by a dentist.

E. At all times there shall be First Aid supplies readily available at the foster care home. Each foster parent must be certified in first aid, or the equivalent, and CPR for all ages of foster children in care.

F. The foster care home, in conjunction with the parent(s) or guardian(s), shall make every effort to ensure that a foster child needing corrective devices such as glasses, hearing aids, etc., is provided with the necessary equipment. The placing authority for the foster child shall assist with obtaining resources as necessary to fulfill this requirement.

G. The foster care home has the right to request a statement regarding the foster child's general health from a medical examiner. In a potentially life-threatening situation, the foster care home shall refer the foster child's care to the appropriate medical and legal authority. If a foster child wishes an exemption from a medical examination or medical treatment due to religious beliefs, the foster child shall submit a written statement signed by his/her parent(s) or guardian(s) which states the reasons for such an exemption. The foster care home has the right to refuse admission to a foster child whose parent(s) or guardian(s) refuses medical treatment or examination based upon religious convictions.

H. Foster parents shall be aware of and shall observe foster children for signs of illness or disease and shall respond to and care for a foster child suffering from illness, accident or injury. If contagious, the foster child affected should be isolated from other children in the home and made as comfortable as possible. First aid care shall be provided as required. If additional care, medical attention or removal from the home is indicated, the appropriate person with responsibility for the foster child shall be contacted and medical assistance shall be obtained without undue delay. A written record of any illness or injury to a foster child shall be retained in each foster child's individual record.

I. The foster care home shall regularly maintain and update a foster child's Human Services Health Passport, or a document containing all the information listed in the Health Passport, for foster children placed by a county department of human or social services. This document is to be photocopied regularly and submitted to the foster child's caseworker. The original of the document shall be given to the caseworker upon the foster child's discharge so that it can be given to the foster care home where the foster child is being admitted or to the foster child's parent(s), guardian(s), or family member(s) with whom the foster child is placed.

J. Medications shall be administered and stored in the following manner

1. When a foster child first goes into care, the foster care home shall ascertain all medication the foster child is currently taking.

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

3. All prescriptive medications shall be administered only upon the written prescription of a physician. The foster care home shall also obtain written authorization from the prescribing physician to administer any non- prescriptive medication.

4. In an emergency situation, non- prescriptive medication may be administered on the verbal authorization of a physician. Written confirmation must then be obtained for the verbal authorization.

5. The foster care home shall maintain for each foster child a cumulative record of all medication, both prescriptive and non-prescriptive dispensed to that foster child, including:

   a. The name of the foster child.

   b. The name and dosage of medication.

   c. The time and date the medication was dispensed.

   d. The name or initials of the person administering the medication.

7.708.42 Food and Nutrition [Rev. eff. 1/1/16]

A. The foster care home shall provide nutritious foods in the variety and amounts as appropriate for the age, appetite, and activity of each foster child in care.

B. At least three nourishing, wholesome, well-balanced meals a day shall be offered at regular intervals except when foster children receive their morning and/or noon meal(s) at school. No more than fourteen (14) hours shall elapse between the evening and morning meals. Nourishing snacks shall be part of the daily food provided.

C. Family meals including all children and adults present in the home shall be provided whenever possible.

D. Foster children shall be encouraged to eat a variety of the food served but shall not be subjected to undue coercion, including forced feeding, or punished for refusal to eat.

E. All food shall be from sources approved or considered satisfactory by the health authority. All foods shall be stored, prepared, and served in such a manner as to be clean, wholesome, free from spoilage, and safe for human consumption. Only pasteurized milk shall be served. Home pressure-canned fruits and vegetables and canned meats cannot be served because of the possible severe health concerns for foster children from botulism in unsafe canned foods. Fruits, vegetables and meats may be frozen.

F. There shall be a record made of the special diets prescribed and prepared for a foster child.

G. Foster children must not be given foods that are contrary to their religious beliefs, or of their family, or are known to cause an allergic reaction or a health hazard.

H. Water shall be readily accessible to foster children.

I. Common drinking cups shall not be permitted.

7.708.43 Personal Hygiene and Daily Routine [Rev. eff. 1/1/16]

A. The foster care home shall ensure that foster children receive training in good habits of personal care, hygiene, and grooming appropriate to their age, gender, and identity.

   1. There shall be supervision by foster parents to provide for proper grooming and physical cleanliness of the foster children.

2. The foster care home shall ensure that foster children are provided with necessary and appropriate toiletry items, including clean, individual towels and washcloths, toothbrush, toothpaste, comb, hair brush, soap, skin lotion, and shampoo.

3. Foster children shall be encouraged or assisted to maintain cleanliness or good hygiene: teeth shall be brushed each day and more frequently when possible.

B. The foster care home shall have basic daily routines for foster children in care.

1. Daily routines shall not be allowed to conflict with the implementation of a foster child's Family Services Plan.

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

3. Opportunity for physical exercise shall be planned for each foster child.

7.708.44 Clothing and Personal Belongings [Rev. eff. 1/1/16]

A. The foster care home shall allow a foster child in care to bring his/her personal belongings to the program, as defined by the foster care home policy, and to acquire belongings of his/her own. However, the foster care home shall, as necessary, limit or supervise the use of these items while the foster child is in care. Where extraordinary limitations are imposed, the foster child shall be informed of the reasons, in a language or manner of communication the foster child can understand.

B. The foster care home shall ensure that each foster child in care has adequate clean, proper-fitting, attractive, and seasonable clothing as required for health, comfort, and physical well-being and as appropriate to age, gender, individual needs, and identity.

1. Each foster child's clothing shall be distinguished as his/her own.

2. A foster child's clothing shall be kept clean and in good repair. The foster child shall be involved, as appropriate, in the care and maintenance of his/her clothing. As appropriate, laundering, ironing, and sewing facilities shall be accessible to the foster child.

C. The foster care home in conjunction with the placing authority shall ensure that discharge plans make provisions for clothing needs at time of discharge. The wardrobe for each foster child shall go with him/her at time of discharge.

7.708.45 Emergency Drills [Rev. eff. 1/1/16]

A. There shall be a plan for foster parent(s) and foster children to follow in case of emergency or disaster. The plan shall include provisions for roles and responsibilities during an emergency, evacuation of the foster care home and the assignment of a central meeting place where each individual may be accounted for.

B. Fire exit drills must be held often enough so that all occupants are familiar with the drill procedure and their conduct during a drill is a matter of established routine.

C. Drills must be held at unexpected times and under varying conditions to simulate the conditions of an actual fire.

D. Drills must emphasize orderly evacuation under proper discipline rather than speed. Running or horseplay shall not be permitted.

E. Drills must include suitable procedures for ensuring that all persons in the foster care home actually participate.

F. A record of fire drills must be recorded by the foster care home.

G. Smoke alarm devices shall be regularly used in the conduct of drills.

H. The foster care home shall make special provisions for the evacuation of any foster child with a disability in the foster care home.

I. The foster care home shall take special care to help emotionally disturbed or perceptually handicapped foster children understand the nature of such drills.

J. If appropriate to the location of the foster care home, tornado drills must be held often enough so that all occupants are familiar with the drill procedure and conducting a drill is a matter of established routine. A record of tornado drills must be recorded by the foster care home.

7.708.46 Transportation [Rev. eff. 1/1/16]

A. A foster care home or certifying authority shall ensure that each foster child is provided with the transportation necessary for implementing the foster child's family service plan.

B. A foster care home shall have means of transporting foster children in cases of emergency.

C. Any vehicle used by the foster care home in transporting foster children in care, whether such vehicle is operated by a foster parent or any other person acting on behalf of the foster care home, shall be property licensed, and the vehicle shall be maintained in accordance with Colorado law.

D. Any foster parent or other person acting on behalf of the foster care home operating a vehicle for purpose of transporting foster children shall be properly licensed to operate the class of vehicle in accordance with Colorado law.

E. Foster children must be properly fastened into a restraint system that conforms to all applicable Federal Motor Vehicle Safety Standards and that are pursuant to Colorado law.

F. A foster care home shall not allow the number of persons in any vehicle used to transport foster children to exceed the number of available seats in the vehicle.

G. The vehicle shall be enclosed and provided with door locks.

H. A foster care home shall ascertain the nature of any need or problem of a foster child which might cause difficulty during transportation, such as seizures or a tendency toward motion sickness. The family foster care home shall communicate this information to the driver of any vehicle transporting foster children in care.

7.708.5 RECORDS AND REPORTS

7.708.51 Records [Rev. eff. 1/1/16]

A. The foster care home, in conjunction with the certifying authority, shall maintain complete records as required for the licensing or certification of the foster care home in accordance with the rules regulating foster care homes.

B. Records for foster children shall be retained for at least three years. Retention of records for a longer period may be desirable when they reflect an accident, injury or other unusual circumstance.

C. A record of admission shall be completed for each foster child in care prior to or at the time of placement. The admission record shall be maintained at the foster care home where the foster child resides and shall contain:

1. Foster child's name, date and place of birth (verified by a birth certificate when possible), gender, race, religious preferences of parent(s) or foster child, date and reason for placement.

2. Foster child's address and telephone number, parent(s) or guardian(s) address and telephone number if different from the foster child.

3. Name, address, day and nighttime telephone number of individual or agency placing the foster child with the name of individual arranging the placement.

4. Any documents pertaining to the foster child's legal status such as court orders, including the appointment of a Guardian ad litem, legal guardianship, or custody agreements.

5. A copy of the placement agreement pursuant to 7.708.61, K.

6. Health records including a health history, chronic medical problems of the foster child, illnesses the foster child has had during the last six months and a complete list of all medications the foster child is taking.

D. Each foster child's file shall also include:

1. Current medical and dental reports, accident, injury, or illness reports, record of medication administered and necessary medical care provided to the foster child while in placement.

2. Copies of educational records and reports of school work, including scholastic performance, certificates of achievement or award, copies of school pictures, extracurricular interests.

3. The foster child's Family Services Plan, a summary of the periodic evaluations of the foster child's progress and resultant changes in the Family Services Plan.

4. Psychiatric and psychological summaries, when available.

5. Summary recording of significant contacts with parent(s), guardian(s) and other involved agencies.

6. If requested by the provider, a written notice to employees of the Department of Human Services and of county departments or other individuals with a need to know, if the foster parents do not want personally identifiable information provided to adult members of the foster child's family. Written notice may be subsequently provided to the parties aforementioned for release of personally identifiable information to the foster child's family which shall include the consent to release information, the foster parent's signature, and the date.

7.708.52 Reports [Rev. eff. 1/1/16]

The following information shall be reported consistent with the requirements in Section 7.701.52 (12 CCR 2509-8).

A. The foster care home shall immediately notify the foster child's parent(s), guardian(s), and/or the responsible agency of any serious illness or serious injury resulting in medical treatment away from the foster care home, hospitalization or death involving a foster child in care.

B. The foster care home shall notify the parent(s), guardian(s), or placing authority as soon as possible upon discovery that a foster child has run away.

C. A report about a death must include:

1. The foster child's name, birth date, address, and telephone number.

2. The names of the foster child's parent(s) or guardian(s) and their address and telephone number if different from that of the foster child.

3. Date of the fatality.

4. Brief description of the incident or illness leading to the death.

5. Names and addresses of witnesses or persons who were with the foster child at the time of death.

6. Name and address of police department or authority to whom the report was made.

D. The foster care home shall notify the certifying authority of any change in the status of the foster care home, police intervention or moving traffic violations that could affect care and safety of foster children.

7.708.6 CERTIFYING AUTHORITY REQUIREMENTS

7.708.61 Admission Requirements [Rev. eff. 1/1/16]

A. Admission of a foster child to a foster care home shall be in keeping with the stated purpose of the foster care home and shall be limited to those foster children for whom the foster parent(s) is qualified and by the needs of foster children already in residence to provide the care necessary. Care must be provided in the least restrictive, most appropriate setting in order to meet the foster child's needs.

B. Each foster care home or its certifying authority shall have a written admission policy which at a minimum must include:

1. The policies and procedures related to intake.

2. The age range and sex of foster children accepted/admitted for care.

3. The needs, problems, situations or patterns best addressed by the foster care home.

4. Any pre-placement requirements for the foster child, the parent(s) or guardian, and/or the placing agency.

5. The anticipated problems or situations that would result in the foster care home or certifying authority requesting removal of a foster child from placement prior to the planned discharge.

C. The written description of admission policies and criteria shall be provided to referring agencies.

D. Information regarding the prospective foster child shall be discussed with the foster parent(s) as early as possible prior to placement. The foster care home shall accept a foster child into care only after a preliminary assessment/screening of presenting problems in areas such as social, physical health, mental health, psychological concerns, previous physical or sexual abuse, and concerns about previous delinquent, assaultive, or destructive behavior, if appropriate, has been conducted.

E. It is desirable for the foster child to visit and become familiar with the foster parents, the foster care home and other persons living in the home prior to placement.

F. For each foster child referred for placement, the foster care home shall be provided with a current comprehensive intake assessment, including a social, health, and family history, developmental assessment, mental health, and a psychological summary, if determined to be necessary by the foster care home or certifying authority. Educational records shall be provided if appropriate. As much of this information as possible shall be provided to the foster parent prior to admission, but the total assessment shall be completed by the placing authority within one month after admission. If the foster care home or certifying authority is unable to obtain this information within these time periods or is totally unable to obtain the information, the certifying authority must document its attempts to obtain the information and reasons for not obtaining the information.

G. At the time of placement, the foster parent(s) shall be provided with a record of admission as outlined in Section 7.708.51.C. The Medicaid card shall be given to the foster parent(s) for Medicaid eligible foster children as soon as possible after placement. If a foster child is placed at the foster care home as an emergency placement, the foster care home shall be provided with at least the following information: name, birth date, if available, and physical description of the foster child, date and time of the admission; name, address telephone number and authority of person bringing the foster child to the foster care home, and the reason for placement. Any other information that may be available should be recorded at the time of placement or as it becomes available. The date that placement terminates shall also be recorded.

H. For all placements of foster children, previous medical records should be obtained and pertinent information from those records, including immunization records shall be given to foster parents within four weeks of the initial placement. The medical history shall contain, to the maximum degree possible, the information listed in the Colorado Department of Human Services Health Passport.

I. Preparation of the foster child for admission shall be in a manner consistent with the foster child's age and ability to participate in the plan and to understand the reason for the placement.

J. Prior to placement of the foster child at the foster care home, the, guardian(s), and/or placing agency must be notified of the religious practice, philosophy, and affiliation of the foster care home.

K. The placement agreement shall be developed with the involvement of the foster child, the parent(s) or guardian(s) and the representative of the placing agency. Where the involvement of any of these is not feasible or desirable, the reasons for the exclusion shall be recorded by the certifying authority. The placement agreement shall include by reference or attachment at a minimum the following:

1. Discussion of the foster child's and the parent's or guardian's expectations regarding: family contact and involvement: how family contact and involvement are to occur; the nature and goals of care, including any specialized services or specialized treatment to De provided: the religious orientation and practices of the foster child and, or family; and the anticipated planned discharge date and plan for the foster child following discharge.

2. The policy and procedure to be followed regarding the use of physical management in an emergency pursuant to Section 7.714.53, et seq., and Section 7.708.36.

3. A delineation of the respective roles and responsibilities of all agencies and persons involved with the foster child and his/her family.

4. Written authorization for care and treatment of the foster child.

5. Written authorization to obtain routine medical and dental care for the foster child and to obtain emergency medical and dental care.

6. Legal status or custody of the foster child.

7. If a foster child is being placed by a Colorado county department of human or social services, the appropriate state form or contract shall be completed. This form or contract may provide some of the required authorizations and shall require that the foster parent is trained in how to apply the reasonable and prudent parent standard.

7.708.62 Foster Children's Grievance Procedure [Rev. eff. 1/1/16]

The certifying authority must establish a written grievance procedure that provides adequate due process safeguards, spells out the appeal process, and assures that foster children and parent(s) or guardian(s) are entitled to report any grievance and shall not be subject to any adverse action as a result of filing the grievance.

A. The foster care home and/or certifying authority for the foster care home must follow grievance procedures without alteration, interference, or unreasonable delay.

B. If a grievance is filed with the foster care home, the grievance shall be recorded in the foster child's official case record along with the investigation findings and resulting action taken by the foster care home or certifying authority. Information regarding the grievance must be sent to the individual or agency holding legal custody of the foster child.

7.708.63 Comprehensive Program for Medical Care for the Foster Child [Rev. eff. 1/1/16]

The certifying authority shall ensure the availability of a comprehensive program of preventive, routine, and emergency medical and dental care for each foster child in care. Every reasonable effort shall be made to obtain routine and corrective dental care. The certifying authority shall have a written plan for providing such care. This plan shall include at a minimum:

A. Ongoing appraisal of the general health of each foster child, including immunizations, in accordance with state law and regulations.

B. Procedures for obtaining diagnostic services, emergency care, including the availability of emergency medical care on a 24-hour, seven-day-a-week basis, corrective care, recuperative care, and immunization updates.

C. Provision of health education, which includes sex education, and birth control information and education, age appropriate to the foster child.

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

E. The provision of dental care by a Colorado-licensed dentist, who is available to the foster care home.

F. Procedures for dispensing medication, storage of medication, documentation of administration of all medication, disposing of medications when not needed or no longer in use, and notification to a primary physician in cases of medication errors and/or drug reactions.

7.708.64 On-Going Health of Foster Care Parents [Rev. eff. 1/1/16]

A. A certifying authority shall not certify or continue to certify any person whose health, or emotional or psychological makeup impairs his/her ability to properly protect the health and safety of foster children.

B. A certifying authority shall not allow a foster parent provide care for foster children if the foster parent, upon examination or as a result of tests, shows indication of a physical condition which could be hazardous to a foster child, or self, or which would prevent performance of duties.

C. If in the opinion of a licensed health care professional or licensed mental health practitioner, a medical, emotional or psychological condition exists at any time which may jeopardize the health and/or safety of foster children or adversely affect the ability of foster home parents to care for such foster children, the issuance of a certificate shall be conditioned upon the satisfactory report of the licensed health care professional and, if foster children are in care, the certifying authority shall contact the appropriate social/ human services personnel to make satisfactory arrangements for the temporary care of foster children.

D. The unfavorable report from any medical evaluation concerning the physical, mental health or emotional stability of any foster care parent or applicant must be evaluated and may be grounds for denial, revocation or making probationary of a foster care certificate.

7.708.65 Orientation, Training, and Certification [Rev. eff. 1/1/16]

A. The certifying authority shall have a comprehensive written plan for the orientation, pre-certification training, certification, and ongoing training of foster parents.

1. The certifying authority shall have an introductory training and orientation program for all foster parents. This program shall include, at a minimum, twenty-seven hours of initial core training consisting of at least twelve (12) hours prior to placement of a child and the remaining hours to be completed within 3 months after placement, including the reasonable and prudent parent standard, orientation to emergency and safety procedures and the general and specific duties and responsibilities of being a foster parent.

2. If a child is placed with a foster care family on an emergency basis, twelve (12) hours of core training must be completed and the remaining hours of training competed within 4 months from the date of placement. An emergency means that a child's safety is subject to actual or likely harm, immediate or emerging, serious or sever, which requires control.

3. The certifying authority shall maintain written documentation of specific in-service training held, foster parents participating, the hours involved, and/or other on-going training activities in which foster parents were involved.

B. The certifying authority shall create a training development plan for each foster parent(s) to document the strengths and competencies of the foster parent(s) and to identify those areas in which additional training is needed.

C. The certifying authority shall document that foster parents receive quality, appropriate, competency-based training in the following areas that builds on basic competencies of the foster parent(s) established through life experiences and pre-certification training.

1. The foster care home's emergency and safety procedures, including but not limited to fire evacuation drills, tornado drills, where appropriate, and flood evacuation drills, where appropriate, on at least a semiannual basis.

2. The principles and practices of child care, including developmentally appropriate practices.

3. The certifying authority's administrative procedures and overall program goals.

4. Acceptable behavior management techniques that comply with these rules and, if applicable, Section 7.708.36 and Section 7.714.53, et seq.

5. Acceptable discipline techniques that comply with these rules.

6. Appropriate boundaries (both physical and emotional) between foster parents and foster children while in placement at the foster care home and after discharge.

7. Positive and constructive methods of dealing with the foster child, including but not limited to, physical structuring of the environment and de-escalation of crisis situations.

8. The foster parent is trained and knowledgeable, and has the competencies required to apply the reasonable and prudent parent standard based upon the criteria in Section 7.701.200.

9. Annual review of these regulations by foster parents.

D. Training requirements for the initial year of certification are as follows:

1. Twenty-Seven (27) hours of Core training, as identified in Section 7.708.65, A; and,

2. CPR and First Aid training; and,

3. Twenty (20) hours of ongoing specialized training.

E. Annually, each foster parent, except therapeutic foster parents or treatment foster parents, must complete twenty hours of on-going specific training as required in his/her training development plan. Training must include at least the areas listed above. Therapeutic or treatment foster parents providing therapeutic services must complete an additional twelve hours of on-going training annually for a total of thirty-two hours of training in such areas as dynamics of victimization issues, with emphasis on appropriate age and developmental levels; and the individual needs of the foster children in care. All providers serving children funded by the Children's Habilitation Residential Program (CHRP) must complete thirty-two (32) hours of ongoing specific training as identified in their training development plan.

7.708.66 Transportation Policy [Rev. eff. 4/1/12]

The certifying authority shall have a written policy in compliance with Colorado statute(s), Department of Revenue and Department of Motor Vehicle requirements concerning the circumstances a vehicle may be driven by a licensed foster child alone or with a passenger. Such driving privileges shall be a part of the foster child's family services plan.

7.708.67 Limitation of Foster Children's Personal Belongings [Rev. eff. 1/1/16]

The decision and reasons why a foster care home would limit a foster child's access to his/her personal belongings brought to the foster home upon admission shall be recorded in the foster child's case record maintained by the placing authority.

7.708.68 Personal Allowance and Work Opportunities

Foster children shall be provided personal allowance and/or work opportunities according to the established policy of the certifying authority and shall have opportunities appropriate to the foster child's age and development to experience the use and value of money by making purchases for items according to their own choice.

A. Money earned, received as a gift, or received as allowance by a foster child in care shall be deemed to be that foster child's personal property.

B. Limitations may be placed on the amount of money a foster child may possess or have access to when such limitations are considered to be in the foster child's best interests.

7.708.69 Confidentiality of Records and Reports

A. The certifying authority shall have a policy as to the maintenance, storage and confidentiality of records.

B. Records shall be the property of the certifying authority and shall be protected against loss, tampering, or unauthorized use.

C. Facts learned about foster children and their families shall be kept confidential, with the following exceptions:

1. In medical emergencies, and then only when the assistance and/or expertise is required of that unauthorized person; or,

2. The foster child, his/her parent(s) or guardian(s) and their respective legal counsel(s), a court having jurisdiction over the foster child, or an authorized public official, or certifying/licensing representative in performance of his/her mandated duties; or,

3. If the parent(s) or guardian(s) has given voluntary, written consent.

7.708.7 AUTHORITY TO WAIVE NON-SAFETY CERTIFICATION STANDARDS FOR KINSHIP FAMILY FOSTER CARE PROVIDERS [Rev. eff. 1/1/16]

Pursuant to Section 26-6-106(6)(a), C.R.S., a county director or his/her designee may waive non-safety certification standards for prospective or current kinship foster care providers defined in Section 7.708.11 (12 CCR 2509-8). The safety and well-being of the child and/or youth shall not be compromised. The following non-safety certification standards may be waived case-by-case:

A. Certification of Foster Care Homes

1. Two (2) of three (3) references are not related to the applicant referenced in Section 7.708.21, F.

2. Certificates shall not be granted to applicants who are less than twenty-one (21) years of age on the date of application referenced in Section 7.708.21, H.

3. A license or certificate shall not be granted for a foster care home unless the application has demonstrated the ability to manage a household so that the certifying authority may determine that the applicant is able to acquire food, materials, and other equipment as may be required for child care referenced in Section 7.708.21, K.

4. Each foster parent shall have a health assessment within one (1) year prior to certification or within thirty (30) calendar days after certification and thereafter as required, in writing, by a licensed health care professional. The reports of the medical examinations shall be dated and signed by the examining physician or nurse practitioner and shall be provided to the certifying authority. Reports shall include a statement of the evaluation of the person's physical ability to care for children and youth in foster care.

   If, in the opinion of the licensed health care professional or the assessment worker, an emotional or psychological condition exists which would have a negative impact on the care of children and youth in foster care, the issuance of a license shall be conditioned upon the satisfactory report of a licensed mental health practitioner referenced in Section 7.708.21, L.

B. Facility Standards

1. A minimum of seventy-five (75) square feet per child in foster care who is between twelve (12) months and five (5) years of age referenced in Section 7.708.22, B, 1.

2. Archery bows that require professional stringing must be unstrung referenced in Section 7.708.22, B, 2.

3. A child or youth shall sleep in a crib or bed in a clean, well-ventilated room, which is not customarily used for other purposes such as a kitchen, dining room, hall, or bathroom. There shall be a minimum of forty (40) square feet of floor space for the bed for each child or youth in foster care, and they should be placed at least two feet apart when arranged in parallel referenced in Section 7.708.22, B, 8.

4. No foster care home shall be used for rental income referenced in Section 7.708.22, B, 9.

5. All stairways containing more than four (4) steps shall be equipped with a handrail referenced in Section 7.708.26, E.

C. Ongoing Operation of Foster Care Homes

1. Except for emergency placements, children and youth in foster care over the age of eighteen (18) months shall not sleep in the same room as unrelated adults on a regular basis. Sleeping rooms for unrelated children and youth in foster care shall not be shared by others in foster care who are of the opposite sex when one of the individuals in foster care is over four (4) years old as referenced in Section 7.708.31, G, 3.

2. Not more than two (2) infants, whether birth, adoptive, or foster children under the age of two (2) years, shall be cared for in a foster care home, except under unusual circumstances such as multiple births, referenced in Section 7.708.31, H, 1.

3. Personal Care and Safety of the Foster Child

   a. Home pressure-canned fruits and vegetables and canned meats cannot be served, referenced in Section 7.708.42, E.

   b. Each foster child's clothing shall be distinguished as his/her own clothing, referenced in Section 7.708.44, B, 1.

7.708.71 Procedures for Waiving Non-Safety Certification Standards [Rev. eff. 1/1/16]

A. Each waiver shall be considered case-by-case; and,

B. Shall be documented on the prescribed State Department form; and,

C. The documentation shall contain a description of the applicability of the waiver to the safety or well-being needs of the child and/or youth with a kinship/relative relationship to the prospective or current kinship foster care provider; and,

D. The documentation shall be placed in the certification record; and,

E. A summary of the waiver information shall be documented on the certificate.

7.708.72 Special Conditions, Restrictions, or Requirements for Certification of Prospective Current Kinship Foster Care Providers [Rev. eff. 1/1/16]

A county director or his/her designee may take the following actions to address the safety or well-being needs of a child or youth:

A. Require special conditions for certification;

B. Limit or restrict a certificate; and/or,

C. Require a written agreement for compliance.

7.708.73 Circumstances When Certification Standards Shall not be Waived [Eff. 12/1/12]

A. The safety or well-being of a child or youth is compromised.

B. Background checks, including:

   1. A fingerprint-based criminal history check of CBI and FBI records;

   2. A child abuse/neglect records check in every state where the adult has resided in the five (5) years preceding the date of application for each adult eighteen (18) years of age and older) living in the home;

   3. A comparison search in the Colorado State Courts data access, using the name and date of birth with available criminal history information for each adult eighteen (18) years and older living in the home;

C. Twenty-seven (27) hours of initial pre-certification training and ongoing training referenced in Section 7.708.65, C and D; and/or,

D. Required denials of applications or certificates referenced in Section 7.500.312, D and 26-6-104 (7)(a)(I)(A-F), C.R.S.

7.708.74 Appeals of Decisions [Rev. eff. 1/1/16]

Prospective and current kinship foster care home providers do not have the right to appeal the decision made by a county director or his/her designee related to waivers of non-safety certification standards.

7.709 RULES AND REGULATIONS FOR SPECIALIZED GROUP FACILITIES [Eff. 11/1/2008]

All Specialized Group Facilities must comply with the "Quality Standards for 24-Hour Child Care", the "Rules Regulating Specialized Group Facilities", the "General Rules For Child Care Facilities", and the "Rules Regulating Special Activities".

7.709.1 DEFINITIONS [Eff. 11/1/2008]

A. The "Specialized Group Facility" (SGF) is sponsored and supervised by a county department of social/human services henceforth to be known as the county) or a licensed child placement agency (henceforth to be known as the agency) for the purpose of providing 24 hour care for three (3) or more children, but fewer than 12 children from three years old to sixteen years old and for children from 16 to 18 years old and those persons 21 years old who are placed by court order prior to their eighteenth birthday whose special needs may best be met through the medium of the small group. The two types of specialized group facilities are the specialized group home and the specialized group center.

1. A "specialized group home" is located in a house owned or otherwise controlled by the group home parents who are primarily responsible for the care of the children and reside therein.

2. A "specialized group center" is located in a house owned or controlled by a governing body that hires the group center parents or personnel who are primarily responsible for the care of the children.

3. The "sponsoring agency" is the county or agency that is responsible for supervising the SGF and providing support and evaluation of the facility every week by a qualified staff member.

4. The "governing body" is the individual, partnership, corporation or association in whom the ultimate authority and legal responsibility is vested for the conduct of the specialized group center and the center's relationship with the supervising agency. The sponsoring agency and the governing body may be the same.

B. A specialized group facility may accept children five years old and over in an emergency for a short period of time. Special rules necessitated by the emergency placement regarding intake, records, placement planning and staffing are found at Section 7.709.26.

C. No more than two children less than five years old may be cared for in a specialized group facility at one time.

D. In specialized group facilities, the number of natural and relative children less than sixteen years old of the caretaker plus the foster children shall not exceed eleven children.

7.709.2 REQUIREMENTS OF A SPECIALIZED GROUP FACILITY [Rev. eff. 6/1/12]

7.709.21 Operation of Specialized Group Homes or Specialized Group Centers [Rev. eff. 6/1/12]

A. The specialized group facility shall be sponsored and supervised by a county or agency.

B. The supervisory responsibilities of the sponsoring agency are:

1. To be knowledgeable with the Rules Regulating Specialized Group Facilities; and,

2. Participate in the development and application process to include verifying that the original application submitted is complete with all required signatures and submitted in a timely manner; and,

3. Ongoing assessment of the specialized group facility for quality of care issues; and,

4. Annual evaluations of the governing body, unless the governing body and the sponsoring agency are the same agency.

C. The sponsoring agency shall be responsible to ensure that state rules are followed regarding:

1. The hiring, training and scheduling staff; and,

2. Placement decisions including, but not limited to, appropriateness of placement and least restrictive environment; and,

3. Documentation, reporting and corrective action of critical incidents.

7.709.22 Personnel Qualifications and Role of a County Department of Social Services or a Licensed Child Placement Agency to Establish and Supervise a Specialized Group Home or Center [Rev. eff. 11/1/15]

A. The Specialized Group Home or Center shall be supervised by a paid staff member of the agency who holds a Master of Social Work degree or a master's degree in behavioral science with an emphasis in child development and/or family relations and a minimum of two years paid full time or equivalent part-time experience in social work; or if the staff member does not have the aforementioned education and experience, then he/she must have a bachelor's degree with a major in social work, sociology, psychology or closely related field and be directly supervised by an agency staff member holding the master degree and experience described above.

B. In establishing a new group home or center the agency shall, with the group home parents or governing body, complete a financial feasibility study reflecting actual and realistic cost factors as well as adequate resources to insure its ongoing operation.

C. A statement of purpose and function which includes a description of the characteristics of the youth population which is to be served by the facility shall be written by the agency and the group home parents or the group center governing body.

D. The agency and the group home or center parents or personnel shall develop and adhere to written policies and procedures regarding the care of children which shall be reviewed annually and shall include the following:

1. Provision for emergency procedures including illness, accident, fatality and fire.

2. Participation in special activities in compliance with Section 7.719.

E. The group home or center parents or personnel and the agency shall develop and adhere to written policies and procedures regarding personnel including: pay (when appropriate), provision of relief time and vacation time, annual performance evaluation, training opportunities, selection of personnel and maintenance of personnel records.

F. The agency staff member who supervises the group home or center shall obtain, provide and/or coordinate the following services for children in care:

1. Group and/or individual counseling for children and their families.

2. For each child, long range, intermediate and short term goals shall be established and a case plan written. The goals and case plan must include a plan for discharge and must be developed and evaluated pursuant to regulation Section 7.714.4, C,D. Goals and case plan for children three and four years old shall be evaluated monthly.

3. Records for the home or center as required in Section 7.709.27.

4. Psychiatric, psychological or developmental evaluations and consultations as required.

5. Specialized educational resources as required.

6. All necessary legal representation of child.

7. Consultation with the home or center parents or personnel about methods of work with the children.

8. Assessment of quality of care with the home or center parents or personnel.

G. The agency staff member shall meet in each specialized group facility with the primary caregivers and other personnel, if available, a minimum of two hours per week exclusive of counseling services, to discuss individual children, problems, program and/or special needs.

H. The agency shall ensure that adequate records be maintained about group home or center income and expenses, the provision of clothing, allowances, dental and medical services and medicine.

I. Staff designated to authorize participation in activities is trained and knowledgeable, and has the competencies required to apply the reasonable and prudent parent standard based upon the criteria in Section 7.701.200.

7.709.23 Character, Suitability and Qualifications of Group Home or Group Center Parents or Personnel [Eff. 11/1/2008]

A. The group home or group center parent's or personnel's own children shall not have been placed in foster care or a residential treatment facility under circumstances tending to show that the parent is unable or unwilling to care for his/her own children unless the placement was primarily for such reasons as the physical illness of the parent, physical or mental disability of the child or the relinquishment of an infant child for adoption.

B. The group home or group center parents or personnel shall be able to demonstrate through satisfactory past experience and references the ability to provide for the proper physical, mental and character development of children in care.

C. The group home or group center parents or personnel shall demonstrate stability in family or marital relationships, where applicable, within the home where the care is to be provided.

D. The group home or group center parents or personnel shall hold a high school diploma or General Equivalency Diploma (GED).

E. The group home or group center parents or personnel shall not be less than 21 years of age, shall be appropriate for the age of children in care and shall possess the adequate physical stamina to care for children. An individual such as the son or daughter of the group home or group center parents, who is well acquainted with the children in care and is between the ages of 18 and 21 years old may be a child care personnel and assist in the care of the children with the approval of the agency

F. Children of the group home parents or group center parents or personnel and any other persons not placed by the agency and living in the group home or group center shall obtain a physical examination annually or as required in writing by an approved health care professional.

G. The group home or group center parents or personnel shall include at least one primary caregiver who is a full-time employee of the facility, provides some direct care for children, supervises other child care personnel and holds major responsibility for child care.

H. The primary caregiver shall have had verifiable working experience with children of the age to be cared for in the group facility. Such experience shall be from one or more of the following:

1. One year of experience as a foster home parent.

2. Two thousand hours work experience with children of the age to be cared for in the group facility.

3. One year of experience as a child care worker in a residential facility for children; and,

4. The group home primary caregivers who have not previously received 12 hours of “core” training shall receive 12 hours of training within the first twelve (12) months following the submission of the applications.

I. Other child care personnel in the group center or group home shall be supervised by a primary caregiver.

J. The group home or group center parents or personnel who are the primary caregivers shall be evaluated by a board-eligible psychiatrist, a certified psychologist or a Licensed Clinical Social Worker, and shall obtain a statement from the evaluator which evaluates the persons.

1. Psychosocial history to include family of origin style under which they were parented; relationships with parents and siblings; and,

2. Child abuse and neglect assessment to include prior history of physical emotional, verbal, sexual abuse or neglect; and,

3. Relationships with extended family, significant romantic relationships, marriages, engagements, failed relationships and estrangements; and,

4. Work history and reason for wanting to work with children in a specialized group facility; and,

5. Assessment of finances; and,

6. Children, both biological and adopted, and relationships with children, including adult children; and,

7. Support systems available to the primary caregiver; and,

8. Areas of interest, hobbies, and activities; and,

9. Tolerance and intolerance to include stressors, coping skills, expectations, negative experiences, survival of crisis in their life experiences and religious issues; and,

10. Health history and medication history to include substance abuse, drugs, alcohol history and issues and current medication; and,

11. Previous or current psychological issues including the history of the issues or therapy; and,

12. Previous child care responsibilities and experiences; and,

13. Legal and criminal background and/or history; and,

14. Involvement or experiences with child protective services of a county department of social/human services as a child or as an adult; and,

15. Education and training; and,

16. Any existing condition which may jeopardize the health or well-being of children or impair the care of the children.

K. The licensing or certifying authority must receive at least three statements which describe the primary caregiver's character and ability to provide care for children from references, provided by the primary caregiver, who are not related to the caregiver and have known the caregiver one year or longer. References need not be residents of Colorado.

L. References shall be obtained by the group home or center for other personnel. References shall be kept on file at the facility or the agency.

7.709.24 Physical Requirements for a Safe and Adequate Specialized Group Facility [Rev. eff. 6/1/12]

A. The following shall be required of each specialized group care facility:

1. In facilities licensed after May 1, 1984, all furnaces shall be separated from living areas by one-hour fire resistive material, provided with adequate outside combustion air, installed and maintained with safety devices to prevent fire, explosions and other hazards. The space around the furnace shall not be used for storage.

2. Electrical wiring systems throughout the facility shall be in good repair. There shall be no three-way plugs or extension cords in use. There shall be no exposed wiring.

3. Household materials which may be dangerous to children, such as matches, plastic bags, cleaning and laundry supplies as well as household tools and equipment which may present a danger to children, shall be stored out of their reach when appropriate.

4. In each facility licensed after May 1, 1984, there shall be at least two approved, alternate, widely separated means of egress from each floor of the building to safe and Open space at the ground level.

5. No lock or fastening to prevent free escape from the inside of any room or building used by the children shall be permitted. Exit door hardware shall be of the single-action type.

6. Exit doors shall be obvious, and where this is not so, exit signs shall be installed.

7. The local fire department shall determine the adequacy of exits and other measures for life safety in accordance with the requirements of the Uniform Building Code and the National Fire Protection Codes. In cases of practical difficulty or unnecessary hardship, the local fire department may grant exceptions from the Uniform Building Codes or the National Fire Protection Codes, but only when it is clearly evident that reasonable safety is thereby secured.

8. In new facilities licensed after May 1, 1984, any accessible areas beneath stairways shall be enclosed with one-hour fire-resistant material.

B. Living areas for children in a specialized group home or center shall include:

1. Separate sleeping rooms for boys and girls. In sleeping rooms that accommodate two to four children, 60 square feet of floor space per child shall be provided. There shall be no more than four children in any bedroom. Each room for single occupancy shall have a minimum of 80 square feet of floor space. Closet space and drawer space for personal items sufficient for the occupants in each sleeping room shall be provided.

2. Each child shall be provided suitable sleeping facilities consisting of individual beds or bunks complete with mattresses in good repair and constructed so as to facilitate cleaning while in use by residents, and upon each change of occupancy. Single beds shall be spaced not closer than 36 inches laterally or end to end. Triple-deck bunk facilities are prohibited. Beds being used by children shall have a mattress cover, clean sheets, pillows and pillowcases and blankets as appropriate.

3. Sleeping rooms above or below the floor of exit travel shall not be used for sleeping purposes for children who have physical handicaps which limit mobility. Children less than eight years old shall sleep on the same floor as the group home or center parents or personnel. Children under 12 years of age shall not be permitted to sleep in a detached structure unless a responsible person sleeps in the same structure.

4. Bedrooms, separate from those used by children, shall be provided for the group home or center parents or personnel who sleep at the facility.

5. Facilities shall provide living areas of no less than 35 square feet per occupant of usable indoor space exclusive of halls, baths and sleeping areas which shall be available for such things as dining, recreation, reading, visiting. Interior walls and ceilings shall be constructed of solid material and shall be in good repair.

6. There shall be a ratio of at least one toilet, lavatory and bathtub or shower for every six foster children living in the home or center. Toilet, lavatory and bath or shower facilities shall be in the same building(s) as the children's sleeping quarters and shall be accessible from the inside of the building.

7. There shall be a towel rack for each child in residence in bathroom or bedrooms.

C. The group home or center's kitchen shall be equipped with the following:

1. Adequate space for receiving, storage and refrigeration of food.

2. Adequate space for eating in kitchen or adjacent room for all children to eat at the same time.

D. The facility must have laundry facilities with adequate storage for linens.

E. The group home or center, if located in the same building as or immediately adjacent to other residential facilities such as another group home or center, an adult treatment center or a nursing home, shall be so arranged that the care and activities of the children residing in the group home can be completely separate and independent from the other residential facility. No group home or center shall be used for purposes of a rooming or boarding house. A specialized group facility may not be operated adjacent to or on the premises of a business of a nature which might be hazardous to the health, safety, morals or welfare of children and the operation of the specialized group facility. The group home or center shall house only unrelated children of the ages mentioned on the license or certificate and of the type described in the statement of purpose. The facility shall not also be used by unrelated adults.

F. Mobile homes shall not be used for group homes or centers.

G. When a swimming pool is provided, it shall meet the requirements of the Colorado Department of Public Health and Environment or its local unit. Safety precautions shall include protective fencing, a nonskid surface of at least four feet adjoining poolsides, and winter coverage which shall exclude plastic or inflatable-type domes. A certified lifeguard shall be in attendance at all times when the pool is in use.

7.709.25 Care of Children [Rev. eff. 11/1/15]

A. Group home or group center parents or personnel shall provide supervision and care appropriate to each child's age, level of development, ability to accept independence and responsibility, and according to the group home or group center's policies, procedures and the child's case plan.

1. The group home or group center parents or personnel shall know the intended whereabouts of each child in care at all times.

2. Children less than 14 years old shall not be left without adult supervision in the home or center. Children over 14 years old may be allowed to stay alone occasionally for short periods of time in the home or center pursuant to a case plan and the facility policy.

3. Children who are less than 16 years old who are sleeping away from the group home or center, such as during a camping trip or a slumber party, must have adult supervision.

4. When all the children are away from the group home or center, the adult parent or personnel on duty may be away from the home or center for short periods of time.

B. The following staff pattern shall be maintained:

1. If the primary caregiver is married, one spouse may be working full time outside the home or center. The spouse or one child care personnel shall assist the primary caregiver during times when the number and/or needs of the children require additional supervision as determined by tie group facility and the supervising agency; or,

2. If the primary caregiver is single, she/he must be at the home or center full time. There shall be one child care personnel assisting the primary caregiver during times when the number and/or needs of children require additional supervision as determined by the group home and the supervising agency; and,

3. A relief staff member who is knowledgeable about the policies and practices of the home or center shall be available to provide child care when the primary caretaker is gone from the home and as determined by the group home or center and supervising agency. An adult shall be available in the event of an emergency; or,

4. If the group center has rotating staff, there shall be at least one child care personnel on duty during each shift. The primary caregiver shall work together with the other child care personnel to provide modeling and supervision for at least 16 hours a week during the hours the children are at the facility.

5. If the group home or center and supervising agency determine that additional personnel are necessary, a mutually agreed upon written plan for staffing the group home shall be followed.

C. Health Care, Hygiene, Meals, Safety

1. There shall be a written agreement with a health care facility or medical personnel who has agreed to provide emergency medical care to children in the group home or center.

2. Necessary medical care shall be obtained pursuant to the policy and procedures of the group home or center.

3. Menus shall be kept for at least a two-week period, and there shall be a documented review periodically by a qualified nutritional consultant.

4. One group home or center parent or personnel shall be responsible for meal planning, and a parent or personnel shall be assigned responsibility for food preparation for each meal. Children may help when appropriate.

5. Only pets permitted by local codes are acceptable at the group facility. Pets shall be housed, cared for and vaccinated according to health department regulations and other local codes. Precautions shall be taken as required to ensure both safety and good hygiene. Children shall not be permitted to mistreat animals. Animals shall not be permitted to eat in kitchen or eat from dishes in which food is prepared, served, stored or from which it is eaten.

6. An evacuation plan shall be posted in a conspicuous place.

D. School and Recreation

1. Regular school attendance is required for each child according to school attendance laws. A suitable, quiet, well-lighted place for study shall be provided together with necessary books, papers, pencils and other equipment which is reasonably required by school-age children.

2. Outdoor and indoor recreational equipment and materials shall be provided in sufficient variety and quantity to offer some choice of activities. Games, toys, equipment and arts and craft materials shall be selected according to age, number of children, and with consideration of the needs of children to engage in both active and quiet play. All equipment and materials shall be of quality to assure safety, and shall be of a type which allows for imaginative play and creativeness.

E. Participation in Community Activities

Participation in community activities shall be supported. Along with the requirements in Section 7.714.7 (12 CCR 2509-8), at least one (1) specialized group facility staff shall be trained how to determine whether to approve a child's or youth's participation in an extracurricular, enrichment, cultural, or social activity is consistent with the reasonable and prudent parent standard based upon the criteria in Section 7.701.200.

7.709.26 Required Records [Eff. 11/1/2008]

There shall be a personnel file maintained for each parent or personnel by the facility or the agency. The file shall include identifying information, references, statement from physician or qualified nurse practitioner, name and telephone number of person to contact in emergency, and verification of education and experience. The personnel file for the primary caregiver shall include a statement from a psychiatrist, a certified psychologist or a Licensed Social Worker II. The personnel records shall be maintained pursuant to the personnel policy and procedures. If personnel records are at the agency office, there shall be maintained at the facility the address, local phone number and name, address, and phone number of persons to call in an emergency.

7.709.27 Special Rules for Emergency Placement and Care of Children [Eff. 11/1/2008]

A. Emergency placement indicates that due to circumstances beyond the agency's control a child needs placement, yet pre-placement admission requirements have not been completed. The acceptance of a child in such an emergency status shall only be done if it is a part of the admission policy and procedures of the facility.

B. During placement at the facility as much evaluation of the child shall be completed as possible and as is necessary for future planning for the child. As much data as possible shall be collected pursuant to the admission record.

C. A specialized group facility which accepts only children by emergency admission shall have on duty one child care personnel for each six children or fraction thereof at the facility during the daytime and swing shift. One child care staff member will be sufficient during sleeping hours.

D. Information gathered at the time of emergency placement and during placement shall become part of the child's file. The file shall also include the date the child was discharged from the facility, to whom the child was released, and a description of the physical condition of the child at the time of discharge.

E. A specialized group facility operating as a shelter care facility or which accepts only children by emergency admission shall make every effort to assure that emergency placements do not exceed sixty days. Exceptional circumstances must be documented in the case file for any placement lasting over 60 days. Reimbursement at the shelter care rate shall not exceed 90 days.

7.710 RULES AND REGULATIONS FOR CHILD PLACEMENT AGENCIES [Rev. eff. 1/1/16]

All child placement agencies shall comply with the "General Rules for Child Care Facilities" and "Rules and Regulations for Child Placement Agencies" and shall comply with the "Rules Regulating Foster Care Homes" for any homes certified by the Child Placement Agency, and the "Specialized Group Facilities" rules for any Specialized Group Facility sponsored by the Child Placement Agency.

7.710.1 GENERAL DEFINITIONS [Rev. eff. 1/1/16]

"Arrange for placement" means to act as an intermediary by assisting a parent or guardian or legal custodian to place or plan to place a child with other than persons related to the child for the purpose of foster care or for the purpose of adoption.

"Average sufficient cash reserve" means the computed monthly average cost over the recent ongoing twelve-(12) month period to determine the amounts spent on operating expenses for the agency including, but not limited to, staff salaries; contract reimbursements; employment, unemployment, and other taxes; insurance and retirement benefits; foster care payments; other provider reimbursement fees; health, therapy, transportation and support services for children in care; foreign country fees, office mortgage or rent payments; transportation costs; communications; or, any other expense needed for the agency to function, including a line of credit. The minimum allowable average sufficient cash reserve that an agency must maintain at all times is at least two months' of the average monthly cost.

"Bonding" means an insurance bond issued through a financial or insurance entity.

"Certification" means the process by which the county department of social/human services or a child placement agency approves the operation of a foster care home and/or a licensed host family home.

"Child placement" means to coordinate, arrange, and approve the process of a child entering an unrelated home or facility to be cared for on a temporary, long-term, or adoptive basis.

"Child Placement Agency (CPA)", defined at Section 26-6-102(2), C.R.S., means any corporation, partnership, association, firm, agency, institution, or person unrelated to the child being placed, who places, facilitates placement for a fee, or who arranges for placement, any child under the age of eighteen (18) years with any family, person, or institution for the purposes of foster care, treatment and/or adoption. The natural or adoptive parents or legal guardian of any child who places that child for care with any facility licensed as a "family care home" or "child care center," as defined by this section, shall not be deemed to be a CPA.

"Conflict of interest" means a situation that has the potential to undermine the impartiality of an individual because of the possibility of a clash between the individual's self interest or other professional-interest.

"Cradle care home" means a facility that is certified by a child placement agency for the care of a child, or children in the case of multiple-birth siblings, who is twelve (12) months of age or younger, in a place of residence for the purpose of providing twenty-four (24) hour family care for six (6) months or less or children pursuant to Article 5 of Title 19, C.R.S., or while a county department prepares an expedited permanency plan for an infant in its custody.

"Current reference" means a reference dated within one (1) year of the time of application for employment with agency.

"Foster care home" (refer to Section 7.000.2 in 1 CCR 2509-1).

"Generally Accepted Accounting Principles" (GAAP) means the standard framework of guidelines for financial accounting.

"Licensed host family home" is defined at Section 7.701.21.

"Licensing" means the process by which the Colorado Department of Human Services approves a facility or agency for the purpose of conducting business as a child care facility or child placement agency.

"Multi-service agency" is an organization that provides additional community services and programs other than foster care and adoption.

"Program director in a multi-services agency" is the person responsible for overseeing the foster care and/or adoption program of the organization.

"Quality improvement program" means a review of the services and outcomes of such services provided to applicants and a procedure for tracking such outcomes to determine if changes need to be made to the system to improve delivery of such services.

"Relative", except as used in the definition of foster care home, means any of the following relationships by blood, marriage, or adoption: parent, grandparent, son, daughter, grandson, granddaughter, brother, sister, stepparent, stepbrother, stepsister, stepson, stepdaughter, uncle, aunt, niece, nephew, or cousin.

"Risk assessment" means a review and assessment by an insurance or financial specialist to determine the liability an agency carries for the services it offers and the work it performs.

"Social and behavioral sciences" includes sociology, psychology, social work, criminal justice, human services, human development, and counseling.

"Unreasonably high" means the fees, wages, or salaries paid to the directors, officers, and employees of the agency are excessively high in relation to the services actually rendered, taking into account the area in which the services are provided and norms for compensation within the community, including factors such as the location, number, and qualifications of staff, workload requirements, budget; and size of the agency or person.

7.710.2 GOVERNING BODY [Rev. eff. 6/1/12]

A. Any agency from out of state assisting with, facilitating for a fee, or placing a child within Colorado for the purpose of adoption must be licensed as a CPA by the Colorado Department of Human Services (the State Department) unless the placement services are coordinated with and provided by a county department of social services or a CPA licensed by the State of Colorado.

B. A CPA may not be operated without a license, as required by law, which license is to be issued by the State Department in conformity with all rules and regulations contained within Section 7.710, et seq.

C. Any entity, other than a CPA licensed in Colorado, may not assist or arrange for the placement of a child with a Colorado family for the ultimate purpose of adoption without first being licensed as a CPA.

D. A child placement agency may only accept applications from and certify families for foster care within the State of Colorado.

E. The governing body shall be the corporation, partnership, association, firm, agency, institution or person in whom the ultimate authority and legal responsibility is vested for the conduct of the CPA.

F. The governing body shall be identified by its legal name. Each not-for profit child placement agency shall have a board of directors. If the board has community members, such community members shall neither be employed by or contracted to the CPA, nor related to any individual employed by or contracted to the CPA. Persons whose children are currently in placement (either voluntarily or involuntarily) through the CPA may serve on the board, but may not vote on any measure or issue related to the care of their child during the time such children are in placement. Minutes from all board meetings shall be maintained for a period of at least five (5) years and must be available to the State Department upon request.

G. The governing body of the CPA shall:

1. Maintain the written purpose and policies for the general operation and management of the agency. When such purpose and policies are reviewed and revised, the State Department shall be advised of such changes. The purpose and policies as a minimum shall include:

   a. Statement of purpose of the CPA as to what type of placement of children in which the agency intends to engage, the geographic area the agency expects to serve, the ages of children to be placed, and any other specific factors regarding the children to be placed or the homes in which the children shall be placed.

   b. Personnel policy including, but not limited to, job description; qualifications for position; required documentation for position; requirement for both a criminal history fingerprint background check and a child abuse/neglect check through the State Department's designated database (per Section 7.701.33);

   c. Foster care policy including, but not limited to, types of foster care homes to be certified; geographical area of proposed foster homes; recruitment, assessment, training, certification, supervision and monitoring of certified foster homes.

   d. Adoption policy which includes types of adoption in which the agency will participate and policy and procedure for each adoption program.

   e. Fee policy.

2. Be responsible for the protection of the legal rights of children served by the CPA.

3. Be responsible for approval of budget, obtaining funds and dispersal of funds.

4. Appoint an executive director who meets requirements of Section 7.710.22 and be assured that staff members responsible for placement of children and/or certification of foster homes meet the requirements as stated in Section 7.710.22.

5. The Board or Chief Operating Officer, in the case of a multi-service agency, in which the program director is the person responsible for overseeing the foster care and/or adoption program shall conduct an evaluation, at least annually, to determine if the executive director is fulfilling all responsibilities as required in Section 7.710.25.

6. Inform the department, in writing, of:

   a. A change in the executive director of the CPA; AND,

   b. Each agency office or change of agency office in which child placement is carried out at that location; and,

   c. The hours of operation that each CPA office is open each week and available for inspection of CPA records.

7. Any legal action brought against the CPA which affects any child or children in care, personnel or conduct of the CPA.

8. Maintain professional liability insurance in amounts reasonable related to its exposure to risk. The agency must provide a current risk assessment to the State Department if requested.

9. Maintain and monitor a quality improvement program appropriate to the size and circumstances of the agency through which it makes systemic efforts to improve services if needed.

10. Ensure that the fees, wages, or salaries paid to the directors, employees, and officers of the agency not be unreasonably high in relation to the services actually rendered.

11. Ensure that the agency's Chief Executive Officer, Chief Financial Officer, Executive Director, and other officers or employees with direct responsibility for financial transactions or financial responsibility be bonded.

12. Ensure that the agency maintains an average sufficient cash reserve or assets to meet its operating expenses, less foster parent payments, for two (2) months, taking into account the agency's projected volume of cases and its size, scope, and financial commitments.

H. The governing body shall be responsible for completing the licensing renewal requirements by:

1. Completing and submitting the license renewal application at least ninety (90) calendar days prior to the annual expiration date of the child placement agency license; and,

2. Completing, signing and submitting the required verification of compliance form; and,

3. Paying the prescribed fee pursuant to Section 7.701.4; and,

4. Cooperating with on-site monitoring visit(s) to assess the agency's compliance with the rues for child placement agencies.

7.710.21 Financial Operation [Rev. eff. 6/1/12]

A. Each CPA shall develop an annual budget reflecting anticipated income by source and expenses by purpose, plus an accompanying balance sheet, which demonstrates that the CPA has assured resources to carry out its defined purpose. The budget shall be approved by the Board of Directors and recorded in the minutes of the Board of Directors. The first year's budget shall be submitted with the original license application.

B. The purpose of these requirements is to provide assurance the CPA has adequate accounting and budgeting information available to allow management to maintain a financially viable enterprise and to demonstrate financial accountability to the County and State Departments of Human Services for the use of public funds.

C. Each CPA must have a double entry accounting system and all financial transactions must be posted to this system. Financial statements, prepared from information provided by this system, shall be presented in conformity with U.S. Generally Accepted Accounting Principles (GAAP). Books and records of the CPA shall be subject, at any time the CPA office is open, to inspection, audit or copying by appropriate Federal, State or county personnel, or such independent auditors or accountants as may be designated by these personnel.

D. Annual Audits

Each CPA whose total annual foster care or adoption expenditures are $100,000 or more shall provide for an annual audit by an independent Certified Public Accountant in accordance with appropriate generally accepted auditing standards. CPAs with less than $100,000 total annual expenditure may submit an audit as described above or may submit compiled or reviewed financial statements, prepared in accordance with generally accepted accounting principles. All Hague accredited international adoption agencies shall submit audits as required for Hague accreditation.

1. Every CPA shall submit supplementary information as prescribed by the state on the required supplementary information form and the administrative expenses for foster care as defined by the State Department.

2. The supplementary information submitted shall contain an affidavit signed by the CPA's Executive Director and an officer of its board attesting to the authenticity of the information. Submission of falsified information shall be grounds for suspension of the CPA license.

3. The audit and supplementary information shall be submitted to the State Department within six (6) months of the CPA's fiscal year end.

4. CPAs that are a subsidiary of a parent organization must submit separate audited financial statements for the subsidiary that detail each of the CPA's facilities or programs that provide services for the State or county department.

5. If a CPA does not submit its annual audit or refuses to disclose financial information regarding the operation of the program in a timely manner, the State Department may send notice to withhold payment until the audit and/or requested information is submitted.

6. Upon receipt of adequate written notice that a county department or the State Department plans to recover or withhold unallowable or misused funds from a CPA, a CPA may file a written request for review of the decision with the State Department.

   a. The written request for review must be submitted within thirty (30) calendar days of the receipt of the notice to recover or withhold the misused funds.

   b. The State Department shall convene a committee to review the written request from the CPA. The committee shall consist of three members representing:

      1) The State Department's Child Care Division; and,

      2) The State Department's Child Welfare Division; and,

      3) An independent representative of an auditor from another State Department or a certified independent accountant referred from the Colorado Society of Certified Public Accountants.

   c. The State Department reserves the right to receive legal consultation regarding the written request for review.

   d. The committee shall review all relevant information and make a decision within sixty (60) calendar days of receipt of the request.

e. The committee shall send its findings to the Executive Director of the State Department or his/her designee, who shall make the final agency decision for the State Department.

E. Allowable Expenditures

1. A Child Placement Agency expenditure shall be considered allowable if it meets all of the following criteria:

a. Reasonable

The expenditure is reasonable in nature or amount and does not exceed the cost that would be incurred by a prudent person under the circumstances prevailing at the time the decision was made to incur the cost.

b. Ordinary and Necessary

The expenditure is of a type generally recognized as ordinary and necessary for the operation of a CPA or the performance of a contract for CPA services.

c. Prudent

The individuals concerned acted with prudence in the particular circumstances, considering their responsibilities to the CPA, its employees, clients, foster families, foster children, the public at large, the State and the CPA's responsibilities pursuant to the contract for services, and must not be contrary to Federal or State law.

d. Documented

A CPA has the responsibility to ensure that proper documentation procedures are followed for the funds that they control, and to ensure that only authorized expenditures are made. Lack of appropriate documentation will be considered cause for non-payment or non-reimbursement of expenditures. Expenditures must be adequately documented in writing. Documentation requirements shall include all of the following information:

1) Descriptive verification that the expenditure was for a business purpose directly related to the foster care or adoption program.

2) Date of event for which the funds were used.

3) Names of persons attending when an expenditure has the “appearance of personal benefit” .

4) Location of event or place where funds were spent.

5) When documentation includes purchases for multiple items and only some of the items relate to an appropriate expenditure for the CPA, a detailed itemization and reconciliation of the expenditures shall be evident on the face of the document.

e. Made in Accordance with GAAP

An expenditure must be recorded in accordance with Generally Accepted Accounting Principles (GAAP).

2. Generally Allowable Expenditures

The following list of expenditures shall be a general list of expenditures that would be permissible for CPAs to incur in order to further the goals and objectives of their agencies. This list includes, but is not limited to, the categories described below, and shall be used as a reference for guiding the expenditure of CPA funds.

When a specific expenditure is not listed, yet management deems it to be in the best interests of the CPA to make the expenditure of the funds, then the criteria above for an allowable expenditure shall be followed. The CPA shall document the purpose of the expenditure, as listed at 7.710.21, E, 1, d, so that a “reasonable person” test can be made in the event the expenditure is audited. Each CPA shall allocate expenditures in accordance with its internal policies.

a. Salaries and wages, and related benefits, employment taxes, unemployment taxes, worker's compensation taxes, retirement benefits, and insurance benefits.

b. Retention and recruitment of staff, contractors, foster care parents, and volunteers, including advertising, background checks and other evaluations, recruiting, relocation, recognition, and food bank administrative expenses.

c. Foster care, including provider reimbursement, respite for foster parents, child enrichment, clothing, health services, therapy, transportation, and other supportive services.

d. Professional fees, including audit and accounting fees, consulting, legal fees, and other professional fees. These fees must be consistent with what the market would pay if paid to a related party.

e. Contracted services, including contract labor, human resource services, payroll services, and temporary employment agencies.

f. Occupancy expenditures, including office rent comparable to given market rates, meeting room rental, electricity and gas, water and sewer, janitorial service, property repair and maintenance, storage unit rent, and waste removal. If the CPA owns the building, then reasonable depreciation shall be allowed based on the estimated useful life of the building.

g. Depreciation and amortization, based on estimated useful life of the asset, and prorated if the CPA only uses a portion of that asset.

h. Child care during client meetings, support groups, or training functions.

i. Training for staff, foster parents, and volunteers, including honorariums and conference registration fees.

j. Travel and transportation provided that there is some contemporaneous record to support the expense, including airfare, fuel, lodging, meals, mileage, parking, per diem, travel incidentals, vehicle rental, and vehicle repair and maintenance.

k. Telephone, including cellular and paging, data communication services, and telephone services.

l. Postage and shipping.

m. Office services, including coffee, tea, and water.

n. Printing and supply expenditures, including computer and office supplies, printing, and program supplies.

o. Dues, memberships, licenses, and subscriptions, including accreditation fees, dues and memberships, licenses and fees, and subscriptions and publications.

p. Insurance, including automobile, directors and officers, volunteer, general and professional liability commercial packages, and umbrella.

q. Marketing and promotion, including advertising, booths and fairs, graphics and editorial, and printed material/mailing house.

F. Unallowable Expenditures

A CPA expenditure shall be unallowable if it does not meet the criteria and documentation requirements as specified under the definition of an allowable expenditure as referenced in Section 7.710.21, E, or is a direct violation of federal law.

G. Remedies

Remedy for unallowable expenditures may include any or all of the following solutions:

1. Repayment to the State or Counties of identified unallowable expenditures.

2. Reclassification of the accounting entry to record the expenditure correctly, if the transaction can be appropriately reallocated to another cost center of the CPA, or affiliated agency, parent company, etc.

3. “Adverse licensing action” which could result in the denial, suspension, or revocation of a license issued, pursuant to the Child Care Licensing Act or the demotion of such a license to a probationary license.

4. Any other appropriate remedy based upon the facts and circumstances of the unallowable expenditure.

H. Intentional Mis-Use of Funds

Intentional mis-use of funds implies that the individual(s) making the expenditure decision had deliberate, willful, and intentional disregard for the fiduciary responsibility for how public funds are to be used for purposes of placing children in foster care or adoptive homes, or arranging for the placement of children in foster care or adoptive homes, considering their responsibilities to the CPA, its employees, clients, foster families, foster children, the public at large, the State Department’s and the CPA'S responsibilities pursuant to the contact for services.

These rules do not preclude the State or county department(s) from pursuing other remedies available at law; for example:

1. Referral for prosecution; or,

2. Referral to the Internal Revenue Service for issues that violate Internal Revenue codes; or,

3. Repayment to the State and/or counties of identified unallowable expenditures; or,

4. "Adverse licensing action" which could result in the denial, suspension, or revocation of a license issued, pursuant to the Child Care Licensing Act, or the demotion of such a license to a probationary license.

7.710.22 Personnel Requirements [Rev. eff. 6/1/12]

A. Each CPA shall have staff members in sufficient number to meet the needs of individuals served. Such staff members shall meet the following requirements:

1. The Executive Director and placement supervisor must:

a. Reside in Colorado.

b. Submit proof of qualifications and certified transcripts from a regionally accredited college or university to the State Department within thirty (30) calendar days of accepting the position.

2. The Executive Director or in a multi-services agency, the program director, shall possess a knowledge of the type of child welfare services in which the CPA engages and shall be able to demonstrate administrative skill and leadership qualities. The Executive Director must have:

a. Graduated with a Bachelor's degree from a regionally accredited college or university with a minimum of thirty (30) semester credits or equivalent quarter credits in the social or behavioral sciences, and,

b. At least five (5) years' full time or equivalent part time work experience in an administrative capacity, at least two (2) of which included supervision of professional staff and budget or fiscal management; or,

c. Graduated with a Master's degree or greater from a regionally accredited college or university with a minimum of thirty (30) semester credits or equivalent quarter credits in the social or behavioral sciences, and have two (2) years full time or equivalent part time work experience in an administrative capacity, all of which must have included supervision of professional staff and budget or fiscal management; and,

d. A minimum of nine (9) semester hours or equivalent quarter hours in business or finance classes from a regionally accredited college or university may substitute for budget or fiscal management experience.

3. Administrative capacity includes, but is not limited to, policy and procedure development and implementation, strategic planning, budget responsibility, fiscal management, quality assurance, networking, human resources management, program development and oversight, and business management.

4. The State Department must receive at least three (3) current written statements or telephone references from individuals unrelated to the applicant, at least one (1) of whom has been the employer or supervisor of the applicant, which describes the executive director's character, reliability, knowledge of child welfare services and ability to perform the tasks of the Executive Director as outlined in the duties of the Executive Director at Section 7.710.25, A. If the Executive Director or in a multi-service agency, the program director, is also to have responsibility for placement supervision, she/he shall also meet the requirements for placement supervisor as set forth in Section 7.710.22, A, 6.

5. References checked through a telephone call must include the:

    a. Name and position of individual called; and,

    b. Name and position of individual spoken with; and,

    c. Agency; and,

    d. Telephone number; and,

    e. Time and date the call(s) was made; and,

    f. Relationship of individual providing reference for prospective employee (all references must be from individuals unrelated to the applicant); and,

    g. Whether this was a personal or professional reference; and,

    h. Summary of conversation that describes the character, reliability, knowledge, experience, and ability to perform the tasks of the position as outlined in the job description; and,

    i. Name, position, date and signature of individual checking the reference.

6. Placement supervisors shall have a Master of Social Work degree or a Master's degree in the social or behavioral sciences.

    a. If the placement supervisor has a Master of Social Work degree, the placement supervisor must have a minimum of two (2) years (3640 hours) full-time or equivalent part-time experience in the type of child welfare services in which the CPA engages, some of which must have included child placement.

    b. If the placement supervisor is qualified by a Master’s degree in social or behavioral science, the placement supervisor must have a minimum of two (2) years (3640 hours) full-time or equivalent part-time experience in child placement in the type of child welfare services in which the CPA engages. The two (2) years experience in child placement shall have been supervised by a person holding a Master of Social Work degree, a licensed professional counselor, a licensed marriage and family therapist, a licensed social worker, or licensed psychologist.

    c. The State Department must receive at least three (3) current written statements from individuals unrelated to the applicant, one (1) of whom has been the employer or supervisor of the applicant, which describes the character, reliability, knowledge of child welfare services and the ability to perform the tasks of the placement supervisor as outlined in the duties for that position at Section 7.710.25, B.

7. If additional placement workers are necessary to fulfill the placement responsibilities of the agency, such workers shall be supervised by a qualified placement supervisor and shall hold a Bachelor degree in the social or behavioral sciences. If an individual has a Bachelor's degree in a non-related field, he/she shall have at least two (2) years experience supervised by an individual with a Master of Social Work or other Master's degree in the social or behavioral sciences.

B. There shall be a sufficient number of placement supervisors and placement workers to meet the needs of the individuals being served in a timely manner. Each placement supervisor shall not supervise more than nine (9) FTE.

C. There shall be sufficient support staff to comply with record keeping, bookkeeping and reporting requirements as necessary.

D. Foster care paraprofessionals, interns or trainees who do not meet placement worker qualifications may assist qualified placement workers, but may not complete family or child assessments or conduct home supervision. Qualifications shall be established by the CPA.

7.710.23 Personnel Policy [Rev. eff. 5/1/10]

A. A written statement of personnel policy shall be provided to each employee or qualified applicant. This statement shall, as a minimum, contain the following information: a job description which outlines the duties, responsibilities, qualifications; policy on outside agency employment; and educational requirements for the position, as well as an organizational chart for the agency.

B. The Board of Directors must approve a conflict of interest policy regarding outside employment.

C. If an individual is employed or contracted, as a placement supervisor at more than one (1) child placement agency, the total number of individuals supervised by the placement supervisor at all agencies may not exceed nine (9) FTE.

7.710.24 Personnel File [Rev. eff. 6/1/12]

A. A personnel file shall be maintained or each employee and contract worker and shall be available to authorized representatives of the State Department.

B. Each file shall include:

1. Original certified transcript from a regionally accredited college or university if a degree is required by the position.

2. Employment application showing qualifications and experience.

3. A minimum of three (3) current written signed statements obtained from previous employers and personal references at the time of hire to show that the person has the qualifications required in Section 7.710.22.

4. Evaluations of job performance.

5. Results of the review of records and reports of child abuse or neglect as listed at Section 7.701.32 and criminal record check as listed at Section 7.701.33.

7.710.25 Duties of the Executive Director, Placement Supervisor, Placement Worker, Paraprofessionals/Trainees [Rev. eff. 6/1/12]

A. The responsibilities of the Executive Director are:

1. Human resources management; and,

2. Policy and procedures development and implementation; and,

3. Accountability for being in compliance with regulations; and,

4, Fiduciary requirements; and,

5. Quality assurance; and,

6. Regulatory compliance and accountability; and,

7. Overall professionalism of the agency; and,

8. Responsibility for the daily operation of the agency; and,

9. In a multi-service agency, the program director may have responsibility for administering the adoption and/or foster care unit and may not be responsible for the budget and accounting duties.

B. The placement supervisor shall be responsible to oversee the:

1. Study of potential foster or adoptive families using the Structured Analysis Family Evaluation (SAFE) instrument(s) to determine the character and suitability of the applicant(s), appropriateness of the home, and child care practices; and,

2. Certification of foster care homes and placement of children in foster care homes; and/or,

3. Study of the child for adoption; and,

4. Placement of children in homes for adoption.

5. Reviewing and signing the SAFE assessment, post placement reports, and the issue certificate form; placement supervisors who complete a SAFE assessment are not required to obtain an additional review or signature of another placement supervisor; and,

6. Oversight of appropriate medical services for the children placed in the care of any facility certified or sponsored by the CPA; and,

7. Supervision of placement workers at least monthly to review, at a minimum, all SAFE assessments in process, certifications in renewal status, and current placement activity; such supervision shall be documented in writing by the placement supervisor.

C. The placement worker, under the direct supervision of the placement supervisor, is responsible for the monitoring and protection of children, and may:

1. Provide case management for individual children; and,

2. Coordinate services for child(ren) and their family; and,

3. Provide monitoring and support to foster homes; and,

4. Conduct SAFE assessments to determine the ability of foster homes to meet children's needs.

D. The placement worker in an adoption agency may function as an adoption caseworker or birth parent counselor as listed in 7.710.52.

E. Foster care paraprofessionals, interns, or trainees may assess the physical environment for foster homes for compliance with regulations; act as a liaison with courts, schools, foster parents and all peripheral parties under the direct supervision of a placement supervisor or placement worker.

7.710.3 CERTIFICATION OF FOSTER CARE HOMES

7.710.31 Legal Base [Rev. eff. 1/1/16]

A. Licensed Child Placement Agencies are authorized Section 26-6-102, Colorado Revised Statutes, to certify foster care homes.

B. A foster care home certified by a CPA may not accept placements from any source other than the certifying CPA as to each such child, unless the certifying CPA gives written consent and approval for the placement.

C. A child placement agency shall complete a background check for foster care homes and kinship foster care homes pursuant to Sections 26-6-106.3(5), (6), and 19-3-406, C.R.S.; and the results shall be documented in the resource section of the state automated case management system. No children and/or youth may be placed in the foster care home or kinship foster care home until the checks have been completed. Failure to comply shall result in a corrective action process, and may result in sanctions described in Section 7.701.12. In addition, county departments of human or social services, as part of their contracting responsibilities, may take action to recoup foster care payments from the agency if a background check was not completed pursuant to statute.

7.710.32 Minimum Regulations [Rev. eff. 5/1/10]

A. Operation

1. The regulations for operation of a foster care home shall be met before a certificate can be issued.

2. The CPA shall audit the foster care home files on an annual basis to verify that all required information is present in the file. The CPA shall attest in writing that the required information is present.

3. The CPA shall notify the Colorado Department of Human Services in writing within three (3) business days of the closure of a foster home because of receipt, either verbally or in writing, of a confirmed report of child abuse or neglect.

4. The CPA shall notify the State Department in writing within three (3) business days when a determination is made by the CPA to continue to certify a foster care home that the CPA has received notice, either verbally or in writing, of a confirmed report for medium to severe abuse or neglect. The written notice shall include the justification for continuing to certify the foster care home.

B. Certification

The law states that foster care certificates issued by CPAs are considered licenses; the regulations which are established by the State Department for foster care homes are therefore applicable to any such facility being certified by a licensed CPA. Copies of these rules shall be made available to each applicant for certification and to each foster care home.

C. Conflict of Interest

1. Staff members or members of the governing board or relatives of staff members or relatives of any officer, executive or member of the governing board of a CPA shall not be certified by the CPA to operate a foster care home, except for a person who is employed for the sole purpose of providing foster care and who serves in no other capacity for the agency.

2. No owner, officer, executive, member of the governing board, or employee of a CPA or any relative of said owner, officer, executive, member or employee shall hold a beneficial interest in any property operated or intended to be operated as a foster care home when the property is certified by the CPA as a foster care home.

D. A CPA:

1. Must demonstrate to the State Department that it provides child placement services ethically and in accordance with Colorado state regulations and statutes, interstate compact requirements, intercountry requirements and Hague accreditation, as applicable, to ensure that foster and adoptive placements take place in the best interests of children.

2. Shall not knowingly and willfully:

a. Disseminate or cause directly or indirectly to be disseminated, statements regarding services which are untrue, deceptive, or misleading; or,

b. Make any statement or prepare or use any document that is known to be false; or,

c. Conceal or misrepresent any material fact in connection with the provision of services to birth parents, foster or adoptive parents, foster or adoptive parent applicants, or children.

7.710.33 Application and Inspection for Certification of Foster Care Homes [Rev. eff. 1/1/16]

A. Any application accepted by the CPA from an individual(s) or couple who wishes to be certified to operate a foster care home shall be on the Department approved form and shall include:

1. The names and addresses of child placement agencies and county departments of social services that had previously certified the applicant. Information as to whether the applicant has been licensed or certified for child care in the past or is licensed or certified for child care at the time of the application, what agency issued the certificate or license, and the type of child care the license or certificate authorizes.

2. Information about an applicant or individual living in the proposed foster care home who has been convicted of a felony or charged or convicted of child abuse or an unlawful sexual offense.

3. Information about whether the applicant is currently licensed by the State Department to provide day care.

4. Include a statement on the application for certification as a foster care home that states:

   "Any applicant who knowingly or willfully makes a false statement of any material fact or thing in this application is guilty of perjury in the second (2nd) degree as defined in Section 18-8-503, C.R.S., and, upon conviction thereof, shall be punished accordingly."

B. No application shall be accepted from an individual who is currently certified by another county or CPA to operate a foster care home until that individual has terminated the certification by the other county or CPA.

C. No board member, director or staff member of a CPA shall contact or recruit foster homes currently certified by another county department or CPA.

D. A CPA must take an application from an applicant(s) before the CPA has authority to complete the family assessment, background checks, and training.

E. An applicant may apply to become a dual care provider to operate a family child care home as well as a foster care home. The foster home will be certified by the CPA and the family child care home will be licensed by the Colorado Department of Human Services. Both sets of standards shall be met. The CPA will monitor the foster care standards and the State Department will monitor the family child care home standards. The CPA shall counsel the family if it believes such a situation is not in the best interest of any foster child who may be placed in the home. The CPA must approve the home to be licensed as a family child care home when the home is certified for foster care.

F. A home that is licensed as a family child care home may only be certified for foster care for one child or for a group of siblings. A foster care home dually licensed as a family child care home shall not be certified as a host family home providing shelter to homeless youth.

G. A CPA that has a foster/adoptive home that is certified for foster care and also licensed as a family child care home must notify the Division of Child Care when any of the following situations occur in the foster/adoptive home:

   1. A complaint is received; or,

   2. A child abuse investigation occurs; or,

   3. A Stage II investigation occurs; or,

   4. A foster/adoptive child is placed in the home; or,

   5. A foster/adoptive child(ren) is removed from the home because of abuse allegations; or,

   6. The foster home certificate is changed to probationary; or,

   7. The foster home certificate is revoked or closed.

H. A CPA that has a foster/adoptive home that is certified for foster care and also licensed as a family child care home must submit the following reports to the Division of Child Care:

   1. All complaint investigation reports; and,

2. All child abuse investigation reports; and,

3. All Stage II investigation reports.

I. Reference checks for the applicant and all adults residing in the home:

A CPA shall conduct a reference check of each applicant and all adults residing in the home by contacting all of the previous certifying authorities listed on the application or for whom an application was submitted before issuing the certification for that foster care home. The CPA shall sign an affidavit that, after reviewing all previous certifying information, certification is appropriate.

J. Initial Training for Foster Care Homes

1. After the foster care application is received, each applicant listed on the application must complete a minimum of twenty-seven (27) hours of initial training consisting of at least twelve (12) hours of core training prior to the certificate being issued and completion of the remaining training within three (3) months after the placement of a child. The training shall be provided through the statewide core curriculum training, by the CPA, or by a county department. The core training shall include the following ten primary topic areas:

   a. General overview of foster care; and,

   b. Administrative and legal issues; and,

   c. Why children get placed in out-of-home care; and,

   d. Parenting and family dynamics; and,

   e. Key concepts of child growth and development; and,

   f. Importance of the team approach; and,

   g. Individual differences such as ethnicity and culture; and,

   h. Discipline; and,

   i. Effects of fostering on the foster family; and,

   j. Working with the biological family.

2. For homes dually certified as a family foster care home under this Section and Section 7.708, and a host family home under Section 7.721, an additional three (3) hours of training specifically related to the subject of providing shelter to the homeless youth populations is required.

K. After the application to become a cradle care provider is received, each applicant listed on the application must complete a minimum of twenty (20) hours of initial training prior to the certificate being issued. The training shall include the following primary topic areas:

1. Attachment/bonding issues; and,

2. Loss and grief issues, as applicable for all parties to the adoption; and,

3. Adoption as a life long issue as it pertains to all parties to the adoption; and,

4. Key concepts of child growth and development; and,

5. Limit setting and safety; and,

6. Caring for a child of a different cultural or racial background, if applicable; and,

7. Understanding adoption laws and procedures, including termination of parental rights and the expedited relinquishment process pursuant to Section 19-5-103.5, C.R.S., if applicable; and,

8. Possible current and/or future use of community resources, including help with parenting techniques; and,

9. Infant care to include, but not be limited to, basic care and feeding of the infant and Shaken Baby Syndrome; and,

10. Fetal alcohol/substance abuse syndrome, if applicable; and,

11. General overview of the adoption process; and,

12. Why children get placed for adoption; and,

13. The importance of the team approach; and,

14. Effects of fostering on the cradle care family; and,

15. Potential communication with biological family and/or adoptive family.

The cradle care provider must also hold a current infant/toddler CPR and first aid card and complete four (4) hours of on-going training a year on topics related to adoption.

L. After the application is received and prior to the certificate being issued, a family assessment using the Structured Analysis Family Evaluation (SAFE) instrument(s) to determine the character and suitability of the applicant(s), appropriateness of the home, and child care practices must be completed.

1. An assessment of character and suitability must include at least a review of the State Department's automated system as to applicants and persons who reside in the home of the applicants with written consent of the individuals. Statements from references and physician must be obtained. A review of all existing child placement agency and county department case records including the automated system must be completed. An investigation of any concerns raised from the application and/or the aforementioned sources of information and a personal assessment of the applicant must be conducted.

2. The agency will require any applicant or any person eighteen (18) years of age or older who resides with the applicant in the foster care home to submit a complete set of fingerprints taken by a qualified law enforcement agency. The fingerprints and appropriate processing fee must be submitted to the Colorado Bureau of Investigation (CBI) to obtain any record of arrest or conviction which is held by the CBI.

   a. The agency must send an applicant card (FD 258) to the individual required to provide fingerprints. The fingerprints must be taken by a police or sheriff's department. The individual or agency must send the card to the CBI with a certified check or money order for the amount of the current processing fee. The CBI report must be sent to the child placement agency certifying the foster home.

b. A certificate cannot be issued to a foster care home until the fingerprints and current processing fee are submitted to the CBI and a clearance or hit/match is received from the CBI. If a hit/match with a criminal history arrest is received, the formal court disposition must be received and reviewed before a decision is made to issue a certificate.

3. A family assessment using the Structured Analysis Family Evaluation (SAFE) instrument(s), including Questionnaires One (1) and Two (2) and the psychosocial inventory, to determine the character and suitability of the applicant(s), appropriateness of the home, and child care practices must be completed by a staff member and reviewed by a supervisor both which have completed the two (2) day SAFE assessment training. Separate and joint interviews with the applicant(s), all adults residing in the home both related and non-related to the applicant, and all children residing in the home regarding at least significant events in family background, evaluation of applicants' knowledge and capacity to care for children, and ability to maintain long-term relationships and life changes including issues of grief and loss. Interviews with children must be age appropriate. The assessment shall include, but not be limited to, the following:

a. Social history/background (adults and children), including childhood family adaptability; childhood family cohesion; childhood history of deprivation and trauma; childhood history of victimization; history of child abuse or neglect; history of alcohol and drug use; history of crimes, allegations and violence; psychiatric history, occupational history, and marriage or domestic partner history.

b. Personal characteristics of the family, including communication, commitment and responsibility, problem solving, interpersonal relations, health and physical stamina to include information about nutritious meals and snacks, self-esteem, acceptance of differences, coping skills, impulse control, mood, anger management and resolution, judgment, and adaptability.

c. Marital/domestic partner relationship, including conflict resolution, emotional support, attitude toward spouse or partner, communication between couple, balance of power, stability of the marriage or partnership and sexual compatibility.

d. Motivation for a child, including a discussion of the child to be placed, attitudes toward foster care/adoption by applicants, other adults residing in the home, children and others such as extended family and discussion of fertility, if relevant. Assess the physical, mental, and emotional capability of the applicant(s) to parent a child(ren) and the ability to reevaluate and readjust expectations.

e. Children with Special Needs and/or Disabilities

The applicant's interest, preparation, and willingness to care for a child(ren) with disabilities such as emotional, mental and physical, and the ability to meet the special needs of the child(ren). The home study must include an assessment as to how the child(ren)'s special needs will impact the family and extended family.

f. Extended family relationships, including extended family adaptability, extended family cohesion, relationship with own extended family, and relationship with spouse's or partner's family.

g. Physical and social environment, including cleanliness, orderliness and maintenance, safety; furnishings; play area, equipment, and clothing; finances; support system; and, household pets.

h. General parenting Including child development, parenting style, disciplinary methods, child supervision, learning experiences, parental role, and child interactions.

i. Specialized parenting , including expectations, effects of abuse or neglect, effects of sexual abuse, effects of separation and loss, structure, therapeutic and educational resources, birth sibling relationships, child background information, and birth parent issues.

j. For adoption only, issues Including infertility, telling child about adoption, openness in adoption, and adoptive parent status.

4. Other Requirements

a. Discuss the applicant's ability to work with the child welfare system, court, birth parents, and others in the child's life, including willingness to obtain help from professionals involved.

b. Documentation of any previous emotional problems, mental illnesses, substance abuse issues, or marital/relationship problems that may have an impact on the case of a child(ren). Include any factors which would impact the safety and well-being of any child(ren) in the home.

c. The application and medical records must be reviewed; and any issues that are identified be discussed with the applicants. No physical examination shall be required of any person who in good faith relies upon spiritual means or prayer in the free exercise of religion to prevent or cure a disease unless there is a reason to believe such person's physical condition is such that he/she would be unable to care for a child, or such person has a communicable illness.

d. The agency shall not perform a family home assessment on its own staff member, board member, or family member of a staff member or board member.

e. A current photograph of the family shall be requested and maintained in the file.

f. In kinship care, the ability to provide a permanent home through adoption, guardianship or permanent custody, including the ability to meet the individualized needs of the specified child(ren), assessment of the relationship with birth parents and extended family members as they impact capacity of the applicants to care for the child(ren), and The ability to set boundaries with birth parents to maintain safety for the child(ren) in care.

g. Assessment of the applicant's ability to foster or adopt a child of a different ethnic and cultural background, preserving continuity of the child's ethnic and cultural identity in a positive manner. Factors should include, but are not limited to, consideration of the child's family, community, neighborhood, faith or religious beliefs, school activities, friends, and child's and family's primary language. Documentation of the assessment of this requirement shall be in the case file.

5. The agency shall not deny to any person the opportunity to become a foster/adoptive parent on the basis of race, color or national origin of the person or of the child involved.

6. As part of the assessment, the agency must:

   a. Conduct a minimum of one joint interview with a couple, one individual interview with each adult member of the household and an age/developmentally appropriate interview with all children residing in the home. For single applicants, a minimum of two (2) interviews will be required.

   b. Conduct at least one (1) interview in the applicant's home.

   c. Spread out Interviews over a period of not less than seven (7) consecutive days.

   d. Update the assessment annually in the form of an addendum. An addendum shall include at least one (1) home visit and a review of the current medical status. During each subsequent addendum, applicants shall be questioned regarding any child abuse investigations during the previous year.

7. Following the completion of the assessment, a narrative report must be completed that summarizes and evaluates the information obtained and lists the characteristics of child(ren) the home is approved for. Age, sex, race, legal risk, and special needs (such as medical, physical, behavioral, emotional) and any limitations or restrictions on placement of a child(ren).

8. If there are additions of new adults to the household, additions of new children to the household, and/or changes in the age, sex, and special characteristics of child(ren) which will be considered for placement with the foster family, a SAFE update/addendum of the family must be completed and the family assessment revised.

9. An on site home inspection is required to determine its compliance with the Rules Regulating Foster Care Homes and, if the applicant is applying to be dually certified as a foster home and licensed as a family child care home, with the rules regulating Family Child Care Homes. Written documentation of the home inspection shall be in the foster care home file at the child placement agency. Approval of local zoning, health or fire departments must be documented in writing when the situation warrants.

M. An annual on-site, unannounced, home inspection must be made to the foster care home to determine compliance with the Rules Regulating Foster Care Homes and, if the foster care home is dual certified, with the rules regulating Family Child Care Homes. A written report of the supervisory visit must be given to the foster parent and a copy maintained at the child placement agency. A written notice of noncompliance with the regulations will be left with the foster parents or sent to the foster parents within fifteen (15) calendar days of the supervisory visit if there is noncompliance. Compliance must be achieved within the time frames indicated on the written compliance notice.

7.710.34 Issuance/Denial of Certificate [Rev. eff. 1/1/16]

A. After the completion of the family assessment/home study, one of the following certification actions must be taken:

1. A one (1) year time-limited certificate will be issued when it is determined that the applicant is competent, has completed the necessary training, and has met the Rules Regulating Foster Care Homes. The certificate issue date is the date that the assessment/study is completed and the foster home is in compliance with the Rules Regulating Foster Care Homes.

2. A provisional certificate may be issued, upon the written approval of the State Department for a kinship foster care home or child specific placement when requested by a county department of social/human services.

   The reasons for the issuance of a provisional certificate must be displayed on the certificate. The provisional certificate will be issued for up to ninety (90) calendar days from the date it is determined that time will be needed to comply with the appropriate kinship foster care home or child specific regulations. Only one original provisional certificate may be issued to a foster care home at one location address.

3. The original application will be denied. The renewal application will not be acted upon. The applicant will not be certified as a foster home.

B. Upon issuance of the certificate, the child placement agency shall submit data entry information to the department on forms prescribed by the State Department.

C. The application will be withdrawn when the applicant no longer chooses to pursue certification.

D. An applicant shall be denied if the person(s) applying for the certificate has been determined to be insane or mentally incompetent by a court of competent jurisdiction and, should a court enter an order pursuant to Part 3 or Part 4 of Article 14 of Title 15, C.R.S., or Section 27-65-109(4) or 27-65-127, C.R.S., specifically finding that the mental incompetency or insanity is of such degree that the applicant is incapable of operating a family child care home, foster care home, child care center, or child placement agency, the record of such determination and entry of such order being conclusive evidence thereof. "Convicted" means a conviction by a jury or a court and shall also include a deferred judgment and sentence agreement, a deferred prosecution agreement, a deferred adjudication agreement, an adjudication, and a plea of guilty or nolo contendere for E, 1-6, below. This does not apply to a diversion, deferral or plea for a juvenile who participated in diversion (defined in 19-1-103(44), C.R.S.), and does not apply to an adult who successfully completed the child abuse and/or neglect diversion program (defined in 19-3-310, C.R.S.).

E. The application must be denied if the person(s) applying for the certificate has been convicted of:

1. Child abuse, as specified in Section 18-6-401, C.R.S.; or,

2. A crime of violence, as defined in Section 18-1.3-406, C.R.S.; or,

3. A felony offense involving unlawful sexual behavior, as defined in Section 16-22-102(9), C.R.S.; or,

4. A felony, the underlying factual basis of which has been found by the court on the record to include an act of domestic violence, as defined in Section 18-6-800.3, C.R.S.; or,

5. A felony involving physical assault or a drug-related offense within the five (5) years preceding the date of application for a license or certificate; or,

6. Any felony offense in any other state, the elements of which are substantially similar to the elements of any of the offenses described in numbers 1-6.

7. For the purposes of these regulations, convicted means a conviction by a jury or by a court and shall also include a deferred judgment and sentence agreement, a deferred prosecution agreement, a deferred adjudication agreement, an adjudication, and a plea of guilty or nolo contendere.

F. The application may be denied for one (1) or more of the following reasons if the applicant(s), an affiliate of the applicant, or any person living with or employed by the applicant(s) has:

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

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

3. Been determined to be insane or mentally incompetent by a court of competent jurisdiction and incapable of performing duties; or,

4. Used any controlled substance as defined in Section 12-22-303(7), C.R.S., or consumed any alcoholic beverage or been under the influence of a controlled substance or alcoholic beverage during the operating hours of the facility. This shall not apply to foster care homes, unless such use or consumption impairs the foster parent's ability to properly care for children; or,

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

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

7. Furnished or made any misleading or any false statement or report to the Colorado Department of Human Services; or,

8. Refused to submit to the Colorado Department of Human Services any reports or refused to make available to the State Department any records required by it in making investigation of the facility for licensing purposes; or,

9. Failed or refused to submit to an investigation or inspection by the Colorado Department of Human Services or to admit authorized representatives of the State Department at any reasonable time for the purpose of investigation or inspection; or,

10. Failed to provide, maintain, equip, and keep in safe and sanitary condition premises established or used for child care pursuant to standards prescribed by the Colorado Department of Public Health and Environment and the Colorado Department of Human Services or by ordinances of regulations applicable to the location of the foster car home; or,

11. Willfully or deliberately violated any of the provisions of the Child Care Licensing Act; or,

12. Failed to maintain financial resources adequate for the satisfactory care of children served in regard to upkeep of premises and provision for personal care, medical services, clothing, and other essentials in the proper care of children; or,

13. Been charged with the commission of an act of child abuse or an unlawful sexual offense, as specified in Section 18-3-411(1), C.R.S., if:

    a. Such individual has admitted committing the act or offense and the admission is documented or uncontroverted; or,

    b. An Administrative Law Judge finds that such charge is supported by substantial evidence; or,

14. Admitted to an act of child abuse or if substantial evidence is found that the licensee, person employed by the licensee, or person who resides with the licensed in the foster home has committed an act of child abuse, as defined at Section 19-1-103(1), C.R.S.; or,

15. Been the subject of an adverse licensing action.

G. The denial of the original application must be carried out in accordance with the Colorado Revised Statutes, Section 26-6-108.

7.710.35 Renewal or Continuation Notice [Rev. eff. 5/1/10]

A renewal notice must be sent to the foster parents at least ninety (90) calendar days prior to the expiration of the certificate.

A. If the foster parents wish to continue to provide care, the renewal notice must be completed and returned to the child placement agency prior to the expiration of the certificate.

B. If the renewal notice is received by the child placement agency prior to the expiration of the certificate, the renewal notice is timely, and the certificate continues valid until action is taken by the child placement agency.

C. If the renewal notice is received after the expiration of the certificate, the renewal notice is untimely, and the certificate is no longer valid. The untimely renewal notice must be acted upon as an original application.

7.710.36 Recertification Action [Rev. eff. 1/1/16]

A. Within ninety (90) calendar days of the receipt of a timely renewal application for a certificate, the child placement agency must complete the following actions:

1. Evaluate the foster care homes' current and past compliance with the Rules Regulating Foster Care Homes.

2. Conduct an unannounced inspection of the foster care home in accordance with Section 7.710.33, M.

3. Review the following information, for the applicants) and all individuals residing in the home, to determine if continued certification is appropriate:

    a. Any child abuse allegations or investigations in the previous year;

    b. Any arrest or conviction records in the previous year;

c. Any information from the local county department concerning county involvement with the foster family, including information from caseworkers;

d. Current health status.

4. Complete the SAFE family assessment narrative update/renewal template with changes that have occurred with the foster family. Questionnaires One (1) and Two (2), and the psychosocial inventory, must be completed on the first renewal if a full SAFE assessment has not been completed on the foster family.

5. Conduct a search on the CBI sex offender registry and national sex offender public website operated by the United States Department of Justice, and include a copy in the provider record using the following criteria at a minimum:

a. Known names and addresses of each adult residing in the home; and,

b. Address only of the home.

6. If the foster parent or any adult living in the foster home left the state for three (3) consecutive months or longer, a new FBI fingerprint-based criminal history record information check shall be conducted.

B. At the time of the renewal of the certificate, one of the following must be completed:

1. A provisional certificate for a kinship or child specific placement will be changed to a one year time-limited certificate as soon as the foster family has completed the items listed as reasons for the provisional certificate.

2. A new one (1) year time-limited certificate is issued. The certificate issue date will be the date that the foster care home is in compliance with the Rules Regulating Foster Care Homes, as found at Section 7.708.

3. The renewal application for the certificate is denied. The process for denial of a renewal application is the same as the process for denial of an original application.

C. Upon issuance of the one (1) year time-limited certificate, the child placement agency must submit data entry information to the department on forms prescribed by the department.

D. A foster care home certificate is no longer valid whenever one of the following situations exists:

1. A certified foster family moves to a new address.

2. A foster family decides to withdraw from the foster care home program and confirms same in writing.

3. A certificate has been revoked or denied.

7.710.4 PLACEMENT OF CHILDREN IN FOSTER CARE

7.710.41 Acceptance of Children for Placement [Rev. eff. 6/1/12]

A. No agency shall accept a child for placement, except as provided in paragraph B below, from any source other than the child's parent(s) or guardian(s), a court of competent jurisdiction or a county or tribal department of social services and upon a specific written authorization by one of these to place the child, as only these have the right under the law to contract for a child's placement.

B. If a law enforcement officer places a child in case of an emergency, when the parent or guardian cannot be located, in a facility which has been designated as a shelter facility in accordance with the law, and the law enforcement officer is unable to locate the child's parent, guardian or the persons with whom the child was living, the agency shall petition the appropriate court within forty-eight (48) hours for legal custody.

C. If a child placement agency no longer chooses to place children in the foster care home, the child placement agency shall follow one of the following procedures:

1. A provisional certificate may be allowed to expire if the foster family chooses not to submit a renewal application; or,

2. The child placement agency must send a written statement to the foster home explaining that the agency will no longer place children in the home for foster care, that the home must not accept any children for care from any other source; or,

3. The child placement agency must meet with or send a letter to the foster parents requesting them to sign a statement that they are withdrawing from the foster home program.

7.710.42 The Placement Process [Rev. eff. 6/1/12]

A. In addition to an agency's responsibility to inspect and to supervise the ongoing operation of certified foster care homes, agencies shall comply with the following minimum standards applicable to the placement process.

B. When accepting a referral, the agency shall conduct an assessment to determine whether placement of an individual child is appropriate and desirable. The following shall be included in this determination:

1. The reason(s) for placement; and,

2. Information relating to the child's natural parents or family situation including religious, educational, economic and cultural background and other factors which should include, but are not limited to, consideration of the child's family, community, neighborhood, faith or religious beliefs, school activities, friends, and child's and family's primary language; and,

3. Information relating to the child's legal status, medical or health history, his/her physical condition, personality, school placement and adjustment, previous placements outside the home, attitude toward removal from the home, and family relationships, and preferences of the child when age and developmentally appropriate; and,

4. Coordination with other social service agencies or departments which may have information relating to the child; and,

5. Additional information, if any, designed to assist the agency in determining what type of placement, if any, will best meet the needs of such child.

C. The agency must make available the original written family assessment, home study, and background checks of the foster parent(s) to the placing authority upon request. Updates to the family assessment, home study, and background checks must be sent to the placing authority.

D. A child who is to be placed in a foster care home or child care center pursuant to Sections 7.500.21 and 7.500.22 respectively shall only be placed in a home or center that is licensed by the State Department or certified by a licensed placement agency or a county department of social services.

E. The agency shall discuss information deemed necessary regarding a prospective foster child with foster parents as early as possible prior to placement. It is desirable for the child to visit and become familiar with the foster parents and other persons living therein prior to the time of placement.

F. At the time of foster placement, the agency shall complete a record of admission for the foster care home parents as outlined in, Section 7.708.51, C, and be assured that the foster care home parents have a copy of a signed authorization for foster parents to obtain emergency medical care for the foster child, if necessary.

G. No placement shall be continued where it is not in the best interest of the child.

H. If a child is placed in a family child care home, the placement agency shall be assured that the child's admission record and all admission procedures as stated Sections 7.707.5 and 7.707.51, are completed.

7.710.43 Responsibility of Placement Agency While the Child is in Care [Rev. eff. 11/1/15]

A. The placement agency shall work as closely as possible with the child's natural parent(s), guardian(s), individual or agency with legal responsibility for each child with the view to maintaining a child in his own home, placing the child in foster care temporarily or appropriate permanent substitute care.

B. The placement agency shall be assured that care is provided the child in placement in accordance with the applicable regulations, which shall include but not be limited to applicable medical, dental and optical care, and participation in appropriate educational and recreation experiences.

C. The placement agency shall require the foster home to maintain written documentation of all medical, dental, and optical care appointments of foster children, including the need for follow-up, next visit scheduled, and the reason the child was taken to the doctor. The written documentation shall be submitted by the foster home to the agency on at least a monthly basis. The agency is responsible to send the written documentation of the medical appointments to the caseworker for each foster child in care on a at least a monthly basis.

D. The agency shall provide on-going training for foster care parents to help improve their ability to care for children in placement. The training may include orientation and group meetings, publications, institutes, workshops, and consultation with experts.

E. Professional staff of the agency shall visit the home at least monthly to observe the interaction of the foster children with the foster parent(s) and to generally assess the safety of the home.

F. The agency is responsible to notify all placing agencies when a child is removed from care because of concern for the child's health, welfare, and safety and other children remain in care.

G. The agency and/or the foster parent(s) shall attend Administrative Reviews in person or by conference call.

H. The reimbursement rate for child maintenance agreed upon between the CPA and the county department shall be paid to the CPA foster parents for the care of the child.

I. The reasonable and prudent parent standard requirements for any foster parent to approve activities for a child or youth in foster care requires the following action:

The child placement agency shall train foster parents how to determine whether to approve a child's or youth's participation in an extracurricular, enrichment, cultural, or social activity consistent with the reasonable and prudent parent standard based upon the criteria in Section 7.701.200.]

7.710.44 Termination of Placement [Rev. eff. 6/1/12]

A. The agency shall counsel and assist parent(s) or guardian(s), foster parents and foster children in preparing for the termination of placement.

B. When a placement is terminated, the child shall be released only to his parent(s) or guardian(s) or to a court of competent jurisdiction. If a child has been received for care upon court order, the child shall be released only upon direction of the court.

C. Upon termination of placement, the agency shall provide the parents or the agency receiving the child with pertinent health information and other records, such as school reports, which may be useful to persons with responsibility for such child.

7.710.45 Required Records [Rev. eff. 6/1/12]

A. A placement agency shall be responsible for maintaining an individual case record for each child accepted for care. All records are confidential and shall be protected from unauthorized examination.

B. The State Department staff shall have access to such records upon request,

C. Foster care home parents are to receive necessary information regarding the foster child in care pursuant to Section 7.710.42; and such foster parents shall be given detailed instructions regarding the confidential nature of information which they receive.

D. The agency record for each child shall contain as a minimum:

1. Report of the original intake study; and,

2. An agreement signed by the parent or guardian authorizing the agency to place the child in foster care and consenting to necessary medical and surgical care. A court order transferring legal custody to the agency will fulfill this requirement; and,

3. If the child is placed in a foster care home, a copy of the record of admission form as required in Section 7.708.51, C; and,

4. Documentation of the legal custody and responsibility for the child; and,

5. Reports of the child's progress under care; and,

6. School reports including records of scholastic achievement and social adjustment; and,

7. Individual medical records for each child including reports of the admission examination and a complete and continuous record of illness, immunization, communicable diseases and follow-up treatment and examination; and,

8. Reports of psychological tests, psychological or psychiatric examination and follow-up treatment if obtained; and,

9. Record of visits to the child and record of the contacts with child's own family and services to be provided or for which arrangements have been made; and,

10. Copy of the treatment plan for the child.

E. The record for each child placed by the agency in foster care shall be maintained at least three (3) years after foster care has been terminated.

F. Each placement agency shall maintain a separate record for each foster care home certified by the agency. This record shall include: the application; all relevant information obtained at the time of certification and recertification summary reports of subsequent visits to the home; and, a list of the children placed in the home, including names, birth dates, dates of placement and reasons for removal. This record shall be available to the staff of the State Department for inspection.

G. Records relating to foster care homes whose certificates have expired shall be retained for at least three (3) years after the expiration of the last-issued certificate and for a longer period if they contain information which would be relevant to a subsequent request for foster home certification.

7.710.5 PLACEMENT OF CHILDREN FOR ADOPTION

7.710.51 Legal Basis [Rev. eff. 5/1/10]

A. A CPA that places children or arranges for the placement of children for the purpose of adoption shall comply with the provisions of the Child Care Licensing Act, Sections 26-6-101 through 26-6-114, C.R.S., and the Colorado Children's Code, Sections 19-5-101 through 19-5-403, C.R.S.

B. A CPA must be approved in writing by the State Department for the type of adoption in which it engages, either domestic and/or intercountry, prior to engaging in that type of adoption. The agency must have current written policies and qualified staff at all times if engaging in intercountry and/or domestic adoption.

C. A CPA cannot work with a facilitator to place or arrange for the placement of a child if that facilitator is not licensed as an adoption agency in Colorado or the resident state of the birth mother or adoptive parent(s).

D. In the case of intercountry adoptions, a child placement agency is permitted to work with an in-country coordinator who resides in the foreign country and is authorized by the foreign country to provide in-country services.

E. Hosting programs in which children who are eligible or may become eligible for adoption and who reside with Colorado families must comply with all child placement agency rules and regulations. All families participating in such programs must meet all standards and be certified as foster parents during such time the children reside with them.

7.710.52 Adoption Definitions [Rev. eff. 1/1/16]

“Adoption exchange” is an agency whose membership includes county departments and child placement agencies and is an organized means of sharing information among agencies about children for whom an adoptive resource is not immediately available and about potential adoptive families for whom an agency does not have a child waiting. The purpose of an exchange is to facilitate permanence as quickly as possible so that a child does not wait while an agency develops a resource.

"Administrative notice procedure" applies only to expedited relinquishments filed under Section 19-5-103.5, C.R.S., and allows the CPA counseling the birth mother to provide notice to the presumed Birth father of an anticipated expedited relinquishment prior to the filing of the relinquishment petition. The notice to the presumed birth father cannot be made more than sixty (60) days prior to the birth of the child.

"Agency adoption" means an adoptive placement in which the CPA is responsible to counsel the birth parent(s), place the child(ren), supervise the placement, and provide reports to the court as required by law. The CPA is granted custody of the child(ren) with the right to place for adoption either as legal risk placement or through relinquishment or termination of parental rights by court order and places the child(ren) for adoption with adoptive parent(s) who have a CPA approved adoptive family assessment.

An "adoption caseworker" must be qualified as a placement worker and may complete family assessments, place a child with a family, provide post placement supervision and training for adoptive parents, all under the direct supervision of a placement supervisor.

"Birth parent counseling", here-in-after referred to as "counseling", means the required decision making counseling that shall be provided to a birth parent(s) or legal parents prior to a decision regarding whether or not to relinquish a child(ren) as required at 7.710.57.

A "birth parent counselor" must be qualified as a placement worker and may have responsibility for relinquishment/decision making counseling with birth parent(s) dealing with an unplanned or crisis pregnancy or the relinquishment of a child, all under the direct supervision of a placement supervisor.

"Closed adoption" means an adoptive placement when the adoptive parent(s) and the birth parent(s) do not share identifying information or communicate with each other before or after the finalization of the adoption.

"Concurrent adoption" means more than one (1) adoption being processed simultaneously either through the same agency or multiple agencies.

"Convention" means the Convention on protection of children and cooperation in respect of intercountry adoption done at the Hague on May 29, 1993.

"Convention adoption" means the adoption of a child resident in a Convention country by a United States citizen or an adoption of a child resident in the United States by an individual or individuals residing in a Convention country when in connection with the adoption the child has moved or will move between the United States and the Convention country.

"Convention country" means a country that is a party to the Convention and with which the Convention is in force for the United States.

"Country of origin" means the country in which a child is a resident and from which a child is emigrating in connection with his or her adoption.

"Designated adoption" means an adoptive placement in which adoptive parent(s) have been designated by the birth parent(s) prior to either parties involvement with a CPA licensed for adoptions. The CPA is responsible for completing the birth parent(s) counseling and to ensure an adoptive family assessment is completed for the designated parent(s). The CPA is granted temporary custody of the child for the purpose of placement.

"Dissolution" means the termination of the adoptive parent(s)' parental rights after an adoption.

"Disrupted adoption" means the interruption of a placement for adoption during the post-placement period.

“Domestic adoptions” means collectively identified or designated adoptions, interstate adoptions, and intrastate adoptions.

“Expedited Relinquishment” means the legal process which a parent desiring to relinquish his or her child under one (1) year of age may follow to obtain an expedited order terminating his or her parent-child legal relationship without the necessity of a court hearing.

“Facilitator” means a person, partnership, corporation, association, firm, agency or institution, other than an adoption exchange, county department or child placement agency, who offers, gives, charges or receives any money or other consideration or thing of value in connection with locating or identifying for purposes of adoption any child, birth parent, expectant natural parent or prospective adoptive parent.

“Foreign national” means a child who was born outside the United States of America (U.S.A.), at the time of placement lacks U.S.A. citizenship, and is a resident outside the U.S.A.

“Foster care adoption” means a placement in which the child(ren)'s parental rights have not been terminated at the time of the foster care placement. The placement is made as a long-term foster care placement with the intention of adoption if or when the parental rights are terminated.

“ICPC” means the Interstate Compact for the Placement of Children which is an agreement that has been enacted into law by all fifty (50) states in the United States and the District of Columbia, which controls the lawful movement of children from one state to another for the purposes of adoption. Both the originating state, where the child is born, and the receiving state, where the adoptive parents live and where the adoption of the child will take place, must approve the child's movement in writing before the child can legally leave the originating state. This Compact regulates the interstate movement of both foster children and adoptive children. For further information or to obtain a copy of “Guide to the Interstate Compact on the Placement of Children”, contact the: American Public Human Services Association, 1133 Nineteenth Street, NW, Suite 400, Washington, DC 20036. Phone: 202-682-0100; Fax: 202-289-6555.

“Intercountry adoption” means the placement of children emigrating from their country of origin. The placement for the purpose of adoption of foreign national children with approved adoptive parents in Colorado is considered an incoming or immigrating case. The adoption may be finalized in Colorado or in the foreign country depending on the requirements of the foreign country. If the foreign country in this instance is party to the Hague Convention on Intercountry Adoption, the adoption must be in compliance with the Intercountry Adoption Act of 2000 and with federal regulations 22 CFR Parts 96, 97, and 98. U.S. children placed in a foreign country for the purpose of adoption is considered an outgoing or emigrating case. If the foreign country is party to the Hague Convention, the adoption must be in compliance with the Intercountry Adoption Act of 2000 and Federal Regulations 22 CFR Parts 96, 97, and 98.

“Interstate adoption” means a placement of a child into or from Colorado with a person(s) for the purpose of adoption. Placement shall be in conformity with Colorado Revised Statutes, including the Child Care Licensing Act, the Colorado Children's Code and the Interstate Compact on Placement of Children. Services to the child and adoptive family shall be provided under the laws of each state.

“Intrastate adoption” means an adoptive placement of a Colorado child with a person(s) who is a resident of Colorado.

“Legal risk adoption” means an adoptive placement where parental rights have not been relinquished and/or terminated and the child(ren) is not yet legally free for adoption at the time of placement. This includes infants placed directly after birth. The child(ren) is placed in an approved adoptive home. If the adoptive family resides in Colorado, the home shall be certified as a foster home. The placement is with the intention of adoption when or if the child becomes available for adoption. The placement remains a legal risk placement until parental rights have been relinquished or terminated.

"Non-agency adoption" means a placement in which the child(ren) is placed by the birth parent(s) with person(s) unrelated to the child(ren). The placement is made with the intention of adoption. There has been no CPA participation, birth parent counseling, or adoptive family assessment completed before the placement of the child(ren). In order for the adoption to be finalized, the birth parent counseling and approved family assessment shall be completed by a CPA or county department of social services.

"Open adoption" means an adoptive placement where the adoptive parent(s) and the birth parent(s) choose to communicate with each other and share identifying information. The communication and sharing of information may occur before and/or after the finalization of the adoption. The degree of openness is determined by the parties involved.

"Relative adoption" means a placement for the purpose of adoption in which a child(ren) is placed with a person(s) related to the child(ren) as a grandparent(s), aunt, uncle, brother(s), or sister(s).

"Selected agency" means the non-public agency selected by, the State Department, pursuant to Section 19-5-205.5, C.R.S., to perform the administrative review and approval or denial functions required by the Interstate Compact on the Placement of Children (ICPC) and statutes governing foreign adoptions. Agencies selected by the State Department to provide these functions shall hereafter be referred to as "selected agencies".

"Semi-open adoption" means an adoptive placement when the adoptive parent(s) and the birth parent(s) choose to share non-identifying information with each other either before and/or after the finalization of the adoption. The amount of information shared is determined by the parties involved. All information shared is sent to the adoption CPA.

"USCIS" means the United States Custom and Immigration Services.

7.710.53 Disclosure and Fee Information [Rev. eff. 6/1/12]

A. Prior to signing the adoption services contract or other specific agreement for adoptive services or payment of any fees, each agency must provide in writing the following information to any applicant(s) approaching the agency with an interest in adopting a child(ren). The information must be easily understandable to any applicant. Applicants must sign a statement affirming that they have received the following information:

1. The most current child care license for the agency; and,

2. The philosophical perspective and/or religious affiliation of the agency; and,

3. Information as to where any prospective adoptive parent may obtain:

   a. A list of all licensed adoption agencies in the State of Colorado; and,

   b. Information as to how to review the official licensing file for the agency; and,

   c. Information as to how to file a complaint regarding the agency with the Colorado Department of Human Services; and,

   d. Information as to how to obtain the rules regulating child placement agencies in the State of Colorado.

4. For what programs the agency has been approved (foster care, domestic adoption, intercountry adoption) by the State Department including a detailed description of the services offered and the agency's role in those services; and,

5. A statement that parents are paying for services provided by the agency, not for children; and,

6. A copy of the most current annual report submitted to the State Department as found at Section 7.710.73, A; and,

7. A fee schedule listing all the costs of the adoption itemized by services; including incidental fees, additional expenses, and post-finalization fees if included in the cost for the adoption, as listed in Section 7.710.53, C; and,

8. Average time frame for the different services provided, including the family assessment and for the complete finalization of the adoption; and,

9. Description of required training for adoptive parents, as required in Section 7.710.55; and,

10. The process of sharing available information regarding the child and the birth family as provided in accordance with Colorado statute pertaining to identifying and non-identifying information; and,

11. Provide information about the birth parent contact preference form and the medical history statement that the birth parent can file with the State Registrar, including the ability of the birth parent to change the preference form at a later date; and,

12. Any policy that would result in the denial of services or would preclude placement of a child with an adoptive family; and,

13. The grievance/appeal process of the agency; and,

14. Post adoption services offered or required by the agency as found at Section 7.710.62 and the cost of such services; and,

15. The right to seek legal counsel to further understand Colorado adoption laws; and,

16. Process of record storage and maintenance in the event of closure of the agency; and,

17. Any service if provided or offered by the CPA is provided by another agency, entity, or individual; and,

18. That applicants who reside in Colorado and whose adoptions will be finalized in the State of Colorado must apply for and be certified as foster care parents until the finalization of the adoption; and,

19. The agency's policy on concurrent adoptions; and,

20. That only pregnancy related expenses may be paid to a birth parent and all payments made on behalf of a birth parent must be processed through the agency; and,

21. The requirement of the agency to collect fees and submit court documents after the completion of an intercountry adoption to validate such adoption in the United States court.

B. Prior to the provision of services, or for some items during the birth parent or legal parent counseling, each agency must provide the following information in writing to any parent(s) approaching the agency with an interest in the possible relinquishment of a child(ren) for the purpose of adoption. The written information must be easily understandable to any parents in language or manner they can understand. Disclosure items 1 through 8, below, must be provided prior to service. Disclosure items 9 through 18 may be provided to the parent(s) prior to service and/or during the parents' counseling process.

1. Information as to whether the birth or legal parent(s) is required to sign a contract or agreement with the agency.

2. A list of birth or legal parent rights under current Colorado law including, but not limited to:

    a. All of the legal options related to the relinquishment procedures presented in an accurate, competent, unbiased manner; and,

    b. A fair and balanced picture of adoption presented; and,

    c. Decision-making related to the possible relinquishment of a child in an atmosphere free from coercion and undue pressure; and,

    d. Option, by law, to change the decision about relinquishment and to choose to parent the child. The decision can be changed at any time prior to the final order of relinquishment being signed by the court, unless otherwise limited by a court order if a court hearing is held; and,

    e. Written grievance procedure for the agency; and,

    f. Philosophy and/or religious affiliation of the agency; and,

    g. Referral to helping organizations in the community if a decision is made to parent the child; and,

    h. Termination of the relationship with the agency parent counselor at any point during the counseling relationship; and,

    i. To seek independent counsel on any issue related to the relinquishment of a child(ren), including the right to seek independent counseling for an expedited relinquishment procedure.

3. The following must also be provided to birth parents considering relinquishment of a newborn infant:

    a. The right to receive a copy of any document signed by the birth parent(s) and to receive a copy of the original birth certificate; and,

    b. The right to have all of the legal options related to a pregnancy presented in an unbiased manner; and,

    c. The right to receive, in writing, the process by which an expedited relinquishment affidavit is withdrawn, including a personal meeting with a representative of the agency and the signing of a statement of withdrawal which is witnessed and signed by an agency representative; a copy of the statement with original signatures must be provided to the birth parent(s); and,

d. The right to withdraw an affidavit for expedited relinquishment at any time before the affidavit is filed with the court. In the case of expedited relinquishment, the petition for relinquishment may not be filed until at least four (4) calendar days after the birth of the child.

4. Range of available adoptive families, to include religion, race and ethnicity.

5. Information as to where any parent considering relinquishing a child for adoption may obtain:

   a. A list of all licensed adoption agencies in the State of Colorado.

   b. Information as to how to review the official licensing file for the agency.

   c. Information as to how to file a complaint regarding the agency with the Colorado Department of Human Services.

   d. Information as to how to obtain the rules regulating child placement agencies in the State of Colorado.

6. Copy of the most current annual report submitted to the State Department as described in Section 7.710.74.

7. Policy regarding the payment of pregnancy related expenses and that only pregnancy related expenses may be paid to a birth parent. All payments made on behalf of a birth parent must be processed through the child placement agency.

8. Information about whether the birth parent(s) have the right to choose the adoptive family.

9. Requirement for birth parent counseling; topics covered.

10. Information about the different types of adoption services the agency provides.

11. Types of communication between birth parents and adoptive parents, including a statement that the adoption agency cannot enforce any voluntary agreements written or unwritten entered into between birth parent(s) and adoptive parent(s).

12. How parental rights are terminated in Colorado; legal process; mother and father, including the option of expedited relinquishment and administrative notice to the presumed birth father.

13. The process for identifying and serving legal and/or presumed birth father(s).

14. Any policy or requirement that would preclude the agency placing a child for adoption.

15. Provide information on the Birth Parent Contact Preference Form and Medical History Statement that can be filed with the State Registrar.

16. Process of record storage and maintenance in the event of closure of the agency.

17. The process of sharing available information regarding the child and the birth family as provided in accordance with Colorado statute, Section 19-5-301, C.R.S., pertaining to identifying and non-identifying information.

18. The grievance and/or appeal process of the agency.

C. The agency provides to all applicants, prior to application, a written schedule of expected itemized total fees and itemized total expenses, along with a written explanation of the conditions under which fees or expenses may be charged, waived, reduced, or refunded, and when and how the fees and expenses must be paid.

1. For intercountry adoptions, the agency must provide, in writing, a detailed listing of the following expenses:

a. Homestudy fee; and,

b. Adoption expenses in the United States; and,

c. The foreign country program expenses; and,

d. The care for the child in the foreign country expenses; and,

e. Translation and document expenses; and,

f. Contributions to humanitarian or other welfare services programs in the foreign country; and,

g. Post-placement and post-adoption report expenses; and,

h. A written explanation of when the fees may be charged, waived, reduced, or refunded; and,

i. To whom the fees are paid, and when must also be provided to the applicant.

2. For intercountry adoptions, the agency may not customarily charge any additional fees and expenses beyond those disclosed in the adoption services contract and must have a written policy to this effect. In the event that unforeseen additional fees and expenses are incurred in the foreign country, the agency may charge such additional fees and expenses only when it notifies the prospective parents of such. The agency shall obtain specific written consent from the prospective parents prior to expending funds in excess of one thousand dollars ($1,000) for which the agency will hold the adoptive parents responsible. The agency must provide written receipts to the prospective parents for fees and expenses paid directly by the agency, on behalf of the prospective parents, in the foreign country.

D. The agency returns any funds to which the prospective adoptive parents may be entitled within sixty (60) days of the completion of the delivery of services.

E. For intercountry adoptions, the agency must set up an escrow or other pass-through account for all monies that prospective adoptive applicants are required to pay directly to a foreign country to complete an intercountry adoption. These fees may not be deposited into any agency account or used for any purpose other than the foreign country fees. If the applicants request a refund of the monies to be paid to the foreign county, the agency must refund all monies paid by the applicants into the escrow or pass-through account, but not yet transferred to the foreign country, within thirty days of the applicant(s)' request for refund.

F. For intercountry adoptions, the agency may only collect fees from the applicants for the actual services being rendered. Such fees may not be collected more than thirty (30) days prior to the event date of the service being initiated. All fees, scheduled payments, and anticipated completion dates of service must be in writing and provided to applicants at each time fees are paid.

G. If the agency requires the prospective adoptive parents to sign a waiver of liability, the waiver shall be limited and specific, based on the risks that have been discussed with and explained in writing to the client in the adoption services contract or other written agreement for adoption services.

7.710.54 Adoption Procedure [Rev. eff. 5/1/10]

A. Adoptions Finalized in Colorado

For all adoptions to be finalized in Colorado in which a child is placed in Colorado with an adoptive applicant(s) residing in Colorado, the agency must:

1. Complete an assessment of each adoptive family in which a child is to be placed for adoption as detailed at Section 7.710.56.

2. Provide training to each adoptive family as detailed at Section 7.710.55.

3. Provide birth or legal parent counseling to any parent prior to a decision regarding whether or not to relinquish a child as detailed at Section 7.710.57.

4. Complete a study of the child for adoption as detailed at Section 7.710.58.

5. Provide all necessary services for the adoptive family while the family is present in the foreign country as detailed at Section 7.710.64.

6. Complete all requirements that must occur at the time of placement of a child for adoption as detailed at Section 7.710.59.

7. Provide post placement services to the adoptive family and child until a decree of adoption is granted as detailed at Section 7.710.6.

8. Receive a completed and signed State-approved foster care application from the adoptive family.

9. Submit a completed State-approved foster care certification form to the Division of Child Care prior to the child being placed in such adoptive home. A completed State-approved closure form must be submitted to the Division of Child Care upon finalization of the adoption.

B. Adoptions Finalized in a Foreign Country

For all adoptions of foreign nationals that will be finalized in the child's country of origin and jurisdiction, the agency must:

1. Complete an assessment of each adoptive family in which a child is to be placed for adoption as detailed at Section 7.710.56.

2. Provide training to each adoptive family as detailed at Section 7.710.55.

3. Complete a study of the child for adoption as detailed at Section 7.710.58.

4. Complete all requirements for United States Citizen and Immigration Services (USCIS) as detailed at Section 7.710.94.

5. Provide all necessary services related to the adoption while the family is present in the foreign country as detailed at Section 7.710.64.

6. Provide post adoption services to the adoptive family and child, if required by the foreign country, as detailed at Section 7.710.62.

7. Notify the selected agency when the family returns to Colorado with the child adopted in the foreign country.

8. Submit validation documentation to the Colorado court of jurisdiction after completion of intercountry adoption within thirty (30) days of the child arriving in Colorado.

C. United States Children Emigrating to a Foreign Country

For all adoptions in outgoing cases, the agency, if acting as the placing agency, must:

1. Be Hague accredited if the child is emigrating to a convention country.

2. Complete a child background study in compliance with Section 7.710.58 and with Federal Regulation 22 CFR Part 96 Section 96.53.

3. Ensure that all consents have been obtained in compliance with Federal Regulations 22 CFR Part 96, Section 96.53, and Colorado statutes; and meets all rules pertaining to birth parents and birth parent counseling as found in Section 7.710.57.

4. Except in the case of adoption by relatives or in cases in which the birth parents have identified specific prospective parents, make reasonable efforts to find a timely adoptive placement for the child in the U.S.

5. Take all appropriate measures to determine whether the placement will be in the best interest of the child.

6. Ensure that the home study on the prospective adoptive parent(s) is prepared in accordance with the laws of the receiving country, which includes:

   a. Information on the prospective adoptive parent(s)' identity, eligibility, and suitability to adopt; and,

   b. Background; and,

   c. History; and,

   d. Social environment; and,

   e. Reasons for adoption; and,

   f. Ability to undertake an intercountry adoption; and,

   g. The characteristics of the children for whom they would be qualified to care; and,

h. The results of a criminal background check.

7.710.55 Training [Rev. eff. 6/1/12]

A. The adoptive agency shall verify and document that all adoptive applicants have completed in training provided or approved by the agency as a part of the adoption process.

1. All adoptive applicants shall complete sixteen (16) core hours of training provided in face to face format.

2. Reasonable effort must be made to compete all required hours of training prior to the placement of a child(ren).

3. All training must be completed by each adoptive applicant prior to the finalization of the adoption.

4. Applicants adopting children over twelve (12) months of age or completing an intercountry adoption must complete training topics as listed at Section 7.710.55, C.

5. Training must be separate from and in addition to the family assessment.

6. If an adoptive applicant(s) is completing a subsequent adoption through the same agency or has complete documented training from their previous agency, the core training need not be repeated if documentation of the prior training is on record with the current agency.

7. All training must be documented in writing, including dates, number of hours and topics covered.

B. Core training must include all of the following topics:

1. Attachment/bonding issues.

2. Loss and grief issues, as applicable for all parties to the adoption.

3. Adoption as a life long issue as it pertains to all parties to the adoption.

4. Key concepts of child growth and development.

5. Boundary setting and discipline.

6. Parenting a child of a different cultural or racial background infancy through adulthood, if applicable.

7. Disclosure issues including the accuracy of family history information regarding the child and birth parent(s)' family, discussion with the child and sharing information with others.

8. Understanding adoption laws and procedures, including termination of parental rights and the expedited relinquishment process pursuant to Section 19-5-103.5, C.R.S., and the administrative notice for any other birth parent or possible birth parent pursuant to Section 19-5-103.7, C.R.S., if applicable.

9. On-going contact and/or communication of child and adoptive family with biological family and/or significant individuals, if applicable.

10. Possible current and/or future use of community resources, including help with parenting techniques.

11. Medical and health issues including, but not limited to, shaken baby syndrome, parental substance abuse, relevant environmental issues, and genetic risk factors.

12. Expectations of adoption and adoptive process.

13. Basic core and supervision appropriate to the age of the child.

C. Additional Areas of Training

1. For families that will be adopting a child who is either medically fragile, over twelve (12) months of age or any intercountry adoption, four (4) additional hours from the following topics must be completed as applicable and appropriate for the age(s) of the child(ren) being adopted for a total of twenty (20) hours. These four (4) hours of training may be approved in formats other than face-to-face training at the agency's discretion.

   a. Parenting a child that has been abused or neglected.

   b. Parenting the physically, mentally, developmentally or emotionally delayed child.

   c. The impact of frequent moves and multiple caregivers on the development of a child.

2. For families that are just completing an intercountry adoption, an additional four (4) hours of training on all topic areas listed below must be completed as applicable for a total of twenty-four (24) hours. These four (4) hours of training may be provided in formats other than face-to-face at the discretion of the agency and must be completed prior to travel.

   a. U.S. immigration requirements and the laws and procedures of the foreign country, including reporting requirements such as any post-placement or post-adoption reports required by the expected country of origin.

   b. Cultural heritage of the child, including available community resources.

   c. Information on the long term implications for a family that has become multicultural through intercountry adoption, including:

      1) The child's history and cultural, racial, religious, ethnic and linguistic background; and,

      2) The known health risks in the specific region or country where the child resides. Any general characteristics and needs of children awaiting adoption and the in-country conditions that affect children from the expected country of origin.

   d. Any other medical, social and other data known about the particular child.

   e. The impact of a child leaving familiar surroundings as appropriate to the expected age of child.

f. The impact of frequent moves and multiple caregivers on the development of a child and data on institutionalized children and the impact of institutionalization on children, including the effect on children depending on the length of time spent in an institution and of the type of care provided in the expected country of origin.

7.710.56 Assessment of the Adoptive Family and Report [Rev. eff. 6/1/12]

A. Any individual, couple or family who desires to be considered to have a child(ren) placed for the purpose of adoption or second parent adoption must participate in an assessment regarding his/her suitability, appropriateness, and readiness for an adoptive placement.

B. Any individual that is planning a second parent adoption must notify the agency and include the individual involved with the second parent adoption to participate in the home study, if the home study will be used in the next six months for a second parent adoption.

C. An agency must complete the assessment without regard to race, ethnicity, or national origin, except as provided in 7.710.12, C, and 19-5-206, C.R.S.

D. The agency must include in the assessment all members of the household.

E. The agency shall not conduct an assessment for any paid or volunteer member of its staff or any member of the board of directors for the agency.

F. As part of the assessment, the agency must conduct a minimum of three face-to-face joint interviews with a couple, one face-to-face individual interview with each adult member in the household, and a face-to-face age/developmentally appropriate interview with all children residing in the home. For single applicants a minimum of three face-to-face interviews will be required.

G. The agency must conduct at least one interview in the applicant's home.

H. Interviews must be spread out over a period of not less than seven (7) consecutive days.

1. Joint interviews must be held on separate days.

2. The SAFE individual interviews with a couple to discuss Questionnaire Two (2) must be completed on the same date.

I. The assessment for a domestic adoption shall be updated annually and the assessment for an international adoption shall be updated as required by USCIS regulations in the form of an addendum. An addendum shall include at least one home visit and a review of the current medical status. During each subsequent addendum applicants shall be questioned regarding any child abuse investigations during the previous year. The update shall be completed using the prescribed format.

J. In each addendum the agency must document any changes in residence, marital status, criminal history, finances, or addition or deletion of family members.

K. As a part of the family assessment the agency must obtain:

1. A completed, dated and signed formal application for adoption, including a signed fee agreement and a disclosure agreement as outlined at Section 7.710.53, A.

2. A current photograph of all members of the household.

3. A copy of a current marriage license, if applicable.

4. A copy of a divorce decree(s), if applicable.

5. The results of a current fingerprint-based criminal history record check through the Colorado Bureau of Investigation (CBI) and Federal Bureau of Investigation (FBI) on all adult members of the household. The results of the child abuse or neglect records checks from the State Department and appropriate entity in each state in which the adult(s) in the household resided in the five years preceding the date of the application to adopt.

    a. For all adoptions where the home is required to be certified as a foster home prior to the finalization of the adoption, the results of a current fingerprint-based criminal history check for all adults eighteen (18) years of age and older through the FBI.

    b. For intercountry adoptions where the adoption will be finalized in the foreign country, a copy of the results of a current fingerprint-based criminal history records check through the Colorado Bureau of Investigation (CBI) shall be processed through the current Colorado placing agency and the USCIS clearance.

    c. If adoptive applicants transfer from one Colorado agency to another, the new agency must process fingerprints through the applicant's license number prior to any certification or placement of children into a home.

    d. The agency shall report to the court any case in which a fingerprint-based criminal history record check reveals that the prospective adoptive parent was convicted at any time of a felony or misdemeanor in one of the following areas:

        1) Child abuse or neglect; or,

        2) Spousal abuse; or,

        3) Any crime against a child, including child pornography; or,

        4) Any crime, the underlying factual basis of which has been found by the court on the record to include an act of domestic violence, as defined in Section 18-6-800.3, C.R.S.; or,

        5) Violation of a protective order, as described in Section 18-6-803.5, C.R.S.;

        6) Any crime involving violence, rape, sexual assault, or homicide;

        7) Any felony physical assault or battery conviction or felony drug-related conviction within, at a minimum, the past five years.

    e. No person convicted of a felony offense specified in items Section 7.710.56, K, 5, d, a shall be allowed to adopt a child, except a person may be allowed to adopt a child if:

        1) The applicant has had no further arrests or convictions subsequent to the original conviction; and,

        2) The applicant has not been convicted of a pattern of misdemeanors, as defined by rule of the State Board of Human Services at Section 7.701.33, D, 7, f, 1-3; and,

3) The court enters a finding consistent with Section 19-5-210(2)(d), C.R.S., that the adoption is in the best interest of the child.

6. A minimum of three (3) personal references from individuals, unrelated to the applicant(s), that have knowledge of the applicant(s) character and suitability to parent a child. The references must be obtained in writing using the prescribed SAFE format instrument for the type of adoption the applicant has requested.

7. Verification of current health insurance coverage or a statement of intent that health insurance coverage will be obtained for the child upon placement.

8. A dated physician's statement current within one year from the time of application for adoption for each member of the household, certifying that the applicant(s) and all members of the household are free from communicable disease or a physical condition that would impair his/her/their ability to care for children. Subsequent medical statements shall be required upon the written direction of the physician or within one year of the last dated and signed statement if not specified by a physician.

   No physical examination shall be required of any person who in good faith relies upon spiritual means or prayer in the free exercise of religion to prevent or cure disease unless there is a reason to believe such person's physical condition is such that he/she would be unable to care for a child.

L. A family assessment using the Structured Analysis Family Evaluation (SAFE) instrument(s) shall be completed using the current and appropriate SAFE format for the type of adoption for which the applicant(s) has requested.

M. If an applicant desires to be considered for another adoption with the same agency:

1. If the period of time since the last family assessment is within three (3) years of the approval of the original family assessment, a subsequent update using the SAFE instrument shall be completed. The assessment update shall include at least one joint interview, coupled with one documented individual interview with each adult member of the household, and an age/developmentally appropriate interview with all children. At least one interview with the family must be conducted in the home. The individual interviews with the adoptive applicants must be completed on the same date.

2. If the period of time since the approval of the original family assessment is longer than three (3) years, a full and complete family assessment using the SAFE instrument shall be completed.

N. The agency must update the previously completed family assessment in order to address significant changes in the time period subsequent to the original family assessment, including, but not limited to:

1. Criminal history charges or convictions; and,

2. Child abuse investigations; and,

3. Marital status; and,

4. Changes in family structure; and,

5. Employment/financial resources; and,

6. Health changes/status; and,

7. Place of residence; and,

8. Other significant changes within the family.

O. If an applicant desires to be considered for an adoption through a different licensed child placement agency, and the full SAFE assessment received directly from the originating agency and a current update is less than one year old, the new agency may either complete:

1. An update of the original family assessment using the SAFE instrument that addresses all categories as listed in Section 7.710.33, L, 3; or,

2. A full SAFE assessment. If the assessment is more than one year old, a complete assessment using the SAFE instrument must be completed.

P. Following the completion of the family assessment, a narrative report must be completed according to the SAFE instrument and training guidelines.

Q. For families applying for an intercountry adoption, the agency must complete the adoptive family assessment using the international SAFE template and must:

1. Maintain on file at the agency a written copy of the home study requirements for each foreign country for which a child placement agency approves a family.

2. Ensure that the family assessment submitted to the foreign country:

a. Is a reasonable, true, and responsible assessment of the family concerning the requirements of the foreign country; and,

b. Is provided to the foreign country, including any and all information obtained during the assessment process; and,

c. Does not knowingly provide false or inaccurate information or knowingly withhold or exclude information from the foreign country, which is grounds for suspension of the child placement agency's license.

R. At the conclusion of the family assessment process:

1. The family shall be offered the opportunity to review the assessment and submit corrections to the agency of any inaccuracies to the data contained in the assessment.

2. The agency may provide a copy of the final draft version of the home assessment to the family without the signature of the agency, and marked or water-marked draft on each page, so that the family may review the home study.

3. The applicants must either:

a. Sign a statement that they have been given the opportunity to read and review the final draft of the family assessment, excluding the confidential references, or

b. Sign the SAFE home study assessment section indicating they have read and reviewed the final draft of the home study.

S. If at any time during the adoption process the agency becomes aware that it will not be able to continue to provide services or to recommend the applicant(s) for approval for an adoptive placement, or the adoptive family withdraws from the service provided by the agency, the agency must:

1. Notify the applicant(s) in writing within five business days with the reason(s) for the discontinuation of services or confirmation of the family's request for withdrawal from services.

   a. At the time of notification, applicants shall be advised, in writing, of the agency's process for filing a grievance with the adoption process or assessment as required at Section 7.710.71; and,

   b. That the agency shall submit a copy of the denial or withdrawal confirmation letter to the Division of Child Care at the same time it is submitted to the applicants.

2. In the case of an intercountry adoption with an approved I600A or I800A, the agency shall notify USCIS, the selected agency and the State Department.

T. The approved SAFE family assessment, signed and notarized by the placement supervisor, and supporting documentation is a part of the official adoption record of the agency and shall be released upon the written authorization by the applicant(s):

1. To another licensed adoption agency, a Colorado county department of social/human services, or any corporation, partnership, association, firm, agency, institution, or person approved to operate in another state; or,

2. When required by a foreign country to complete an intercountry adoption, to the adoptive applicant(s), to accompany them when traveling to the foreign country, if each page of the family assessment contains the agency raised seal and the pages are numbered according to the full number of pages in the document; and,

3. Shall be transmitted within thirty (30) calendar days of the written request or of when the original agency receives full payment of all fees for services rendered by the agency.

U. If agency policy allows for prospective adoptive parent(s) to apply for concurrent adoptions within their agency, or through both their agency and another Colorado licensed CPA or county department of social/human services, the following applies:

1. At least one of the concurrent adoptions does not require the adoptive applicant(s) to be certified for foster care; and,

2. If two CPAs are providing services to the adoptive applicant(s), the applicant(s) shall sign a release of information for both CPAs prior to the agencies exchanging any information; and,

3. The family assessment completed for the initial adoption must be updated to address the reason(s) for the concurrent adoption; and,

4. All agencies involved are aware of the concurrent adoptions; and,

5. The assessment or update(s) shall be completed in the correct format for the type of concurrent adoption being pursued; and,

6. The assessment or update(s) completed for the second adoption shall:

   a. Address the reason for the concurrent adoption; and,

   b. The type of child the adoptive applicant(s) are approved for in the second adoption; and,

   c. If more than one agency is involved, that both agencies are aware of the concurrent adoptions; and,

   d. That the original assessment/update(s) may be shared with the second agency, with written approval from the adoptive applicants.

7. Updates to both assessments must be completed within one year of the original assessment if no adoptive placement has occurred.

8. Both assessments must be submitted separately for ICPC or USCIS approval, if applicable.

9. If one agency places a child(ren) for adoption, either foreign or domestic, the second agency shall:

   a. Wait a minimum of six (6) months before placing another child(ren) into the home; and,

   b. Complete a home study update to assess the appropriateness of placing an additional child(ren) into the home.

10. The agency placing the child(ren) into the home shall also complete a home study update to assess the ability of the family to adopt an additional child(ren).

11. The adoptive applicant(s) must sign a statement for each potential adoption agreeing to notify the other agency of when a placement of a child(ren) occurs.

7.710.57 Birth Parent Counseling and Report [Rev. eff. 5/1/10]

A. Any person who plans to petition the court for relinquishment of his/her child must obtain counseling about the relinquishment from a licensed Colorado child placement agency or a Colorado county department of social/human services. A court may refer a petitioner to a licensed child placement agency for counseling.

B. An agency must provide counseling regarding possible relinquishment to birth parent(s) residing in Colorado in face to face interviews. In providing counseling services to an expectant parent(s), the agency must provide counseling prior to the birth of a child(ren) and following the birth of the child(ren).

C. An agency must provide counseling to birth or legal parents without regard to age, race, color, national origin, religion, sex, or disability of either birth parent.

D. An agency shall ensure that only pregnancy related expenses are paid on behalf of birth parent(s) by the CPA, the prospective adoptive parents, or agent acting on behalf of the prospective adoptive parents. All expenses paid on behalf of birth parents shall be processed through the agency. An agency cannot require birth parent(s) to repay pregnancy related or cradle care expenses except in the case of criminal fraud.

E. The agency must conduct a comprehensive and diligent search for the legal father and/or the presumed birth father, or the birth mother if applicable. The agency must take seriously and promptly investigate any claims of paternity prior to the final orders of relinquishment or termination. Efforts to locate the birth father or birth mother must be documented.

F. The agency must include in the counseling the legal, alleged and/or presumed birth father(s) if he can be located and is willing and interested in participating in the counseling.

G. At the beginning of the counseling, the agency must ascertain if the birth parent(s) is receiving counseling from any other agency in Colorado.

H. At the beginning of the counseling, the agency must provide, in writing, to the birth parent(s) a list of birth parents rights as found at Section 7.710.53, B.

I. The content of the counseling must include at least the following:

1. Discussion of the birth parent(s) motivation to consider relinquishment of the child(ren).

2. Discussion as to whether the birth parent(s) have been pressured or coerced to relinquish the child.

3. Discussion as to whether the birth parent(s) have been promised or received money, goods, or services or anything of value to motivate the relinquishment of the child(ren).

4. Discussion of alternatives to relinquishment and the resources available in the community if the birth parent(s) choose to parent the child(ren).

5. Discussion of the permanency of the decision to relinquish a child(ren).

6. Discussion of life long loss and grief issues that include, but are not limited to, helping the birth parent(s) identify and understand the present emotional impact of the relinquishment decision and gain an understanding of possible future grief-related emotions and behaviors.

7. Discussion of the life changing effect of pregnancy and birth of a child.

8. Discussion of the birth parent(s) and birth families social developmental history and medical history, including the gathering of information regarding previous losses and life stability.

9. An assessment of the birth parent(s) ability to understand the consequences of the relinquishment decision and her/his ability to intellectually and emotionally understand the options.

10. Discussion regarding the identification of the presumed birth father(s), the serious ramifications of failing to provide known information and the possible impact to the relinquishment and/or finalization of the adoption.

11. Discussion of whether the birth mother or the presumed birth father is a member of or are eligible to be a member of a Native American Tribe and any applicable ramifications of such information.

12. Discussion that the birth mother may only be reimbursed by the agency for verified and documented pregnancy related expenses.

13. Discussion of the legal relinquishment options available, including being present at the termination or relinquishment hearing or the expedited relinquishment procedure of filing an affidavit with the court without the possible necessity of a court hearing.

14. Discussion of the time frame for withdrawal of the expedited relinquishment petition and affidavit, including that the petition for relinquishment may not be filed with the court until at least four calendar days after the birth of the child.

15. Discussion of the administrative procedure that the birth parent(s) information will be released to a presumed birth father(s) or published in an official publication of the last known address of the presumed birth father(s).

16. Discussion that the filing of the administrative procedure notice to the presumed birth father(s) does not obligate the birth mother to file a petition for relinquishment.

17. Discussion of the right of the birth parent to complete the contact preference form and the right to change the form at any time.

18. Discussion of the right of the birth parent to complete a medical history statement form to be filed with the State Registrar and the right to update this information every three years.

J. The agency must submit an affidavit that includes a thorough written report of the counseling, directly to the court. The report must contain at least the following information:

1. Identifying information of the birth parent(s) including the legal and/or the alleged or presumed birth father(s), which shall include at least full name, address, and birth date of parent(s).

2. The name, address and qualifications, including the level of education and the number of years of adoption experience, of the individual that provided the counseling.

3. Confirmation that venue is appropriate.

4. The dates and hours on each date that significant face to face counseling occurred, excluding labor and delivery. The agency must document the number of counseling hours provided pre and post delivery.

5. The total number of hours of counseling. If under extenuating circumstances some counseling was done in a manner other than face to face, the agency must specify how the other counseling was provided and the number of hours of the other counseling.

6. An individualized narrative description of the specific content of the counseling covering required topic areas listed at Section 7.710.57, I, that were discussed during the counseling.

7. If the birth parent(s) choose the expedited relinquishment procedure, the counseling report and affidavit must include a statement that all legal options for relinquishment were presented including both the benefits and the detriments of attending the court relinquishment hearing or filing the expedited relinquishment petition with the court, including the time frame for withdrawal of the petition and affidavit if the birth parent(s) changes his/her mind.

8. Summary of social and medical history of the birth parent(s) and the reason for relinquishment.

9. Description of and documentation to support the diligent efforts of the agency to locate the alleged, legal, and/or presumed birth father or birth mother and the cooperation or lack of cooperation of that parent, including the results of the anticipated notice procedure to the presumed birth father(s) pursuant to 19-5-103.7(8), C.R.S.

10. The results of contact and counseling with the alleged, legal, and/or presumed father(s).

11. Whether the Indian Child Welfare Act as stated in Section 7.309 applies to the results of the agency's investigation, including the documentation of efforts made to locate or contact the tribe and the tribe's response.

12. An itemized account of all expenses, including financial and material aid, the agency paid to the birth parent(s); the agency must also report any financial or material aid if they became aware it was paid to the birth parent(s) by another individual. Documentation must include justification as to how each expense is pregnancy related.

13. The specific recommendation as to whether the relinquishment and/or termination should be granted by the court.

7.710.58 The Child Available for Adoption [Rev. eff. 5/1/10]

Available information shall be obtained on each child for adoption which shall include, but need not be limited to:

A. For domestic adoptions and outgoing adoptions, a report of a physical examination performed within the six months prior to adoptive placement, documenting the current physical condition of the child.

B. A history of the child including as much of the following information as can be obtained:

1. Physical appearance

2. Emotional, behavioral, and cognitive history

3. Race or ethnic origin

4. Religion

5. Education

6. Interest/hobbies/talents

7. Developmental history

8. Region of origin

9. Personal qualities

10. Placement history

11. Any previous written assessments

12. Health/medical history

C. Statement documenting the chronological history of a child's family background in as much detail as available, including verification of the child's birth date and place and reasons for relinquishment or termination of the parent child legal relationships, as listed on the petition of relinquishment or international equivalent and signed by the birth or legal parent, including a personal description written by the birth parent(s), if available.

D. The agency shall provide to the adoptive applicant(s) all non-identifying information that has been obtained by the agency or provided to the agency regarding the child or child's birth family.

E. A social history of the child's birth family including birth parents, extended family and siblings as applicable, including as much of the following information as can be obtained:

1. Physical appearance

2. Health/medical history

3. Race or ethnic origin

4. Religion

5. Education

6. Occupation

7. Hobbies/interests/talents

8. Mental health

9. Substance use/abuse

10. Personal qualities

7.710.59 Placement [Rev. eff. 5/1/10]

A. The assessment of the adoptive applicant(s), as required at Section 7.710.56, K, must be completed prior to placement.

B. As permitted under Colorado law, prior to placement as much information as possible shall be obtained and disclosed in writing to the adoptive parent regarding the child(ren) as required at Section 7.710.58, B.

C. An effort shall be made to place siblings with the same adoptive applicant(s). If the county department locates an appropriate, capable, willing, and available joint placement for all of the children in the sibling group, there should be a rebuttable presumption that placement of the entire sibling group in the joint placement is in the best interests of the child(ren). Such presumption may be rebutted by the county by a preponderance of evidence that placement of the entire sibling group in the joint placement is not in the best interest of a child or the children. If this cannot, or should not, be done in the best interests of the children involved, the record shall contain the reasons and supporting evidence for such separate placements.

D. The agency shall not place a child in an adoptive home that would be detrimental to the child's well-being.

E. The agency shall immediately inform the adoptive applicant(s) in writing of the relinquishing parent's decision to discontinue the adoption plan and the plan for returning the child to the birth or legal parent.

F. A written contract between the placement agency and the adoptive applicant(s) shall be executed at the time of placement. The contract must include an agreement that the adoptive applicant(s) will:

1. File an adoption petition in accordance with Colorado law.

2. Participate in supervision by the placement agency of the child(ren) in the adoptive home until such time as a decree of adoption becomes final.

3. Agree to allow the placement agency to complete and submit a report to the court regarding the findings of the post-placement visits.

4. Prior to finalization, the adoptive parent(s) must obtain permission of the placement agency or birth parent, as appropriate, prior to removing the child from the state.

5. Agree that the child may be removed from the adoptive placement at the discretion of either the agency or the adoptive parent(s) with good cause before the finalization of the adoption.

7.710.6 RESPONSIBILITY OF THE AGENCY AFTER PLACEMENT [Rev. eff. 5/1/10]

A. The placement agency having legal custody is responsible for the welfare of the child until a decree of adoption is granted and shall:

1. Assume financial and planning responsibility for the child in the event that a child's adoptive placement is disrupted.

2. Assume financial and planning responsibility for the child where a court refuses to grant a decree of adoption.

3. Maintain a copy of the final decree of adoption from the court in the agency file on each child.

B. Placements shall be supervised from the time a child(ren) is placed until court finalization to ensure:

1. The physical and emotional well-being of the child(ren); and,

2. Successful attachment between the child and parents; and,

3. Positive adjustment of all family members; and,

4. Adoption related issues are resolved as necessary.

C. For adoptions to be finalized in Colorado the agency must provide post placement services until court finalization, and must provide at least a six (6) month period of post placement services between the time of placement and the finalization of the adoption and shall maintain at least monthly contact with the adoptive family and child(ren) until court finalization of the adoption. The supervision shall include:

1. For children of less than one (1) year of age at time of placement, no less than three (3) face-to-face supervisory visits, including at least two (2) visits to the adoptive home, one visit to the adoptive home must be within the first two weeks after placement. Visits in the adoptive home should include all adoptive family members.

2. For children of one (1) year of age or older at time of placement, at least one (1) visit per month with no less than half (1/2) of the visits as face-to-face visits in the adoptive home. The first (1st) visit must be within two (2) weeks after placement of the child(ren). Visits in the adoptive home should include all adoptive family members.

D. During the period of supervision the placement agency shall maintain records that include:

1. Legible, well organized case/contact notes of all contacts. These must be placed in the adoptive applicant's case file in a timely manner and must be available for review by the State Department.

2. Two (2) formal post placement reports shall be completed for the court, one (1) at three (3) months after placement and the second (2nd) at the time of finalization, or more frequently if required by the court, and must include information regarding:

a. The physical health and emotional well-being of the child.

b. Adjustments of the family and child to the adoption.

c. Financial changes.

d. Changes in family composition.

e. Other adoption issues that have arisen.

f. Recommendation on the continued placement of the child.

g. Recommendation on the finalization of the adoption.

E. The agency may obtain a progress report, if appropriate or as necessary, from a school official or child care provider for each adoptive child that is attending child care or school.

F. The placement supervisor of the Colorado CPA (Child Placement Agency) shall be responsible for removing the child from the home, at the request of the adoptive family, or in accordance with state law, if the placement is not in the best interests of the child.

7.710.61 Finalization [Rev. eff. 5/1/10]

A. The agency that has custody of the child(ren) must provide written consent to the court for the adoption if it is in the best interest of the child.

B. A certified copy of the final decree must be placed in the adoptive applicant's file at the placement agency.

C. Send written notification of the final decree of adoption to the court in which relinquishment took place. Such notification shall not disclose the name or address of the adopting parents.

7.710.62 Post Adoption [Rev. eff. 5/1/10]

A. If the agency does not provide post adoption services, the agency must provide resource and referral information regarding post adoption services available to the birth parent(s), adoptive family, and child, if appropriate.

B. Post adoption services may include, but not be limited to:

1. Consultation.

2. On-going support and education.

3. Resources for counseling or medical needs.

4. Search or reunification resources.

5. Networking with other adoptive families.

6. Adoption education and support groups.

7. Providing to the adoptive family additional social and/or medical background information obtained after placement that could significantly impact the child.

C. For intercountry adoptions, the agency must provide post adoption services including, but not limited to, completion of written reports on the adoptive family and child if required by the foreign country.

7.710.63 Interstate Adoptions [Rev. eff. 5/1/10]

A. An agency may participate in an Interstate adoption under at least one (1) of the following conditions:

1. The adoptive placement is arranged and carried out by a child placement agency licensed by the state of residence of the child in accordance with Section 7.710.1, A, 1.

2. The adoptive services are performed pursuant to an order of the court of jurisdiction of the child.

3. The adoptive services for public adoptions are performed at the request of the State Department through the ICPC of children located at the State Department.

4. The adoptive services for non-public adoptions are performed at the request of non-public agencies through the ICPC at the non-public agency selected and monitored by the State Department.

B. An agency which participates in an interstate adoption shall perform at least the following:

1. Send all studies or reports for public adoptions through the ICPC at the State Department unless otherwise authorized.

2. Send all studies or reports for non-public adoptions through the ICPC at the non-public agency selected and monitored by the State Department (see Interstate Non-Public Adoptions, Section 7.710.93).

3. Comply with all rules and laws of the Interstate Compact on Placement of Children, as found at Section 24-60-1801, C.R.S. et seq., and Section 7.307 of the Program Area 7 rules (12 CCR 2509-4).

C. Any agency which participates in an interstate adoption must have direct knowledge of and comply with all applicable laws and procedures of the other state in which they are working at all times.

7.710.64 Intercountry Adoptions [Rev. eff. 5/1/10]

A. An agency that wants to provide intercountry adoption services must apply for, and be approved by the State Department, to provide intercountry adoptions prior to initiating such service with adoptive applicants.

B. Agencies approved for intercountry adoptions must have a current, dated, written policy detailing:

1. What services will be provided to or coordinated for the adoptive family while in the foreign country.

2. Whether the adoptive family will owe additional fees to be paid in country for services.

3. Whether the services will be provided or coordinated by the agency or by another United States licensed placement agency pursuant to an interagency contract.

C. For each foreign country, agencies approved for intercountry adoptions must either:

1. Have direct knowledge of and be able to comply with all applicable laws and procedures of the foreign national child's country of origin, and be able to provide services listed in Section 7.710.54, B; or,

2. Have an interagency contract in writing with another United States licensed placement agency that:

a. States that the other agency is licensed as a placement agency in accordance with the laws of the state of their principle place of business, and attaches a copy of the license.

b. States that the other agency has direct knowledge of and is able to comply with all applicable laws and/or procedures of the child's country of origin.

c. States that the other agency is authorized to conduct adoptions in the foreign country and, if applicable, attaches a copy of any license or accreditation issued by the foreign country.

d. Lists in detail what services will be provided or coordinated by the other agency to the adoptive families while in the foreign country.

e. Lists what projected fees and expenses the adoptive family will owe for services provided to them while in the foreign country.

D. For each country in which the agency is directly providing or coordinating all adoption services, the agency shall keep on file:

1. An English language translation of any agreements entered into with the foreign government.

2. An English language translation of any document that evidences approval, accreditation or certification by the foreign government to conduct adoptions, if required by the laws of the foreign country.

E. For each country in which the agency is providing or coordinating services through an interagency agreement with a foreign provider, the agency shall keep on file the original signed interagency agreement and applicable attachments. The interagency agreement must include:

1. If the foreign provider is providing adoption services, it states that the foreign provider is authorized to provide adoption services in the foreign country, and, if applicable, attaches a copy of documents to verify authorization.

2. List in detail what services will be provided or coordinated by the foreign provider.

3. List what projected fees and expenses the adoptive family will owe for services provided to them by the foreign provider.

F. Each agency that provides intercountry adoption services must have a separate pass-through or escrow account for which required foreign country fees paid by parents are maintained and available for refund if fees are not paid in the foreign country on behalf of the adoptive parents. Foreign country fees may not be co-mingled or otherwise used by the agency for any purpose other than direct payment to the foreign entities on behalf of the adoptive parents.

G. Agencies providing adoption services for intercountry adoptions in Hague Convention countries, in either incoming or outgoing cases, must meet the federal regulations pertaining to intercountry adoptions with Hague countries.

7.710.7 GRIEVANCE PROCESS, CONFIDENTIALITY, RECORDS AND REPORTS

7.710.71 Grievance Process [Rev. eff. 5/1/10]

A. Each agency must have a written grievance and appeal process for adoptive applicants and for birth parents that provides adequate due process. This information must be provided as required in the Disclosure and Fee Information found at Section 7.710.53, A-B.

B. Reports of grievances filed and the outcome must be available to the State Department for review upon request.

C. The agency must follow the grievance procedure without alteration, interference, or unreasonable delay.

D. If a grievance is filed with the agency, the grievance shall be recorded in the adoptive family or birth parent file with the investigation findings and resulting action taken by the agency.

7.710.72 Confidentiality and Disposition of Adoptive Records [Rev. eff. 5/1/10]

A. All records required by the foregoing sections shall be treated as confidential and shall be protected from unauthorized examination. They shall be immediately available to the staff of the State Department, and for non-public adoptions, they shall be available to the appropriate staff of the selected non-public agency upon request.

B. When a child is legally free for adoption, legal documents and records must be maintained in accordance with Title 19, Article 5, C.R.S., “Relinquishment and Adoption”.

C. The records and papers in relinquishment and adoption proceedings are open for inspection only upon order of the court for good cause shown. The court and the agency are required to act in a manner so as to preserve the anonymity of birth parents, child, and adoptive parents except in the case of a designated adoption.

D. An agency engaged in adoption placement of children shall not be licensed unless they possess adequate, secure storage facilities for records. Records shall be maintained in a locked, secured room.

E. The agency shall develop and implement a written policy and procedure which assures that records are protected from destruction, loss and unauthorized removal or access.

F. The agency shall develop and implement a written plan to ensure annual scanning of their adoption records, including birth parent, adoptive applicant, and children's records. The plan must address scanning any closed files already in storage. Scanned records must be maintained in a current State Department approved technological format for the purpose of transferring those records to the State Department upon closure of the agency.

G. The agency record for any Colorado adoptive family shall contain as a minimum: the signed formal application for adoption; signed fee and disclosure agreement; medical examinations for all household members; a copy of a current marriage license; a copy of a divorce decree where applicable; the results of the State Department's automated abuse and neglect background system check for all adults residing in the household; the original home study assessment with updates as appropriate; any subsequent family assessments; and, all signed and dated adoption agreements or contracts.

1. For adoptions finalized in the United States, the agency record shall also contain: signed petition for domestic adoption; post placement supervisory reports; post adoption correspondence, including any correspondence from the birth parent(s); the type of adoption and communication agreed upon at time of finalization; final decree of adoption; post-adoption reports if applicable; and, validation of foreign adoption if applicable.

2. For adoptions finalized in a foreign country, the agency record shall also contain: all legal documents; all medical and social history information; all foreign documents; all post adoption reports; arrival notification to state-selected agency; consent of termination of parental rights; notification to central authority; USCIS Forms I800, I600, I600A, and I171H, as applicable; and, validation of foreign adoption if applicable.

3. For all adoptions, the results of the CBI and FBI background checks for all adults, eighteen (18) years of age and older residing in the household. For intercountry adoptions finalized in the foreign country, a copy of the approval issued by USCIS may substitute for the FBI background check.

4. The agency record for an adoptee shall contain at a minimum: social and medical histories; birth record; certified birth certificate; birth parent consent for placement; ICPC files; record of admission or intake summary of the child to be adopted.

5. The agency record for a parent(s) relinquishing a child(ren) shall contain at a minimum: signed disclosure agreement and birth parent rights; intake forms; birth parent counseling report and/or counseling affidavit; case notes; the type of adoption completed and the communication agreed upon at time of finalization between the birth parents and adoptive parents, and a copy of such contract if available, including the preference form completed by the birth parent at the time of relinquishment; and, all legal documents related to the relinquishment.

6. For Colorado child placement agencies that provide Intercountry adoption services for families who reside outside of Colorado, the agency must maintain a record that contains, at a minimum: the name, address, and phone number of the adoptive family; the name, address, phone number, and copy of the license of the agency or agencies used to complete the adoption; a copy of the USCIS form granting approval of the home study; a copy of the final decree of adoption; the birth name, adoptive name and the date of birth of the adopted child.

7. Files must be indexed and cross referenced in the following sections:

   a. Adoptive parent name; and,

   b. Adoptive child name; and,

   c. Adoptive child birth name; and,

   d. Birth parent name; and,

   e. Child's date of birth; and,

   f. Year adoption is finalized.

H. In the event that a child placement agency ceases operations, two (2) copies of all adoption records shall be forwarded to the State Department in a current State Department approved technological format of not less than 100 years storage capability.

I. The records of birth parents, adoptive applicants and children, that do not result in an adoptive placement shall be maintained for a period of at least three (3) years.

J. The agency shall have an appropriate secure procedure for confidential record destruction.

K. The Colorado agency shall be responsible for maintaining a case record for each approved adoptive family, each parent who relinquishes a child for adoption, and each adoptee. The record for each client must be kept current from the point of intake to termination of completion of services. All correspondence and written communications including, but not limited to, e-mails, memos, and letters must be maintained in the file.

L. The entire case file, including all worker notes or other documents, is the property of the agency and the entire case must be maintained in secure storage at the main office. Any and all duplicate files maintained by contract or staff worker(s) during the completion of an adoption must be maintained in locked secured storage at all times and all items, including worker notes or other documents, must be returned to the main office at the completion of services. Contract or staff workers may not keep duplicate copies of any documents.

7.710.74 Required Reports [Rev. eff. 5/1/10]

An annual report shall be made to the State Department regarding the adoption services provided by the agency. The report shall be submitted on the State prescribed form within sixty (60) days following the end of the calendar year and shall provide the following information:

A. The types of adoptions, as defined at Section 7.710.52, in which the agency was involved, including the total number of:

   1. Agency adoptions:

a. Domestic (non-relative) adoptions finalized in Colorado.

b. Domestic adoptions finalized outside of Colorado.

c. Foreign national finalized outside United States and placed in Colorado.

d. Foreign nationals finalized in Colorado.

e. Foreign nationals finalized outside United States and placed outside Colorado.

f. U.S. national finalized outside United States and placed outside United States.

g. Total number of adoptions involving Hague countries, incoming and outgoing.

h. Number of boys in domestic adoption.

i. Number of boys in foreign national adoption.

j. Number of girls in domestic adoption.

k. Number of girls in foreign national adoption.

2. Non-agency adoptions as required by the courts.

3. Domestic relative adoptions.

B. The number of children whose domestic adoption was finalized within the previous calendar year as delineated by (do not duplicate numbers):

1. White, not-Hispanic or Latino children.

2. Hispanic or Latino children.

3. Black/African American children, not Hispanic or Latino.

4. Asian children.

5. Native Hawaiian/Pacific Islander children.

6. Alaskan/Native American children.

7. Children that were of two (2) or more races.

C. The total number of birth parent counseling cases completed by the agency in a calendar year delineated by:

1. The total number of birth mothers counseled.

2. The total number of presumed birth fathers counseled.

D. The total number of birth mother counseling cases completed by the agency that resulted in relinquishment of a child(ren).

E. The total number of approved SAFE home study assessments completed by the agency within the calendar year, including those completed for (do not duplicate number of applicants):

1. White, not Hispanic or Latino applicant(s).

2. Applicant(s) of Hispanic or Latino ethnicity.

3. Black/African American, not Hispanic or Latino applicant(s).

4. Native Hawaiian/Pacific Islander applicant(s).

5. Asian applicants

6. Alaskan/Native American applicant(s).

7. Applicants of tow (2) or more races (please specify races).

F. The total number of adoptive placements made by the Colorado agency within a calendar year which resulted in:

1. Disruption of the placement.

2. Dissolution of the adoption.

7.710.8 IDENTIFYING AND NON-IDENTIFYING INFORMATION [Rev. eff. 5/1/10]

Release of identifying information may occur only as listed in current statute or by court order.

A. Non-identifying information is defined as information which does not disclose the name, address, place of employment or any other material information which would lead to the identification of the birth parents. Non-identifying information includes only the following:

1. The physical description of the birth parents.

2. The educational level achieved by the birth parents.

3. The occupation of the birth parents at the time of the child's birth.

4. Genetic information about the birth families.

5. Medical information about the adult adoptee's birth.

B. Child placement agencies authorized by the Colorado Department of Human Services, Division of Child Welfare, to release information shall be qualified as follows:

1. Any agency selected shall be a non-profit agency which has been licensed for at least five years by the State Department to provide adoptive services and is in good standing with the State Department.

2. The agency will submit a written policy which includes the following:

a. A written statement, signed by the Executive Director of the agency, stating the agency shall maintain all information which identifies members of the birth family strictly confidential. In addition, the agency shall identify by name all staff involved in the provision of this service and shall furnish copies of statements agreeing to preserve confidentiality signed by members of he staff who will be handling the material.

b. Agreements for the physical security of any material.

c. Fees to be charged and a sliding fee schedule for low income persons.

d. Policy for releasing the information and type of material that is to be included. Information must be released in written form by placement workers on approval of the placement supervisor.

e. Time frame for response to requests.

f. Development of written information to be given to the persons seeking non-identifying information prior to providing the service which outlines the agency's procedures and fees for these services.

C. The agencies .selected shall agree to participate in any training provided by the State Department.

D. The agencies selected will return to the State Department the record and a copy of the material released within thirty (30) calendar days of release of the information.

7.710.9 NON-PUBLIC INTERSTATE AND INTERCOUNTRY ADOPTIONS

7.710.91 Non-Public Agency [Rev. eff. 5/1/10]

Pursuant to Section 19-5-205.5, C.R.S., the State Department shall select a non-public agency to perform the administrative review and approval or denial functions required by the Interstate Compact on the Placement of Children (ICPC) and statutes governing foreign adoptions. Agencies selected by the State Department to provide these functions shall hereafter be referred to as “selected agencies”.

Agencies that perform or assist in obtaining adoptive placements shall hereafter be referred to as “placing agencies.” The Interstate Compact defines the persons and agencies who, when they place a child from one state into another state, shall follow ICPC procedures. These persons and agencies are referred to as “sending agencies” (per Section 7.307.2, 12 CCR 2509-4)

7.710.92 Qualifying Criteria for Selection of a Non-Public Agency [Rev. eff. 6/1/12]

A. The agency selected to perform this administrative function shall be either a licensed child placement agency designated to facilitate adoptions or a non- public agency that meets the criteria to be a licensed child placement agency that facilitate adoptions.

B. A designated placement supervisor or an individual who meets the criteria to be a designated placement supervisor shall sign documents related to interstate or foreign adoptions (see Section 7.710.22, A, 6).

C. Supervision of the position(s) responsible for performing this administrative function shall be provided from within the selected agency by a position(s) that is a designated placement supervisor or meets me criteria to be a designated placement supervisor.

D. The selected agency shall have been a licensed child placement agency in good standing with the State Department or have met the criteria to be a licensed child placement agency for at least five (5) years.

E. Selected agencies shall not perform this administrative function regarding cases in which they are the placing agencies or have any other vested interest in the outcome of the administrative review since such action would constitute a conflict of interest.

The selected agency shall submit such cases to a non-public agency with which it subcontracts to perform the administrative function. The agency with which the selected agency subcontracts must meet the same qualifying criteria as a selected agency pursuant to this section.

7.710.93 Interstate Non-Public Adoptions [Rev. eff. 6/1/12]

A. Where and How to Send Adoptive Placement Request Packets

Adoptive placement request packets shall be sent in triplicate by the sending agency to the selected agency. The name and address of such agency shall be distributed by the State Department.

B. Time Frame for Processing Adoptive Placement Request Packets

1. Upon receipt of a co for the administrative services of the selected agency, the selected agency shall review the request packets and shall grant or deny permission for the placement to occur within three business days, excluding weekends and holidays.

2. Upon receipt of a complete set of request packets from a Colorado local agency for an adoptive placement into another state, including the fee for the administrative services of the selected agency, the selected agency shall review the request packets for compliance with Colorado laws and procedures, and the packets, including the accompanying 100-A, signed and dated by the authorized signer or the designee of that authorized signer, shall be sent on to the receiving state ICPC office within three business days, excluding weekends and holidays.

3. Permission for the placement to occur or denial of the placement request shall be signified by the dated signature of the authorized signer or the designee of that authorized signer on the Form 100-A that accompanied the request packets. If verbal permission for placement of the child who is the subject of the placement request is initially given to the sending state ICPC office, it shall only be considered a valid form of permission for placement if such verbal permission is immediately followed by the properly signed 100-A being sent by facsimile process to the sending state ICPC office. Within twenty-four (24) hours of such facsimile being sent, copies of the original 100-A and an accompanying memo from the authorized signer of the 100-A that is written on the letterhead stationary of the selected agency shall be mailed to the sending state ICPC office and its local agency.

4. The authorized staff in the selected agency shall work with the sending state ICPC office, and/or with Colorado's local sending agency, and with other parties involved with a requested adoptive placement to assist the sending party in bringing the request packets into compliance with applicable statutes and/or rules and regulations. As soon as possible, while such compliance issues are being clarified and potentially resolved, it shall be one option of the selected agency to return incomplete packets to the sending state ICPC office.

C. Materials Required in Adoptive Request Packets for Children for Whom an Adoptive Placement into Another State is Requested

1. Court documents showing the child is free for adoption. All birth parents who are residents of Colorado shall relinquish in a Colorado court and fulfill all Colorado statutory requirements for relinquishment. Adoption consent forms from other states signed by Colorado residents shall not be considered legal in Colorado.

2. Birth and discharge medical information on the child from the hospital where the child was born.

3. Birth Parent counseling report and affidavit from a licensed child placement agency in Colorado regarding the birth parents.

4. Genetic/medical/social background information regarding the birth parents

5. Written study regarding the adoptive parent(s) that has been completed and approved by a Colorado licensed child placement agency or individual legally approved by the receiving state to perform such studies. Adoptive studies or their updates shall be no more than one year old.

6. Itemized list of monies paid to attorneys, agencies and birth parents, including a statement that no money has been paid to locate for adoption the child who is the subject of the 100-A. This list shall separately specify all fees and costs charged for services associated with the review and approval of interstate adoptions.

7. Documentation of compliance with the Indian Child Welfare Act.

8. The name of any Colorado and/or out-of-state attorney involved in the requested placement.

9. If legal rights have not been terminated or legally relinquished by both birth parents, a legal risk statement shall be signed by the adoptive parents, accompanied by documentation certifying the initiation of relinquishment or termination court procedures.

D. Materials Required in Request Packets for Children to be Placed into Colorado from Another State

The materials required in request packets for children to be placed into Colorado from another state are identical to the materials described in Section 7.710.93, C, with the following exceptions. If the sending state does not require proof of relinquishment counseling, Colorado shall not require this in order to approve an adoptive placement into this state. The fulfillment of the sending state's requirements regarding consent forms shall satisfy Colorado's requirements for purposes of approval of the adoptive placement.

7.710.94 Non-Public Foreign Adoptions [Rev. eff. 5/1/10]

A. Requests for Approval of USCIS Recommendation

For each adoptive family assessed for placement of a foreign national, the agency shall submit the following information to the selected agency:

1. Three (3) copies of the USCIS recommendation form with Section I completed, signed and dated.

2. Applicable fees.

3. An adoptive family assessment completed in accordance with Section 7.710.56.

4. Medical and/or legal documents of the foreign national, if available.

5. A statement of affirmation signed by the Executive Director that the Colorado licensed child placement agency has documentation as required in Section 7.710.64, C, 2.

6. Copies of any and all agreements that the Colorado licensed child placement agency has to verify compliance with Section 7.710.64, C and D.

7. A copy of the foreign country's adoption eligibility requirements.

B. Time Frames and Procedures for Processing Requests for Recommendations

The following case materials with the appropriate fees shall be forwarded to the selected agency for review. The name and address of the agency shall be distributed by the State Department.

1. Upon receipt of a properly completed recommendation form and attachments in accordance with Section 7.710.94, A, the selected agency shall review and grant or deny the approval within twenty-four (24) hours of receipt, excluding weekends and holidays.

2. In the event of an unresolved concern or dispute between the sending Colorado agency and the selected agency regarding the role of the selected agency, the selected agency may refer the case to the Colorado State Department for review and resolution after reasonable attempts to obtain needed clarifications or additional information have been unsuccessful.

3. After approving the recommendation, the original plus one copy shall be returned to the Colorado agency.

C. Notice of Arrival

1. As soon as possible, but no later than six (6) months after arrival in the U.S., the Colorado agency shall send to the selected agency a notice or arrival which contains the following information:

   a. The adoptive parent(s)' names and addresses.

   b. The child's birth name, adoptive name, sex and date of birth.

   c. If at any time in the process the licensed agency or prospective adoptive family becomes aware that the child's adoption will not be finalized in the foreign country, the family and agency are to notify the state in writing of the changes with an explanation as to the reasons for the change in status. If the child returns to the state and was not legally adopted in the foreign country, all documents concerning the child's legal status and the type of visa which was issued allowing entrance into the United States shall be submitted to the Colorado Department of Human Services, Division of Child Care, for review by appropriate entities. The licensed adoption agency shall ensure that the home is certified as a foster home.

   d. The name of the county in which the adoption will be either finalized or validated.

2. The agency shall send the selected agency the following documents with the notice of arrival:

   a. An English translation copy of the child's original birth certificate with child's birth name.

   b. An English translation copy of the foreign adoption decree or, if the adoption was not finalized in the foreign country, translated documents transferring guardianship to the agency and/or prospective adoptive parents.

3. Pursuant to Colorado statute, the selected agency shall generate a letter to the appropriate District Court and return the letter to the licensed agency for submission to the court.

7.710.95 Confidential Case Files and Data System [Rev. eff. 5/1/10]

The selected agency shall maintain confidential case files and a data system for all interstate and intercountry adoptive placement requests it processes. Such files and data must be available at all times to representatives of the State Department.

7.710.96 Conflict of Interest [Rev. eff. 5/1/10]

Selected agencies and the agencies with which they subcontract are prohibited from engaging in conflict of interest in the manner in which they conduct the administrative function associated with non-public interstate or intercountry adoptions and authorized by statute and rules. Conflict of interest is defined in Section EE of the Administrative Information that accompanies the contract between the Colorado Department of Human Services and the selected agency.

7.710.97 Guidelines for Fees Charged by the Selected Agency to Provide the Administrative Function Associated with Non-Public Interstate or Foreign Adoptions [Rev. eff. 5/1/10]

A. The selected agency shall not charge in excess of a $250 flat fee to provide the administrative function associated with non-public interstate and intercountry adoptions as authorized by statute and rules.

1. For interstate placement requests, the fiat fee shall include the processing of all required materials and providing procedures necessary to process the request.

2. For foreign adoptive requests the flat fee shall include authorization review, INS recommendation, processing the arrival notice and the court letter, if an approved family changes to another country requiring a new INS form there may be an additional charge not to exceed fifty dollars.

B. The fee charged for this service shall reflect the cost to the selected agency of direct and indirect expenses associated with the provision of administrative services required by statute and rules for the review and approval of interstate and intercountry adoptive requests.

C. The fee covers indirect costs associated with initial inquiries prior to the establishment of an adoptive placement request or other inquiries about interstate or intercountry requests.

7.710.98 Standards by which the Colorado Department of Human Services Shall Evaluate the Delivery of Services by the Selected Non-Public Agency [Rev. eff. 5/1/10]

The Colorado Department of Human Services shall monitor the selected agency to determine compliance with Sections 7.710.91 - 7.710.97, in accordance with Section 19-5-205.5(2)(b), (I-X), C.R.S.

A. The State Department shall conduct a site visit to the selected agency(ies) and review interstate and foreign adoption files that are a representative sample of pending, open and closed files.

B. The State Department shall conduct a site visit on at least a semi-annual basis.

1. Within thirty (30) calendar days following each site visit, the State Department will provide the selected agency(ies) with a written evaluation that indicates the following:

a. Whether or not the agency is in compliance with rules.

b. What corrections, if any, are necessary in order to be in compliance.

c. If there are corrections to be made, the time frame within which these corrections are to be made.

2. Failure by the selected agency(ies) to make corrections that have been indicated in the written evaluation of the site visit shall be grounds for the Colorado Department of Human Services to terminate the contract between it and the selected agency(ies).

7.711 RULES REGULATING CHILDREN'S RESIDENT CAMPS [Rev. eff. 6/1/07]

In addition to the General Rules for Child Care Facilities, Children's Resident Camps shall follow the rules specified in this section and the "Rules and Regulations Governing the Sanitation of Child Care Centers in the State of Colorado".

7.711.1 DEFINITIONS [Rev. eff. 4/1/13]

A. A "residential camp" is defined at Section 26-6-102(2.2), C.R.S.

B. A residential camp may have a "primitive camp" which is a portion of the permanent camp premises or another site at which the basic needs for camp operation, such as places of abode, water supply systems, and permanent toilet and/or cooking facilities, are not usually provided.

C. A "travel-trip camp" shall be known as a camp in which there is no permanent camp site and children move from one site to another. The travel-trip camp either originates in Colorado or moves into and/or through Colorado from another state and operates for three or more consecutive 24-hour days during one or more seasons of the year for the care of five or more children who are at least ten (10) years old or have completed the fourth grade. The program shall have as its purpose a group learning experience offering educational and recreational activities utilizing an outdoor environment.

D. A "non-medical religious camp" is a camp operated by a religious organization which does not believe in the use of medical practice in physical examination or treatment of illness or injury.

7.711.11 Purpose and Goals [Rev. eff. 11/1/98]

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

7.711.12 Governing Body [Rev. eff. 6/1/07]

The governing body shall be identified by its legal name. The names and addresses of individuals who hold primary financial control and officers of the governing body shall be disclosed fully to the Colorado Department of Human Services. When changes of governing body occur, the new governing body must immediately submit an original application and pay the required fee.

A. If the governing body lets, leases, or rents the licensed facility to any group or organization whose program falls under the definition as found at Section 7.711.1 and verifies in writing to the State Department that the lessee meets the licensing standards, an application is not required of the lessee. If the governing body does not verify that the lessee meets the licensing standards, an application is required of the lessee and the license must be issued to the lessee before the camp opens.

B. When the facility is let, leased, or rented, the governing body shall report the following in writing at the request of the State Department: name of the group, number and ages of children, length of time for use of the facility, and the purpose of the camp.

7.711.13 Financial Support [Rev. eff. 11/1/98]

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

7.711.14 Insurances [Rev. eff. 11/1/98]

A. Every facility shall carry public liability insurance. The applicant or licensee shall submit the amount of the insurance and the name and the address of the insurance agency providing the insurance to the camp. The camp shall maintain information about the insurance at the campsite. A camp need not carry public liability insurance if the camp's governing body determines that insurance is unnecessary due to its financial ability to meet all possible claims. The basis of such judgment must be revealed to the department.

B. Camps operating their own transportation vehicles shall carry liability insurance in compliance with the minimum limits required by Article 10, Chapter 7, Colorado Revised Statues.

7.711.15 Written Agreements, Reports, and Logs [Rev. eff. 6/1/07]

A. There shall be on file at the campsite and annually-dated a written agreement with a licensed physician or nearby health care facility stating that the physician or health care facility will furnish the necessary medical services for campers at the camp and medical help as a backup to the camp staff members responsible for health supervision.

B. A travel-trip camp is not required to have a written agreement, but must have a list of all medical facilities in areas where the travel-trip camp will be traveling.

C. The camp shall report to the State Department in writing within 48 hours each injury or illness which required that the camper be permanently sent home. The report shall include name, age and address of the camper; name of camper's parent(s) or guardian(s) and their address if different; date of accident or illness; description of accident or diagnosis of illness; treatment given; name and address of physician prescribing treatment; and, where treatment was given and disposition of the case.

D. The camp shall maintain at the campsite a medical record keeping system, listing name of camper, ailment, treatment prescribed and administered dale and name of person administering care. This record keeping system shall be available to licensing personnel.

E. Within 24 hours of each incident, the camp shall submit to the State Department a written report about any camper who has been lost from the campsite and for whom a report has been made to the local sheriffs department for search and rescue. Such report shall indicate the name, age and address of the camper; the name of parent(s) or guardian(s) and their address if different; the date when the child was lost; the location, time and circumstances when the camper was last seen, circumstances of locating the camper.

F. Each camp shall have a plan for action in case of natural disasters lost campers/swimmers, injuries, and illnesses. These plans shall be in writing and shall be on file at the camp office. The staff shall receive training regarding the implementation of these plans. In the case of a travel-trip or primitive camp, these plans shall accompany the staff members and campers.

7.711.2 PERSONNEL

7.711.21 General Requirements for All Personnel [Rev. eff. 6/1/07]

A. All paid employees at the camp shall be sixteen (16) years of age or over, except that employment of maintenance staff including kitchen service, grounds, and housekeeping employees under 16 years of age is allowed if in compliance with Colorado labor laws.

B. All counselors and staff members having a supervisory role with campers shall be at least eighteen (18) years of age and have interest in, respect for, and ability to work with children.

C. There shall be a letter of agreement with each volunteer or employed staff member which includes listing of specific responsibilities/job description and referring to information contained in the hiring packet or staff manual. Days or hours of employment/time off, personal conduct, and necessary medical examinations must be provided in writing and may be provided in the hiring packet or the staff manual. The letter of agreement shall be signed by both the employer and the volunteer or staff member. In the case of staff members or volunteers who are younger than eighteen (18) years old, the letter of agreement shall also be signed by the parent or guardian.

D. There shall be at least three references about each staff member of the camp attesting to the individual's character and suitability to work with children. The written references shall be in the personnel file or there shall be an indication in the personnel file that a reference has been obtained by telephone.

E. Each staff member must complete a current health history and must have been examined within the last 24 months by a licensed medical health care professional approved to perform physical examinations. The health history must be completed within 90 calendar days of the beginning of working at the camp and shall be maintained in the personnel file at the camp. The staff members of a non- medical religious camp are exempt from this regulation.

F. If a staff member wishes an exemption from an examination performed by a licensed medical hearth care professional due to religious beliefs, the staff member shall submit a signed, written statement, which states the reason for the religious exemption and that the individual is in good health. A camp retains the right to ask a staff member for a written statement prior to employment a the camp.

G. Each staff member shall be trained and given written instructions as to camp policy when emergencies occur, such as fires, lost campers, and injuries.

7.711.22 Necessary Camp Personnel [Rev. eff. 6/1/07]

A. Each camp shall have an onsite director who shall be at least twenty-one (21) years of age. The director shall have a maturity of judgment and prior verified adult leadership experience in an administrative or supervisory position at an organized camp and twelve months employed adult leadership with groups of children since he/she attained the age of 18 years.

B. At each permanent camp there shall be one or more health care providers who shall be responsible for monitoring the overall health of the camp and creating a healthy camp community. A hearth care provider may be one of the following: a licensed physician, a registered nurse, a licensed practical nurse, a licensed physician's assistant, a certified nursing assistant, or a staff member who holds a current American Red Cross Emergency Response Certificate or a current certificate as an Emergency Medical Technician or equivalent. Any health care provider other than a licensed physician, registered nurse, or licensed practical nurse must also hold a current certificate indicating completion of the State Department approved and required medication administration course.

1. At least one health care provider shall be at the camp twenty-four (24) hours per day that the camp is in session.

2. If the camp health care provider is not a physician or RN, a physician or RN currently licensed in Colorado must specifically delegate authority to any camp health care provider or camp staff member to administer medications. The delegating physician or RN must be aware of the specific medical needs of campers, be available for consultation while the camp is in session, and accept responsibility for monitoring the therapeutic effects of medications administered at camp. As directed by their scope of practice, EMT's may not administer medications in the camp setting; therefore, an EMT may not serve as the sole camp health care provider. Respiratory therapists may administer medication within their scope of practice.

3. All health care providers, except physicians and RNs, must take the Department approved medication administration course and hold a current First Aid and CPR card.

C. At any primitive camp within sixty (60) minutes from definitive medical care of the base camp, where children may be away from the base camp for up to six nights, there must be at least one staff member qualified with community First Aid training, CPR, and medication administration training if children taking medicine accompany the trip.

D. At any primitive camp where children are either more than one hour from definitive medical care or are away from the base camp for seven or more nights, there must be at least one staff member with each group of children with wilderness First Aid training, CPR, and medication administration training.

E. At any primitive camp where children are away from camp for seven or more nights and are more than one hour away from emergency medical services, there must be at least one staff member with each group of children with wilderness first responder training, CPR, and medication administration training if children taking medicine accompany the trip.

F. There shall be sufficient camp counselors or staff members who have a supervisory role with children at the camp to meet the staff ratio as indicated in Section 7.711.23. Children under the age of six (6) years who live at camp or are visiting with their parent must be directly supervised by their parent at all times when the children are involved in camp activities. Staff members whose children are under six (6) years of age cannot be supervising campers or leading special activities when they are supervising their own children.

G. If the camp has counselors-in-training, they must be directly accountable to a qualified counselor or specialized staff member and must be directly supervised by those individuals in their role when caring for children. The counselors-in-training who are less than eighteen years old shall not be counted as staff members in the maintenance of the staff ratio for supervision of children as found at Section 7.711.23.

H. There shall be specialized staff members who are responsible for specific portions of the camp program. Requirements for those specialized staff members are found among the requirements for the specialized activity areas at Section 7.719, et seq.

7.711.23 Necessary Staff Supervision [Rev. eff. 6/1/07]

A. The camp shall have an accurate system whereby staff members who are responsible for the supervision of children shall know where each child is at all times.

B. At no time shall a camper be left without qualified supervision. Sleeping quarters of the counselors shall be in close proximity to sleeping quarters of the children whom they supervise so that counselors are within sight or hearing of the children they supervise. Children may sleep alone for specific program functions such as solos or survival experiences and then only when regularly monitored pursuant to the camp's written program.

C. Each special activity shall be supervised by a staff member currently qualified in First Aid and CPR training, and by the experience and training in that special activity as specified in Section 7.719, et seq.

D. In a residential camp, ratio of one staff member having a supervisory role with children per number of campers or fraction thereof shall be maintained at all times as follows:

Age of Children	Number of Children	Number of Staff Members
6 and 7 yrs. old	6	1
8 through 10 yrs. old	8	1
11 through 13 yrs. old	10	1
14 through 15 yrs. old and over	12	1

E. In a trip away from the residential camp premises or at the primitive camp, the staff ratio given at Section 7.711.23, D, shall be maintained, but there shall be at least two staff members accompanying each trip, and one staff member shall hold at least a current Red Cross standard First Aid and safety certificate or equivalent. If the trip exceeds two nights, there shall be with the group a staff member who has maturity of judgment and has been trained in trip leading procedures.

F. In a travel-trip camp, the staff ratio given at Section 7.711.23, D, shall be maintained, but there shall be at least two staff members at all times with the campers. One of those staff members must be at least twenty-one (21) years old and one staff member shall meet qualifications of the health care provider (see Section 7.711.22. B).

G. In the case of trips away from the permanent residential camp, including overnights, there shall be a day-to-day itinerary prepared prior to departure. The resident camp headquarters shall keep a copy of the itinerary. The itinerary shall be followed as closely as possible. Resident camp headquarters shall be notified of an itinerary change as soon as possible.

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

7.711.3 – 7.711.42 None [Rev. eff. 6/1/07]

7.711.5 CHILD CARE

7.711.51 Health Care [Rev. eff. 6/1/07]

A. The camp health program shall be under the supervision of an individual qualified as stated at Section 7.711.22, B.

B. At the time of admission, each camper shall furnish a health history which indicates communicable diseases and serious illnesses or operations the individual has had, any known drug reactions and allergies, medications being taken, and any necessary special diets at the time of camp admission.

C. The camper shall present a statement confirming a physical examination which has been performed within the preceding twenty-four months by a licensed physician or qualified, licensed nurse practitioner. The physician or nurse practitioner shall be asked to inform the camp as to any physical problems which would limit the camper's activity, any special care which the child will need, and include a record of up-to-date immunizations which the child has had, including the date of the last tetanus shot.

D. If the camper wishes an exemption from a statement confirming a physical examination and immunizations due to religious beliefs, the camper shall submit a written statement, signed by the camper's parents or legal guardian, which states the reason for such an exemption and that the individual is in good health. The camp has the right to refuse the admission of a child who has no statement from a physician or nurse practitioner.

E. Within 24 hours after arrival at camp, each camper shall be observed by camp staff trained to do so to identify noticeable evidence of any illness, communicable disease, or signs of abuse. The camp health care provider shall meet with campers upon arrival at camp that have special medications or treatment procedures or dietetic restrictions or known allergic reactions or any known physical limitations.

F. If a child shows signs of severe illness or communicable disease, the camper shall be separated from other campers, parents shall be notified, and a doctor or medical facility shall be consulted, if appropriate and as required, as to the child's treatment. All items used by the sick child shall be properly disinfected before use by any other person.

G. The non-medical religious camp shall notify parents immediately when a camper becomes ill, but is exempt from the requirement of consultation with the doctor or medical facility.

H. When communicable diseases occur, parents and staff members shall be advised what protective measures are available and indicated for the particular disease, and the county or state health officer notified.

I. If a camper requires medical attention away from the camp site, the camper's parents or guardian shall be notified and necessary medical care shall be sought from a licensed physician or medical facility. Written authorization for medical care shall be in the child's file pursuant to Section 7.711.61, A, 9.

J. If a camper requires medical attention away from the campsite of a non-medical religious camp, the parents shall be notified and their instructions followed.

K. In the case of travel-trip camps, primitive camps, or trips away from the camp, a copy of the statement which has been signed by the parent or guardian indicating that the camp staff may obtain emergency medical care shall be in the possession of staff members accompanying the campers. The original signed statement shall be readily accessible.

L. The camp health care provider shall be responsible for administering medication to campers. If the health care provider is not a currently Colorado licensed RN or physician, the health care provider may only administer medication delegated and supervised by a RN or physician. Respiratory therapists may administer medication within their scope of practice. The health care provider shall administer only medicines prescribed for an individual camper or medicines listed in written standing treatment procedures from a licensed physician who has agreed to furnish medical services for the camp, pursuant to Section 7.711.61, A. Such medicines shall only be administered by authority of written authorization given to the camp or to the health care provider by the child's physician or camp physician.

1. Medication prescribed for campers shall be from a licensed pharmacy; labeled with the name, address, and phone number of the pharmacy; name of the camper; name and strength of the medicine; directions for use; date filled; prescription number, and, the name of practitioner prescribing the medicine. When no longer needed, the medication shall be returned to the parent or destroyed.

2. A record of any medications administered shall be maintained in a medication administration record pursuant to Section 7.711.15, D.

3. All medication at the permanent camp site shall be kept in a clean, locked container, except emergency medication such as EPI-PENS or asthma inhalers. On excursions away from the camp, medication shall be under the control of an adult and shall be stored inaccessible to children.

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

M. First Aid supplies shall be located near food service operations, program areas, maintenance areas, the headquarters of the medical supervisor, and in motor vehicles which are used to transport campers.

N. There shall be an identified headquarters of the health care provider at the campsite.

O. There shall be a location at the campsite furnished with necessary equipment to care for an individual who needs to be separated from other campers due to a communicable disease or illness. The isolation quarter shall be located within close proximity of rest room facilities.

P. A responsible adult shall be present or within hearing distance of any ill child.

Q. Transportation shall be available at all times in cases of medical emergency according to the written emergency medical evacuation plan of the camp.

7.711.52 Discipline [Rev. eff. 11/1/98]

A. The camp shall have a written policy regarding the discipline of children, which shall be explained to staff members before the camp session begins.

B. Discipline shall be constructive or educational in nature and may include such measures as diversion, separation from problem situations, talking with the child about the situation, or praise for appropriate behavior.

1. Children shall not be subjected to physical harm, fear, or humiliation.

2. Children shall not be punched, shaken, bitten, roughly handled, pinched, or subjected to any physical punishment.

3. Separation, when used as discipline, shall be brief and appropriate to the child's age and circumstances, and the child shall be within hearing of an adult in a safe, lighted, well-ventilated place. No child shall be isolated in a locked room or closet.

4. No child shall be punished for toileting accidents.

5. Verbal abuse or derogatory remarks about the child, his family, his race, religion, or cultural background shall not be used or permitted.

6. Meals may not be denied the camper as a disciplinary measure.

7. Authority to punish shall not be delegated to other children nor shall the camp sanction one camper punishing another camper.

7.711.53 Security Practices [Rev. eff. 7/1/00]

A. The camp shall establish a written security procedure and shall train staff members and campers regarding this procedure. Such procedures may include, but are not limited to, the following:

1. The campers and staff organized into a buddy system and trained to report immediately to camp authorities when they believe their buddy is missing.

2. Whistles issued to campers and/or staff who are instructed as to their usage if a camper or staff member is attacked.

3. Campers and staff trained to report to the camp administration any strangers or unidentified person who may be at the campsite.

4. Bumper stickers for each authorized car at camp.

5. Limited advertisement of camp location.

6. Use of intra-camp emergency communication.

B. The camp shall report to the local law enforcement office or department the dates of the camp sessions and the location of the camp.

C. When a camper is discharged from camp or when the camp session is over, the child shall be returned to the parent or guardian or to a properly identified adult approved by the child's parent or guardian.

7.711.54 Food and Nutrition [Rev. eff. 10/1/03]

A. Each camp shall establish a written policy for its nutrition and food service program. This policy shall include meal hours, type of food service, staff responsibilities during the time food is served, authorization of special diets, and the administration of the food service program. This policy shall be available to all staff members.

B. All foods shall be stored and prepared in accordance with the rules and regulations governing the sanitation of food service establishments in the State of Colorado.

C. Foods provided by the camp shall be of sufficient quantity and nutritional quality to provide for the dietary needs of each child. Menus shall meet the most recently revised recommended daily allowances of the Food and Nutrition Board, National Academy of Sciences, National Research Council, adjusted for age, sex, religion, and activity. The only exception shall be by written parental or medical direction.

D. Menus shall be planned at least a week in advance and shall be dated as to the week in use. The current week's menu shall be posted in the food preparation area. Food substitutions shall be noted on the menus in writing. After use, the menus shall be kept on file for the period of the camping season.

E. In travel-trip camps, all menus shall be planned prior to leaving and changes noted in writing. Menus shall be maintained in file of camp.

F. Drinking water shall be readily accessible to campers at all times.

7.711.55 Transportation [Rev. eff. 6/1/07]

A. If the camp transports children from their home to camp, the camp shall assume responsibility for the child between the place where he/she is called for and the camp, and from the time he/she leaves the camp until delivered to his/her parents or to a responsible person designated by the parents or guardians.

B. Any transportation of the camper during the camp session is the responsibility of the camp.

C. There shall be at least one adult supervisor in addition to the driver when nine or more children are being transported at any one time. No child shall be permitted to remain unattended in any vehicle.

D. Only that number of children and adults for whom there is comfortable seating space shall be transported. Standing in the vehicle while it is moving shall be prohibited. No person shall sit on the floor or in aisles, or project head or limbs out of the vehicle.

E. No more than three persons, including the driver, shall be permitted to occupy the front seat of the vehicle. Each camper permitted to ride in the front seat of the vehicle shall be secured by a seat belt.

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

G. The camp which provides any transportation shall have a written policy including, but not limited to, the following topics: safety education while riding in the vehicles, seating, highway stops, relief drivers, when necessary, supervision, and emergency procedures on the road.

H. All vehicles transporting children shall comply with the applicable regulations of the Colorado Department of Revenue, Motor Vehicle Division, and the ordinances of the municipality in which the vehicle is operated.

I. All persons who transport campers shall be properly licensed to operate the vehicle being driven.

J. At least one adult in each vehicle shall hold a current Red Cross standard First Aid and safety certificate or equivalent. The vehicle shall be equipped with a First Aid kit.

K. Any vehicle which transports nine or more passengers shall carry a fire extinguisher, reflective equipment, and road side markers.

7.711.6 RECORDS FOR CHILDREN AND PERSONNEL

7.711.61 Children's Records [Rev. eff. 6/1/07]

A. At the time the child is admitted to the camp, the following information shall be obtained and maintained at the campsite for each camper:

1. Child's name, birth date, and address.

2. Parents or guardian's names, addresses and telephone numbers.

3. Parents or guardian's place of employment and telephone numbers, which may include work phone, cell phone and fax numbers, e-mail address and employment addresses.

4. Name, address and telephone number of an adult designated to contact in case of emergency if the camp is unable to contact the parent or guardian.

5. Name, address and telephone number of individuals authorized to take the child from camp if different from the parent or guardian.

6. Names of individuals that are not authorized to take the child from camp.

7. Dates of the camp session which the child will attend.

8. Name, address and telephone number of the child's doctor. This information need not be obtained in a non-medical religious camp or if the child is exempt for the need for a statement confirming a physical examination pursuant to Section 7.711.51, D.

9. Authorization signed by the person or agency having custody, giving authority for the camp to obtain emergency medical care. A non-medical religious camp is exempt from this regulation.

10. Authorization signed by the parent, person or agency having custody of the child to participate in all special trips or excursions in which the child may be walking or riding away from the campsite.

11. Indication of any camp activity in which the parent, person or agency having custody of the child does not wish the child to participate (see Section 7.719, et seq.).

B. The child's records shall also include:

1. A statement confirming a physical examination signed by the physician or nurse practitioner or a written statement signed by camper's parent or guardian pursuant to Section 7.711.51, D, and a current health history from the parent regarding the child's current physical condition (see Section 7.711.51, B).

2. Copies of reports submitted to the department regarding injury or illnesses suffered by the camper, the fatality of a camper, or a report of a camper being lost (see Section 7.711.15).

7.711.62 Staff Records [Rev. eff. 6/1/07]

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

A. Name, address, and birth date of the individual.

B. Training, education, experience of the staff member.

C. Copies of any first aid certification or other certification confirming qualifications for the responsibilities assumed at the camp.

D. Copy of a statement signed by the physician or the nurse practitioner regarding the physical examination of the staff member or a statement from the staff member pursuant to Section 7.711.21, E.

E. Name, address, and telephone number of any person(s) to be notified in the event of an emergency, which may include home phone number, work phone, cell phone, pager, fax number, and e-mail address if available.

F. Copy of the written references or note of phone references pursuant to Section 7.711.21, D.

G. Copy of the signed letter of agreement pursuant to Section 7.711.21, C.

H. The dates that the staff member was on the staff of the camp.

7.711.63 General Information [Rev. eff. 7/1/00]

A. The camper's file shall be retained by the camp for at least three years after the child leaves the camp, and shall be available without restriction to the licensing agency, but otherwise shall be treated as confidential. Retention of records for a longer period may be desirable where they reflect an accident, injury, or other unusual circumstances.

B. Personnel records shall be maintained by the camp for at least three years. If the record reflects an accident, injury, or other unusual circumstance, it is suggested that the record be maintained for a longer period of time.

C. Children's records shall be confidential, and facts learned about children and their families shall be kept confidential. The license may be denied, revoked, or made probationary if confidentiality of records or information is not maintained.

7.711.7 CAMPSITE, PHYSICAL FACILITY, FIRE SAFETY AND SANITATION

7.711.71 Campsites [Rev. eff. 6/1/07]

A. All new and remodeled camp buildings, facilities, and equipment must meet the requirements of applicable codes and regulations, such as those governing health, safety, sanitation, building and fire; specifically, the codes of the local fire departments and the Colorado Department of Public Health and Environment.

B. Prior to issuance of an original license, and at least every two years, the camp shall be inspected and approved by the state health department or its local unit as conforming to sanitary standards. In the case of a travel-trip camp, the plans that the camp has made to meet the requirements shall be inspected and approved prior to the date the trip camp begins.

C. The camp must conform to fire prevention and protection requirements of local fire departments in the locality of the camp. An inspection and approval of the local fire department must be obtained prior to original licensing and at least every two years. If the camp is not located within the jurisdiction of a local fire department, such fire department approval is not required. In the case of a travel-trip camp, the fire department approval is not required since the camp has no permanent campsite.

D. Existing facilities can be required to correct deficiencies, caused by non-compliance with regulations of the health or fire departments, which may be hazardous in nature.

E. The camp shall identify hazardous, high-risk areas such as cliffs, cellars, mineshafts, etc. These areas shall be guarded of posted to reduce the possibility of accidents.

F. Each residential camp shall have a telephone or comparable means of communication. If either of these is impossible, individual arrangements shall be made by the camp and approved by the State Department.

G. Emergency telephone numbers shall be posted for at least, but no limited to, the camp doctor, nearest clinic or hospital, ambulance service, local sheriffs office and rescue unit, national or state forest service office (as appropriate), fire department or lookout station, and poison control center (if available).

H. In the case of a primitive camp or travel-trip camp, sources of emergency care and methods of communication with such facilities as hospitals, police, forest service shall be identified for each campsite on the itinerary.

I. When playground equipment is provided at a residential camp, the equipment and playground area shall be free of obstruction and man-made or natural hazards and shall be away from natural pathways of traffic. Playground equipment such as, but not limited to, climbing apparatus, slides, swings, and swing sets shall:

1. Be in good repair, of solid and safe construction, free of rough edges, protruding bolts and the possibility of entrapment of extremities.

2. Be securely anchored to concrete or other suitable footing.

3. Swings must have seats made of a flexible material.

4. Moving equipment must be located toward the edge or corner of a play area or be designed in such a way as to discourage children from running into the path of the moving equipment.

5. Metal equipment shall be placed in the shade when possible and must be arranged so that children playing on one piece of equipment will not interfere with children playing on or running to another piece of equipment.

6. The maximum height of any piece of playground equipment is six (6) feet.

7. All pieces of playground equipment must be designed to guard against entrapment and strangulation.

8. All pieces of permanently installed playground equipment must be surrounded by a resilient surface of a depth of at least six (6) inches. Rubber mats manufactured for such use consistent with the guidelines of the Consumer Product Safety Commission may be used in place of resilient material.

9. The use of any materials under permanently installed playground equipment other than wood chips, wood mulch, engineered wood fiber, pea gravel, synthetic pea gravel, and shredded rubber tires must be approved by the State Department.

J. If the residential camp is located on or uses national or state lands, the director shall familiarize the staff and campers with rules and ethics governing the use of such property and shall be responsible for compliance.

K. An itinerary shall be filed or an arrangement shall be made with national or state forest service office if such land is to be used by the travel-trip camp. The director shall familiarize the staff and campers with rules governing the use of such property. Should the travel-trip camp pass onto private land, an agreement shall be made with the individual responsible for that land prior to access.

7.711.72 Permanent and Semi-Permanent Shelters and Sleeping Facilities

A. All structures used by children shall be kept in good repair at all times.

B. At least one-half of the floor area in each living unit, excluding tents, shall have a minimum ceiling height of seven feet. No portion of a room having a ceiling height of less than five feet shall be considered as usable floor space.

C. If fabric structures are used, no plastic material will be permitted. Fabric structures shall be of a fire- and flame-retardant material. Existing fabric structures may be required to be removed on the basis of hazard potential.

D. Campfires and open flames of any type shall be prohibited within ten feet of any tent.

E. Each camp building used for living or sleeping quarters shall have windows or openings constructed so as to admit adequate light and air.

F. Each camper shall be provided with his/her own mat, pad bad or cot.

G. The aisles between rows of cots, beds, or bunks shall be kept clear for exiting purposes. There shall be at least two feet of clear space separating sides of beds.

H. If bunk beds are in use, no bunks shall contain more than two tiers of beds. There shall be at least twenty-seven inches of clear space separating the tiers of beds and thirty-six inches of clear space between the top tier and the ceiling. Electric lights which are within reach of the top bunk shall be protected.

I. Each permanent sleeping unit, building, or tent shall have not less than 30 square feet of floor space per person, camper, or counselor for single-tier beds and twenty square feet per person, camper or counselor for two-tier bunks.

J. In tent structures which have a platform floor, beds or bunks shall be arranged in such a fashion that no camper who might fall from a bed or bunk could fall through the sides of the tent to the ground below.

K. There shall be provision in each sleeping unit for storage of the camper's clothing and personal belongings.

L. No camper shall sleep in the same room or tent with any person of the opposite sex excepting members of his/her immediate family.

M. In a primitive camp or travel-trip camp, adequate shelters such as a tent shall be available for each child. There shall be fifteen square feet per occupant in each tent or shelter.

N. Reasonable insulation shall be provided from cold/dampness by means of such things as a ground cloth beneath the tent.

7.711.73 Toilet and Bathing Facilities

A. In a resident camp there shall be one toilet for every twenty campers or fraction thereof for which the camp is licensed. Urinals may be substituted for no more than one-third of the required toilets.

B. Separate designated toilet facilities shall be provided for each sex in coed camps.

C. Installation, operation, and maintenance requirements for toilet facilities and urinals:

1. Water-flush toilets and urinals, chemical toilets, pit privies or latrines shall be provided and maintained in a clean and sanitary condition.

2. Toilets, privies, and latrines shall have tight seat covers free of splinters.

D. Hand washing facilities shall be provided throughout the camp. There shall be one basin or lavatory for each twenty campers.

E. Showers or bathtubs shall be located within buildings used for sleeping, such as cabins or dormitories, or in a centrally located shower or bathing structure.

1. There shall be one shower head or bathtub for each twenty campers or fraction thereof for which the camp is licensed.

2. Hand washing facilities shall be available in the shower or bathing area.

3. Shower or bathhouses shall be provided with vapor-proof lights enclosed in a shatterproof container.

F. All sewage disposable systems shall meet the state and local health department requirements.

G. In a primitive or travel-trip camp, the following shall be provided:

1. If the camp is not provided with privies or other acceptable- type toilets, there shall be separate designated areas; for each gender for toilet use that meets the Health Department's requirements.

7.711.74 Food Preparation Area

A. The kitchen, the food preparation process, dish and utensil washing, food storage, and all other food service areas shall be operated in compliance with the rules and regulations governing food services establishments within the State of Colorado.

B. Garbage and trash removal shall meet the requirements of the state, federal, and local ordinances.

7.711.75 General Building Safety [Ref. eff. 6/1/12]

A. Every building, structure, tent, cabin and camp premises shall be kept in good repair, and shall be maintained in a safe condition.

B. All new electrical installations shall meet standards of the National Electrical Code. All electrical work must be installed by a licensed electrical contractor with proper permits and inspections. Each electric outlet on the outside of a building shall be mounted in approved, protective weatherproof housing.

D. In buildings accommodating more than 12 persons, exit signs shall be posted at every required exit doorway and wherever otherwise required to clearly indicate the directions of egress. Exit signs shall have letters of at least five inches in height.

E. A building with an occupancy of more than twelve persons shall be provided with at least two separate and independent means of egress located as far apart as practical and in no case less than fifty percent of the largest dimension of the building.

1. In an existing building such as a cabin occupied by more than twelve but less than twenty persons, a window may be utilized as an acceptable second exit. The window must be openable and the distance from the window to the ground must not be more than four feet.

2. Each exit door shall be hung to swing in the direction of exit travel. Exiting through a food preparation area is not permitted.

F. If buildings with second stories are used by campers, there must be two widely separated exits from each floor.

G. Each fire escape from any upper level of a building must be installed in accordance with requirements of the National Fire Protection Association codes.

H. The door hardware on a door, forming part of a means of egress, shall be of a type that is non-locking against egress and operated with a single motion. The use of hooks and eyes, bolts, bars, and similar devices is prohibited on any door provided for exiting purposes or designated as an exit when camp is in use.

I. When occupancy of a building exceeds 100 persons, exit doors shall be equipped only with panic hardware.

J. The means of egress or the entire passage to free and safe ground remote from a building shall be unobstructed for easy travel conditions at all times.

K. There shall be fifteen square feet per occupant in any room having an occupant load of more than 50 persons where fixed seas are not installed and which is used for classroom, assembly, or similar purposes. The maximum occupancy shall be posted in a conspicuous place near the main exit from the room.

L. In an assembly area or classroom such as a recreation room, dining hall, chapel or gymnasium, each door from that room occupied by campers shall enter a one-hour fire-rated corridor between exits or there shall be a direct egress to the outside from each such room.

M. Where a sleeping occupancy is maintained on the floor over a basement area or on a second floor, the ceiling of the basement or first floor shall be protected with five-eighths inch United Underwriters Laboratory-listed gypsum wallboard or any other proven assembly of materials that will provide a minimum one-hour resistance to fire, unless such construction is of solid or laminated wood timbers not less than three inches in thickness and installed so as to be smoke tight.

N. Furnaces, fireplaces, heaters, or wood-burning stoves shall meet the following regulations:

1. Furnaces such as forced-air furnaces or hot water boilers must be separated from the rest of the building by one-hour fire-resistive material (see Section 7.711.75, M) provided with adequate outside combustion air, installed and maintained with safety devices to prevent fire, explosions, and other hazards.

2. Only heaters installed with permanent connections and protectors shall be used.

3. All heaters installed shall be U.L. approved and installed according to manufacturers' specifications.

4. Boilers used for hot water supply rated at over 200,000 BTU or any boiler used for building heating shall be inspected and a certificate provided as required by the Division of Labor.

5. A heater or wood-burning stove shall be located and/or protected in such a manner as to prevent injuries to occupants of the building.

6. Wood-burning stoves shall be regularly cleaned of ashes, which are immediately removed from the building and properly stored.

7. Fireplaces shall be protected by a screen or glass device.

8. Space around furnaces, heaters, and wood-burning stoves shall not be used for storage.

O. Fire hazards and combustible materials such as paper and rags shall not be permitted to accumulate upon the premises and shall not be stored near water heater, furnaces, heaters, stoves.

P. Ammunition, firearms, explosives, power tools, and special equipment involving unusual risk shall be stored in a locked place not occupied by children and shall always be under the custody and direct supervision of authorized personnel when in use.

Q. All flammables shall be stored in approved containers or storage cabinet or in a building other than buildings which children occupy.

R. Substances which may be toxic to a child if ingested, inhaled or handled, including, but not limited to, poisons, drugs, medicines, insecticides, herbicides, rodenticides, bleaches, chemicals, plastic bags and corrosive agents shall be stored in a cabinet or enclosure located in an area not used by children, stored in the original container, and properly labeled.

S. Glass doors, walls, or panels shall be clearly marked. Safety glass shall be installed when required.

T. Stairways of more than three risers shall be equipped with handrails on each side of the stairways. A stairway which is larger than 88 inches wide shall have an intermediate handrail equidistant between the two handrails.

U. All window wells and outside stairwells that are hazardous to children shall be equipped with screens or guards, which shall be attached in such a manner that they may either by removed from the inside or broken in from the outside in case of fire.

V. Premises shall be free of all hazards, including, but not linked to, old refrigerators, freestanding walls, open cisterns, grease traps, unsafe fences, worn or hazardous play equipment.

7.711.76 Fire Safety Provisions [Rev. eff. 4/1/15]

A. Any fire extinguisher used at the camp must be of a dry chemical type, hung at a level readily available to staff members, and annually inspected by an approved inspector. Indian pump backpack fire extinguishers and fire extinguishers approved for use by the U.S. Forest Services are also acceptable.

1. There must be a fire extinguisher located in the cam kitchen.

2. In each building and/or structure, there must be a fire extinguisher on each floor.

3. In tent areas, there must be a fire extinguisher located within seventy-five (75) feet of each tent or a plan approved by the department.

B. In each camp there must be a fire alarm(s) which sounds a separate and distinctly recognizable tone from all other signaling devices used by the camp. The alarm(s) must be audible throughout the occupied camp premises. The alarm device, once activated, must continue to sound automatically.

C. Within twenty-four hours after arrival at the campsite, all individuals attending the camp must be made familiar with the methods by which the fire alarm may be activated and with procedures to be followed upon notification of fire.

D. Each separate building used for sleeping campers and each multistory building must be protected by a smoke detector on each floor of the building.

E. Areas used for campfires must be cleared and must be away from overhanging branches.

F. Campfires must never be left unattended and must be thoroughly extinguished. Extinguishing equipment must be close at hand.

7.712 RULES REGULATING SCHOOL-AGE CHILD CARE CENTERS

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

7.712.1 (None) [Rev. eff. 6/1/12]

7.712.2 DEFINITIONS [Rev. eff. 6/1/07]

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

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

C. A “day camp” is a school-age child care program which operates at least four (4) hours a day primarily during one season of the year, and during school vacation periods for children between five (5) and eighteen (18) years of age, which accepts registrations for finite, not necessarily contiguous sessions. Programs may operate daily between 6:00 a.m. and 10:00 p.m. Day camp programs may incidentally offer not more than two overnight stays each camp session. The day camp provides a creative recreational and educational opportunity through group oriented programs. The day camp utilizes trained leadership and the resources of the natural surroundings to contribute to each child’s mental, physical, social, and personal growth.

The types of day camps are as follows:

1. A “building based day camp” is a child care program that provides care for five (5) or more children who are between five and eighteen years of age. The day camp is located in a building which, along with the outdoor surroundings, is regularly used by the program.

2. A “mobile day camp” is a child care program that provides programming for five (5) or more children who are at least 7 years of age or who have completed the first grade. Children move from one site to another by means of transportation provided by the governing body of the program. The program uses no permanent building on a regular basis. Mobile day camp programs may operate in multiple sites under one license.

3. An “outdoor-based day camp” is a child care program that provides care or five (5) or more children who are at least 7 years of age or have completed the first grade. The day camp uses no permanent building on a regular basis and provides programming in a permanent outdoor or park setting.

7.712.3 POLICIES AND PROCEDURES

7.712.31 Statement of Policies and Procedures [Rev. eff. 6/1/07]

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

1. The center's purpose and its philosophy on child care.

2. The ages of children accepted.

3. Services offered for special needs children in compliance with the Americans with Disabilities Act (see Section 7.701.14, General Rules for Child Care Facilities).

4. The hours and dates when the center is in operation, specific hours during which special activities are offered, holidays when the center is closed.

5. The policy regarding severe weather.

6. The procedure concerning admission and registration of children.

7. An itemized fee schedule.

8. The procedure for identifying where children are at all times.

9. The policy on discipline.

10. The procedure, including notification of parents and guardians, for handling children's illnesses, accidents, and injuries.

11. The procedures for handling lost children and other emergencies at all times, including during field trips. An outline of a plan of action in case of natural disaster is found at Section 7.712.83, G.

12. The procedure for transporting children, if applicable, including transportation arrangements and parental permission for excursions and related activities.

13. The written policy and procedure governing field trips, television and video viewing, and special activities, including the staff's responsibility for the supervision of children.

14. The policy on children's safety related to riding in a vehicle, seating, supervision, and emergency procedures on the road.

15. The procedure for releasing children from the center only to persons for whom the center has written authorization.

16. The procedures followed when a child is picked up from the center after the closing hours of the center or not picked up at all, and the procedure to ensure that all children are picked up before the staff leave for the day.

17. The procedure for caring for children who arrive late to the center and their class/group is away from the center on a field trip or excursion.

18. The procedure for administering children's medicines and delegation of medication administration in compliance with Section 12-38-132, C R S., of the "Nurse Practice Act."

19. The procedure concerning children's personal belongings and money.

20. The policy concerning meals and snacks.

21. The policy regarding visitors.

22. The procedure for filing a complaint about child care (see Section 7.701.5. General Rules for Child Care Facilities).

23. The policy regarding the reporting of child abuse (see Section 7.701.5 General Rules for Child Care Facilities).

24. The policy regarding the child care facilities' responsibility to notify parents or guardians when the program will no longer be able to serve children.

25. The policy regarding the parent's or guardian's responsibility to notify the child care program when parents or guardians withdraw their child(ren) from the program.

7.712.32 Communication, Emergency, and Security Procedures [Rev. eff. 4/1/15]

A. The center must notify the parents or guardians in writing of significant changes in its services, policies, or procedures so that they can decide whether the center continues to meet the needs of the child.

B. For security purposes, a sign-in/sign-out sheet or other mechanism for parents and guardians must be maintained daily by the center It must include, for each child in care, the date, the child's name, the time when the child arrived at and left the center, and the parent or guardian's signature or other identifier With parent or guardian's approval, a child may sign in and out instead of the parent or guardian. Staff must verify attendance periodically throughout the day.

C. Each center is required to have a written mission statement. This statement must be kept on file, updated periodically, and made known to staff and to parents and guardians, and must be available during the licensing inspection.

D. During the hours the center is in operation, the center must provide an office and/or monitored telephone number known to the public and available to parents in order to provide immediate access to the center.

E. If the center has a permanent site, there must be a telephone at the site.

F. Centers must have an established means of communication between staff and the program office when children are being transported or are away from the permanent site on a field trip.

G. Emergency telephone numbers must be posted at each permanent site and taken on all field trips and during mobile school-age child care programs. The emergency numbers must include, at a minimum, 911, if available, or rescue unit if 911 isn't available; the clinic or hospital nearest to the activity location; ambulance service; fire, police, and health departments; and Rocky Mountain Poison Control.

H. Mobile school-age child care programs must have a way to be contacted while in transit.

I. The center must be able to provide emergency transportation to a health care facility at all times either via program vehicle or the emergency medical services system.

J. The director of the center or the director's delegated substitute must have a means for determining at all times who is present at the center.

K. A written policy regarding visitors to the center must be posted and a record maintained daily by the center that includes at a minimum the visitor's name and address and the purpose of the visit. At least one piece of identification must be inspected for individuals who are strangers to personnel at the center.

L. With the exception of children who are allowed to sign themselves in and out, the center must release the child only to the adult(s) for whom written authorization has been given and is maintained in the child's record (see Section 7.712.81). In an emergency, the child may also be released to an adult for whom the child's parent or guardian has given verbal authorization. If the staff member who releases the child does not know the adult, identification must be required to assure that the adult is authorized to pick up the child.

M. The center must have a procedure for dealing with individuals not authorized by the parent or guardian of a child who attempts to have the child released to them.

N. The center must have a written emergency procedure that explains how it will report communicable illnesses to the local, health department pursuant to regulations of the State Department of Public Health and Environment.

O. The center must have a written procedure for closing the center at the end of the day to ensure that all children are picked up.

7.712.4 PERSONNEL

7.712.41 General Requirements for All Personnel [Rev. eff. 6/1/12]

A. All personnel of the center must demonstrate an interest in and a knowledge of children and concern for their proper care and well-being.

B. All personnel must be free from illness and conduct that would endanger the health, safety, or well-being of children.

C. The center must determine if any staff person who works at the center has ever been convicted of a crime as listed at Section 7.701.33, D, 5 or 6, of the General Rules for Child Care Facilities.

D. A criminal record check request for all in-state staff must be submitted to the Colorado Bureau of Investigation within five (5) days that an individual is employed by the center. The personnel file of in-state member of the center must contain clearance or arrest report from the Colorado Bureau of Investigation resulting from the caregiver's criminal record check. The requirement for a criminal record check is found in Section 7.701.33 of the General Rules for Child Care Facilities. Seasonal staff that indicate that they will not be returning to the program for employment shall be removed from the CBI list for the program.

E. A request for a review of the State Department's automated system must be made within ten (10) working days of each staff member's first day of employment. The method for making the request is found in 7.701.32 (General Rules for Child Care Facilities).

F. Each staff member and volunteer must furnish the center with information concerning chronic health problems, any known drug reactions, allergies, medications being taken, and/or other health problems that could affect the staff member's ability to perform the duties of the job assigned.

G. The duties and responsibilities of each staff position and the lines of authority and responsibility within the center must be in writing. At the time of employment, staff members must be informed of their duties and assigned a supervisor.

H. Prior to working with children, the staff member must read and be instructed on the policies and procedures of the center, including those relating to hygiene, sanitation, food preparation practices, proper supervision of children, and reporting of child abuse. Staff members must sign a statement indicating that they have read and understand the center's policies and procedures.

I. Day camp staff shall receive a minimum of fifteen (15) hours of pre-camp training, not including First Aid and CPR. Pre-camp training must include all training activities that staff participate in as a whole. Training should include, but not be limited to, familiarizing staff with the camp mission, site emergency policy and procedures, how to supervise and facilitate activities with campers, and health care policies and procedures. Policies and procedures must be in writing. Staff will be supervised and additional training may be provided if needed. Day camps must have a system in place to provide staff the essential training information for late hires.

J. The center must have a staff development plan that includes a minimum of fifteen (15) clock hours of training each year for all staff. This requirement does not apply to day camps. This training must relate to one or more of the following general areas: child growth and development, healthy and safe environment, developmentally appropriate practices, guidance, family relationships, cultural and individual diversity, and professionalism. The fifteen (15) clock hours of training does not include recertification in First Aid and CPR.

K. All staff must complete training in universal precautions within the first three (3) months of employment.

7.712.42 Required Personnel and Qualifications [Rev. eff. 6/1/12]

A. Program Director

Each center must have an on-site program director who shall be at least twenty one (21) years of age. The program director must have demonstrated to the hiring authority maturity of judgment, administrative ability, and the skill to appropriately supervise and direct school-age children in an unstructured setting.

1. The program director must have verifiable education or training in work with school-age children in such areas as recreation, education, scouting, or 4-H; and the program director must have completed at least one of the following qualifications:

   a. A four (4) year college degree with a major such as recreation, education with a specialty in art, elementary or early childhood education, or a subject in the human service field.

   b. Two years of college training and six (6) months of satisfactory and verifiable full-time or equivalent part-time, paid or volunteer, experience, since attaining the age of eighteen (18), in the care and supervision of 4 or more children.

   c. Three years of satisfactory and verifiable full-time or equivalent part-time, paid or volunteer, experience, since attaining the age of 18, in the care and supervision of four (4) or more children. The program director must complete six (6) semester hours, nine (9) quarter hours in course work from a regionally accredited college or university, or forty (40) clock hours of training in course work applicable to school-age children within the first nine (9) months of employment.

2. The program director is responsible for planning and implementing the program and supervising the staff.

B. Program Leaders

Program leaders must be at least eighteen (18) years of age and demonstrate an ability to work with children. Program leaders must have at least three (3) months of full-time or equivalent part-time satisfactory and verifiable experience with school-age children.

C. Program Aides

1. Program aides shall be at least sixteen (16) years of age. Program aides shall work directly under the supervision of the program director or program leaders and shall never be left alone with children.

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

D. Employment of maintenance staff, including kitchen service, grounds, and housekeeping employees less than sixteen (16) years of age, must be in compliance with Colorado labor laws.

E. First Aid and CPR Certified Staff

For every thirty (30) or fewer children in attendance, there must be at least 1 staff member who holds a current Department-approved First Aid and safety certificate that includes CPR for all ages of children. Such individuals must be with the children at all times when the center is in operation. If children are at different locations, there must be a First Aid and CPR qualified staff member at each location. In a day camp, all staff that are eighteen (18) years of age and over are required to have a current First Aid and CPR certificate from a nationally recognized provider. Uncertified staff must work with another certified staff member.

7.712.43 Required Staff Supervision [Rev. eff. 6/1/07]

A. A program director must be present at the center at least 60% of any day the center is in operation. An individual who meets one of the following requirements must be present for the remaining 40% of the day:

1. A program leader who is at least 21 years of age and has at least 3 months of full-time or equivalent part time verifiable experience working with children.

2. A program leader who is at least 18 years of age and has at least 1 year full-time or equivalent part-time verifiable experience working with children.

3. Two program leaders who are at least 19 years of age and have at least 3 months of full-time or equivalent part-time verifiable experience working with children.

B. If the program director cannot be present 60% of any day the center is in operation, an individual who meets program director qualifications must substitute for the director.

C. There must be at least 1 program leader providing supervision with each group of 30 or fewer children cared for by the center. At all times, staff must be actively supervising children.

D. There must be 1 staff member for each 15 children in attendance.

E. At any time when 9 or more children are present at the center, there must be at least 1 program leader actively supervising children and another responsible person at least 16 years of age on the premises. When 8 or fewer children are present, there must be at least 1 program leader on duty and a second staff member on call and immediately available in an emergency.

F. At all times, school-age child care personnel must be actively supervising the children.

G. In a mobile day camp program or an outdoor-based day camp program, the staff ratio given at Section 7.712.43, C and D, must be maintained, but there must be at least two (2) program leaders at all times with the children.

7.712.44 Volunteers [Rev. eff. 11/1/98]

A. If volunteers are used by the center, there must be a clearly established policy in regard to their function, orientation, and supervision.

B. If volunteers are counted in the staff to child ratio, references must be obtained for them consistent with Section 7.712.41, D.

C. Volunteers must have qualifications suitable to the tasks assigned.

D. Volunteers must be:

1. Directly supervised by a program director or program leader.

2. Given instruction as to the center's policies and procedures.

7.712.5 CHILD CARE SERVICES

7.712.51 Admission Procedure [Rev. eff. 6/1/07]

A. The center can accept children only of the ages for which it has been licensed. At no time can the number of children in attendance exceed the number for which the center has been licensed.

B. Admission procedures must be completed prior to the child's attendance at the center and must include:

1. Completion of the registration information for inclusion in the child's record, as required in Section 7.712.81.

2. Providing the parent(s) or guardian(s) with a copy of the center's policies and procedures.

7.712.52 Health Care [Rev. eff. 6/1/07]

A. Statements of Health Status

1. At the time of admission, health information must be provided for every child entering the center, including any known drug reactions and allergies, medications being taken, and any special diets required. The name, address, and phone number of the child's physician and dentist must be provided.

2. At the time of admission, information regarding all immunizations a child has had, including month and year each immunization was administered, must be provided to the center, or a plan must be developed with the parent or guardian for submitting the information within thirty (30) days of enrollment. Immunizations must be recorded on the Certificate of Immunization or alternate approved immunization form supplied and approved by the Colorado Department of Public Health and Environment (CDPHE) and kept on file at the center.

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

B. Emergency Procedures

1. Written authorization for emergency medical care must be in the child's file as required in Section 7.712.81.

2. If a child requires medical attention away from the program site, the child's parent(s) or guardian(s) must be notified, and necessary medical care sought from a licensed physician or medical facility.

3. Children too ill to remain in the group must be comfortably cared for and supervised until they can be taken home or suitably cared for elsewhere. For building-based programs, a cot or mat, plus a sheet and blanket must be provided.

4. A responsible staff member must be present or within hearing distance of any ill child.

5. First aid supplies must be available at the program site and in all vehicles operated by the center.

C. Medication

1. Prescription and non-prescription (over-the-counter) medications for eyes or ears, all oral medications, topical medications, inhaled medications, and certain emergency injections can be administered only with the written order of a person with prescriptive authority and with written parental consent. Centers may administer medications for chronic health conditions or emergency situations.

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

   - Child's name

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

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

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

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

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

5. All child care staff designated by the center director to give medications must complete the 4-hour Department-approved medication administration training and have current First Aid and universal precautions training.

6. Medications must be kept in an area inaccessible to children. Controlled medications must be counted and safely secured, and specific policies regarding their handling require special attention in the center's policies. Access to these medications must be limited.

7. Children are not allowed to bring medications to child care unless accompanied by a responsible adult. If a medication is out of date or left over, parents are responsible for picking up the medication. If parents do not respond, the center is responsible for the disposal of medications according to center policy and procedures. Disposal of medications must be documented.

8. A written medication log must be kept for each child. This log is part of the child's records. The log must contain the following:

   - Child's name
   - Name of the medication, dosage, and route
   - Time medication is to be given
   - Special instructions
   - Name and initials of the individuals giving the medication
   - Notation if the medication was not given and the reason

9. Topical preparations such as petroleum jelly, diaper rash ointments, sunscreen, bug sprays, and other ointments may be administered to children with written parental authorization. These preparations may not be applied to open wounds, or broken skin unless there is a written order by the prescribing practitioner.

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

D. Sun Protection

1. The center must supervise that sunscreen is applied to children prior to outside play or outside activities unless parents provide written notice that they have applied the sunscreen themselves. A doctor's permission is not needed to use sunscreen at the center.

2. When supplied for an individual child, the sunscreen must be labeled with the child's first and last name.

3. If sunscreen is provided by the center, parents must be notified in advance, in writing, of the type of sunscreen the center will use.

4. Children may apply sunscreen to themselves under the direct supervision of a staff member.

E. Control of Communicable Illness

1. When children show signs of severe or communicable illness, they must be separated from other children, the parent(s) or guardian(s) notified, and a doctor or medical facility consulted as needed regarding treatment.

2. Staff members with a communicable illness must not be permitted to work or have contact with children or other staff members if the illness could be readily transmitted during normal working activities.

3. When children have been diagnosed with a communicable illness such as hepatitis, measles, mumps, meningitis, diphtheria, rubella, salmonella, tuberculosis, giardia or shigella, the center must immediately notify the local or state department of health, all staff members, and all parents and guardians of children in care. Children's confidentiality must be maintained.

7.712.53 Personal Hygiene

A. Hand Washing/Clothing

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

B. Diapering

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

1. Be a minimum of 36 by 18 inches in size and large enough to accommodate the size of the child.

2. Have a place inaccessible to children for storing all diaper change supplies and disinfecting solutions and products.

3. Have a sufficient supply of diapers at all times.

7.712.54 Food and Nutrition

A. Drinking water must be freely available to children at all times.

B. Nutritious snacks must be served at suitable intervals.

C. Children who are at the center for more than 4 hours, day or evening, or come directly to the center from a morning kindergarten class must receive a meal.

1. If the center provides a meal, it must meet one third of the child's daily nutritional needs.

2. The center staff must check lunches brought from children's homes to determine if they meet one third of the child's daily nutritional needs.

3. If the child fails to bring a meal, or if the meal meets less than one-third of the child's daily nutritional needs, the center must supply an adequate meal.

D. All food prepared by the center must be from sources approved by the health authority. All food must be stored, prepared, and served in such a manner as to be clean, wholesome, free from spoilage, and safe for human consumption. Home canned foods cannot be served.

7.712.55 Discipline

A. Discipline must be appropriate and constructive or educational in nature and may include such measures as diversion, separation of the child from problem situations talking with the child about the situation, or praise for appropriate behavior

B. Children must not be subjected to physical or emotional harm or humiliation

C. The director must not use, or permit a staff person or child to use, corporal or other harsh punishment, including but not limited to pinching, shaking, spanning punching, biting, kicking, rough handling, hair pulling, or any humiliating or frightening method of discipline.

D. Discipline must not be associated with food, rest, or toileting No child should be punished for toileting accidents. Food must not be denied to or forced upon a child as a disciplinary measure.

E. Separation, when used as discipline, must be brief and appropriate for the child's age and circumstances. The child must be in a safe, lighted, well-ventilated area and be within hearing and vision of a staff member. The child must not be isolated in a locked room, bathroom, closet, or pantry.

F. Verbal abuse and derogatory remarks about the child are not permitted.

G. Authority to discipline must not be delegated to other children, and the center must not sanction one child punishing another child.

7.712.56 Transportation [Rev. eff. 6/1/07]

A. Transportation Provided by the Center

1. The center is responsible for any children it transports and must abide by applicable State and Federal motor vehicle laws.

2. The center must obtain written permission from parents or guardians for any transportation of their child during child care hours.

3. The number of staff members who accompany children when being transported in the vehicle must meet the child care staff ratio found at Section 7.712.43. The driver of the center vehicle is considered a staff member.

4. Children must not be permitted to ride in the front seat of a vehicle unless they are secured in a seat belt that conforms to all applicable Federal Motor Vehicle Safety Standards. Children must remain seated while the vehicle is in motion.

5. Children must be loaded and unloaded out of the path of moving vehicles.

6. Children must not be permitted to stand or sit on the floor of a moving vehicle, and their arms, legs, and heads must remain inside the vehicle at all times.

7. Transportation arrangements for school-age children must be by agreement between the center and the children's parents, i.e., whether the children can walk, ride a bicycle or travel in a car. The center must monitor the children to be sure they arrive at the center when expected and follow up on their whereabouts if they are late. Written permission from parents or guardians for their children to attend community functions after school hours must include agreements regarding transportation.

8. Prior to a field trip or other excursion, the center must obtain information on liability insurance from parents and staff who transport children in their own cars and verify that all drivers have valid driver's licenses.

B. Requirements for Vehicles

1. Any vehicle used for transporting children to and from the center or during program activities must meet the following requirements:

   a. The vehicle must be enclosed and have door locks.

   b. The seats of the vehicle must be constructed and installed according to the vehicle manufacturer's specifications.

   c. The vehicle must be kept in satisfactory condition to assure the safety of occupants. Vehicle tires, brakes, and lights must meet safety standards set by the Colorado Department of Revenue, Motor Vehicle Division.

   d. Seating must be comfortable, with a seat of at least 10 inches wide for each child.

2. In passenger vehicles, which include automobiles, station wagons and vans with a manufacturer's established capacity of 16 or fewer passengers and less than 10.000 pounds, the following is required:

   a. Each child must be restrained in an individual seat belt.

   b. Two or more children must never be restrained in one seat belt.

   c. Lap belts must be secured low and tight across the upper thighs and under the belly.

   d. Children must be instructed and required to keep the seat belt properly fastened and adjusted.

3. In vehicles with a manufacturer's established capacity of 16 or more passengers, seat belts for passengers are not required, but shall be used if provided.

C. Requirements for Drivers of Vehicles

1. All drivers of vehicles transporting children must comply with applicable laws of the Colorado Department of Revenue, Motor Vehicle Division, and ordinances of the municipality in which the child care program is operated.

2. All drivers of vehicles owned or leased by the center in which children are transported must have a current Department-approved First Aid and safety certificate that includes CPR for all ages of children

3. In each vehicle used to transport children, drivers must have access to a First Aid kit.

4. The driver must ensure that all doors are secured at all times when the vehicle is moving.

5. The driver must make a good faith effort to ensure that each child is properly belted throughout the trip.

7.712.6 PROGRAM ACTIVITIES

7.712.61 Activity Schedules [Rev. eff. 6/1/07]

A. The center must provide parents or guardians with a list of activities it offers.

B. Parents or guardians must be given the opportunity to indicate to the staff of the center if they do not want their child to participate in an activity.

C. Parents or guardians must be notified in advance of all activities that will occur away from the center.

D. Television viewing, including videos, should not be permitted without the approval of a child's parents, who must be advised of the center's policy regarding television and video viewing.

E. A mobile day camp program must establish a daily itinerary and make available a copy to each child's parent or guardian. A copy must also be or file at the program's headquarters. The itinerary should be followed as closely as possible. In case of an emergency or change in the itinerary, the headquarters of the mobile day camp must be notified immediately. Parents must be instructed to contact the main headquarters to determine the exact location of their child.

7.712.62 Equipment and Materials [Rev. eff. 6/1/07]

A. In a building based school-age child care center, a rest time and rest equipment must be provided for school-age children who require a rest time.

B. Children at the center must have access to age-appropriate materials and equipment from at least the following categories:

1. Activity supplies

2. Manipulatives and games

3. Recreation equipment

4. Library items

5. Science equipment and materials

C. Children must wear helmets when riding scooters, bicycling, skateboarding, or rollerblading.

7.712.63 Field Trips [Rev. eff. 11/1/98]

A. The program may include field trips, where children and staff leave the center to visit some site in the community. On a field trip or during a mobile school-age child care program:

1. Staff-child ratios must be maintained at all times.

2. Children must be actively supervised at all times.

3. An accurate itinerary must remain at the headquarters/office of the center.

4. The staff must have with them on a field trip the following information about each child: name, address, and phone number of the child's physician or other appropriate health care professional and the written authorization from parent(s) or guardian(s) for emergency medical care.

B. A list of all children and staff on a field trip must be kept at the headquarters of the center.

7.712.64 - 7.712.66 None

7.712.7 BUILDING AND FACILITIES

7.712.71 Facility Requirements [Rev. eff. 6/1/07]

A. The mobile day camp program and the outdoor-based day camp program may use as a gathering place a public park or playground if the program primarily includes field trips away from the gathering place. Such programs must have a contingency plan for facilities to use during increment weather. The plan must be available to parents on a daily basis.

B. If a room or rooms inside a building are used for indoor care, the following ratio must be maintained: open indoor play space of at least 30 square feet of floor space per child, including space for readily movable furniture and equipment Indoor space is exclusive of kitchen, toilet rooms, office, staff rooms, hallways and stairways, closets, laundry rooms, furnace rooms, and space occupied by permanent built-in cabinets and permanent storage shelves.

C. When a building is being used during the summer months by a center specifically as a gathering place at the beginning and end of the day, the 30 square feet requirement need not apply. The total amount of time during which the number of children present may exceed the 30 square feet requirement must not exceed 3 hours. This time must be divided evenly between the morning and the evening.

D. The building based school-age child care center must provide access to an outdoor play area. The outdoor play area may be a city park or public school ground. The play area must meet the following requirements:

1. The center must provide a total outside play area of at least 75 square feet per child for a minimum of one-third of the licensed capacity of the center or a minimum of 1500 square feet, whichever is greater.

2. Access to a shaded area, sheltered area, or inside building area must be provided at all times to guard children against the hazards of excessive sun and heat.

3. The outdoor play area must be maintained in a safe condition by removing debris, dilapidated structures, and worn and broken play equipment. The center must identify hazardous, high-risk areas. These areas must be monitored to reduce the possibility of injury and accidents.

E. A safe, comfortable place for relaxing and for sick children must be available at all times for children in care.

7.712.72 Toilet Facilities

A. Boys and girls must have separate, clearly identified toilet facilities, with toilets separated by partitions to provide privacy.

B. There must be a minimum of 1 toilet per 30 or fewer children for which the center is licensed. Hand-washing facilities must be available at the ratio of 1 sink per 30 or fewer children.

7.712.73 Food Preparation Area

Areas used for food preparation, dish and utensil washing, and storage must be in compliance with the requirements of the Colorado Department of Public Health and Environment or its local unit.

7.712.74 Fire and Other Safety Requirements [Rev. eff. 4/1/15]

A. General Requirements

1. Buildings must be kept in good repair and maintained in a safe condition.

2. Major cleaning is prohibited in rooms occupied by children.

3. Volatile substances such as gasoline, kerosene, fuel oil, and oil-based paints, firearms, explosives, and other hazardous items must be stored away from the area used for child care and be inaccessible to children.

4. Combustibles such as cleaning rags, mops, and cleaning compounds, must be stored in well-ventilated areas separated from flammable materials and stored in areas inaccessible to children.

5. Closets, attic, basement, cellar, furnace room, and exit routes must be kept free from accumulation of extraneous materials.

6. All heating units, gas or electric, must be installed and maintained with safety devices to prevent fire, explosions, and other hazards. No open-flame gas or oil stoves, unscreened fireplaces, hot plates, or unvented heaters can be used for heating purposes. All heating elements, including hot water pipes, must be insulated or installed in such a way that children cannot come in contact with them. Nothing flammable or combustible can be stored within three (3) feet of a hot water heater or furnace.

7. Indoor and outdoor equipment, materials, and furnishings must be sturdy, safe and free of hazards.

8. Equipment, materials, and furnishings, including durable furniture such as tables and chairs, must be stored in a manner that is safe for children.

9. Extension cords cannot be used in place of permanent wiring.

10. Corridors, halls, stairs, and porches must be adequately lighted. Operable battery-powered lights must be provided in locations readily accessible to staff in the event of electric power failure.

B. Fire Safety

1. Every building and structure must be constructed, arranged, equipped, maintained, and operated so as to avoid undue danger to the lives and safety of its occupants from fire, smoke, fumes, or resulting panic during the period of time reasonably necessary for escape from the building or structure in case of fire or other emergency.

2. Every building and structure must have at least two (2) exits that permit the prompt escape of occupants in case of fin; or other emergency.

3. Every exit must be clearly visible, or the route to reach it must be conspicuously indicated. Each path of escape must be clearly marked.

4. In every building or structure, exits must be arranged and maintained so as to provide free and unobstructed egress from all parts of the building or structure at all times when it is occupied. No lock or fastening to prevent free escape from the inside of any building can be installed. Only panic hardware or single-action hardware is permitted on a door or on a pair of doors. All door hardware must be within the reach of children.

5. If the building in which the center operates has a security lock on outside exit doors, the center must obtain written permission from the local fire department; and there must be a written sign attached to the door instructing staff that the security lock is not to be utilized when children are present and the center is in operation.

6. Every building and structure must have an automatic or Department-approved manually operated fire alarm system to warn occupants of the existence of fire or to facilitate the orderly conduct of fire exit drills.

7.712.8 RECORDS AND REPORTS

7.712.81 Children's Records [Rev. eff. 6/1/07]

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

1. The child's full name, age, current address, and date of enrollment.

2. Names and home and employment addresses and telephone numbers, which may include cell phone numbers, pagers, fax and e-mail of parents or guardians if available.

3. Any special instructions as to how the parents or guardians can be reached during the hours the child is at the center.

4. Names and telephone numbers of persons other than parents or guardians who are authorized to take the child from the center.

5. Names, addresses, and telephone numbers of persons who can assume responsibility for the child in the event of an emergency if parents or guardians cannot be reached immediately.

6. Name, address, and telephone number of the child's physician, dentist, and hospital of choice.

7. Health information including medical history, chronic medical problems, and immunization history.

8. A dated written authorization for emergency medical care signed and submitted annually by the parent or guardian. The authorization must be notarized if required by the local health care facility.

9. Written authorization from a parent or guardian for the child to participate in field trips and to participate in program activities, listing any possible exclusions.

10. Written authorization from a parent or guardian for the center to transport the child to and from school, whether by walking or driving.

11. Reports of serious injuries and accidents occurring during care that result in medical attention, admission to the hospital, or death of a child.

7.712.82 Staff Records [Rev. eff. 6/1/07]

A. The center office must maintain a record for each staff member, paid or volunteer, that includes the following:

1. Name, address, and birth date of the individual.

2. The date that the staff member was employed by the center.

3. Name, address, and daytime telephone number, which may include cell phone numbers, pager numbers, fax numbers and e-mail of the person(s) to be notified in the event of an emergency.

4. Verification of the staff member's training, education, and experience.

5. Copies of any first aid and CPR certification or other certification confirming the qualifications for the responsibilities assumed at the center, which may include copies of driver's licenses, college transcripts, and diplomas.

6. Copies of written references or notes of phone references, as required by Section 7.712.41, D.

7. Verification that a criminal record check with the Colorado Bureau of Investigation is in process, or a copy of the results of the staff member's criminal record check.

8. Verification that a review of the State Department’s automated system for reporting child abuse and neglect has occurred or is in process.

B. Each staff member's personnel file must contain all required information within 30 working days of the first day of employment.

7.712.83 Administrative Records and Reports

A. The following records must be on file at the center:

1. Records of enrollment, daily attendance for each child, and daily record of time child arrives at and departs from the center.

2. Current health department inspection report issued within the past 24 months.

3. Current fire department inspection report issued within the past 24 months.

4. A list of current staff members, substitutes, and staffing patterns.

B. Each center must immediately report in writing to the Department any accident or illness occurring at the center that resulted in medical treatment by a physician or other health care professional, hospitalization, or death. This report must be made within 48 hours after the accident or illness occurred.

C. A report about a fatality must include:

1. The child's name, birth date, address, and telephone number.

2. The names of the child's parents or guardians and their address and telephone number if different from those of the child.

3. Date of the fatality.

4. Brief description of the incident or illness leading to the fatality.

5. Names and addresses of witnesses or persons who were with the child at the time of death.

6. Name and address of police department or authority to whom the report was made.

D. The center must report to the Colorado Department of Public Health and Environment or its local unit any communicable illness, including but not limited to measles, mumps, diphtheria, rubella, tuberculosis, shigella, hepatitis, meningitis, salmonella, and giardia, contracted by a staff member or a child in care at the center.

E. A medical log must be maintained at the center in which is recorded the name of the child and date of instances of at least the following:

1. Administration of first aid.

2. Illness of the child while attending the center.

3. Accident requiring the child to receive medical attention.

4. The administration of any medication to a child.

F. The center must submit to the department within 48 hours a written report about any child who has been lost from the center and for whom the local authorities have been contacted. Such report must indicate:

1. The name, birth date, address, and telephone number of the child.

2. The names of the parents or guardians and their address and telephone number if different from those of the child.

3. The date when the child was lost.

4. The location, time, and circumstances when the child was last seen.

5. Actions taken to locate the child.

6. The name of the staff person supervising the child.

G. Each center must have a written plan for action in case of natural disaster, including, but not limited to, floods, tornadoes, aid severe weather; a lost or missing child; and injuries and illnesses. This plan must be on file at the center. The staff must have received training regarding the implementation of the plan prior to assuming supervisory responsibility for children. Written verification of the training must be in the staff member's personnel file.

1. The plan of action must include at least:

a. Prompt notification of parents or guardians.

b. Notification of the headquarters of the center

c. When local authorities are notified.

d. Emergency transportation.

e. Specific procedures for responding to the crisis.

2. In the case of a mobile school-age child care program or a field trip, the plan must accompany staff members.

7.712.84 Confidentiality and Retention

A. The center must maintain complete records of children and personnel as required at Sections 7.712.81, 7.712.82, and 7.712.83.

B. The confidentiality of all personnel and children's records must be maintained (see Section 7.701.7, General Rules for Child Care Facilities).

C. Personnel and children's records must be available, upon request, to authorized personnel of the department.

D. If records for organizations having more than one center are kept in a central file, duplicate identifying and emergency information for children must also be kept on file at the center attended by the child.

E. The records of children and personnel must be maintained by the school-age child care center for at least 3 years.

7.713 MINIMUM RULES AND REGULATIONS FOR SECURE RESIDENTIAL TREATMENT CENTERS [Rev. eff. 6/1/12]

All secure residential treatment centers must comply with the “General Rules for Child Care Facilities” found at Section 7.701, et seq., Section 7.714.53, et seq., and the applicable definitions in Section 7.714.1, and these “Rules Regulating Secure Residential Treatment Centers.”

7.713.1 DEFINITIONS [Rev. eff. 6/1/12]

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

7.713.11 Governing Body

A. The governing body is the individual(s), partnership, corporation, or association which holds the ultimate authority and legal responsibility for the conduct of the secure residential treatment center. The governing body shall be legally organized and authorized to do business in Colorado.

B. The governing body shall be identified by its legal name. The names and addresses of individuals who hold primary financial control, members of the board of directors, and officers of the governing body shall be disclosed fully to the Colorado Department of Human Services. The department shall be informed immediately of the names and addresses of the new individuals.

C. The Governing Body shall have by-laws which include but are not limited to the following:

1. Qualifications, rights, and duties of membership

2. Size of the governing body

3. Method of selection

4. Term of office of members and officers

5. Duties and responsibilities of officers

6. Quorum

7. Parliamentary procedures

8. Recording of minutes

9. Method of amending the by-laws

10. Conflict of interest provisions

11. Specification of the relationship of the chief executive to the governing body.

D. When the governing body does not include a board of directors, there shall be an advisory committee of at least two individuals who act in an advisory capacity to the governing body. The names of the advisory committee members shall be disclosed to the department. The advisory committee shall meet at regularly-stated intervals.

E. The minutes of the Advisory Committee or the Board of Directors shall be maintained. The minutes shall be available to the Department upon request, except that the minutes containing confidential personnel information need not be shared with the department.

F. The functions of the governing body shall include but not be limited to:

1. The appointment of an administrator who shall be responsible, according to established performance criteria, to the governing body, which shall delegate to him/her the executive authority and responsibility for the administration of the secure residential treatment center according to its defined purpose.

2. The formulation and regularly-planned review of policies and procedures to be followed by the center.

3. The provision of necessary facilities, adequate financing, qualified personnel, services, and program functions for the welfare and safety of children in accordance with these standards.

4. The adoption of a written description and organizational chart which reflects the current structure of authority, responsibility, and accountability within the center.

7.713.12 Purpose

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

7.713.13 Fiscal Management

A. A secure Residential Treatment Center shall demonstrate that it is financially sound and manages its financial affairs prudently. All funds disbursed by the center shall be expended in accordance with the program objectives as specified by the governing body.

B. There shall be a written policy of fiscal management which includes an annual budget, collection, safeguarding and disbursement of monies, internal controls, petty cash, check signatures, and fiscal system accounts for all income and expenditures on an ongoing basis.

C. There shall be an annual financial audit conducted independent of the center.

D. If a center has a juvenile benefit fund, there shall be written policy and procedure which govern its operation.

E. There shall be a written policy and procedure for the management of personal funds of the resident which include accounting procedures to assure that the youth's funds are secured and the resident will have access to his/her funds at the time of discharge.

F. There shall be a written policy and procedure to regulate the operation of a youth's commissary, which includes but is not limited to inventory and accounting procedures for the commissary.

7.713.14 Insurance

A. Every center shall carry public liability insurance. The applicant or licensee shall submit to the Department of Human Services the amount of the insurance and the name and the address of the insurance company providing the insurance for the facility. Information about the insurance should be maintained at the facility.

B. If a center operates its own transportation vehicles, it shall carry insurance in compliance with the minimum limits required by the Colorado Revised Statutes, Title 10, Article 4.

C. The center shall carry workman's compensation and unemployment insurance as required by law.

7.713.2 CHILD CARE SERVICES

7.713.21 Admission Policy and Procedures [Rev. eff. 6/1/12]

A. Admissions shall be in keeping with the stated purpose of the Secure Residential Treatment Center and shall be limited to youth who are adjudicated delinquent and who are guilty of an offense which would be a crime if committed by an adult.

B. The secure residential treatment center shall have a written admission policy which shall include but not be limited to the following:

1. Policies and procedures related to intake.

2. The age range and sex of the youth.

3. The youth's needs, problems, circumstances, or patterns of behavior best addressed by the center's program.

C. The written description of admission policies and criteria shall be provided to referring agencies upon request and shall be available to the parent(s) or guardian of any youth referred for placement.

D. A Secure Residential Treatment Center shall accept a youth into care only after an evaluation of presenting problems in areas such as social, physical health, mental health, education, and psychological concerns.

E. A secure residential treatment center shall obtain an account of the legal aspects of the youth's case, summary of the offense history, social, health and family history, psychological evaluation, developmental assessment, mental health evaluation. Educational records shall be obtained. As much of this information as possible shall be obtained prior to admission, but the total evaluation shall be completed within one month after admission.

F. There shall be a placement agreement with the placement agency. The placement agreement shall include but not be limited to the following:

1. A delineation of the respective roles and responsibilities of all agencies and persons involved with the youth and his/her family.

2. Commitment order of the court.

3. Written authorization from the parent or custodian to obtain medical care for the youth.

4. Description of mutual expectations regarding program, records, financial agreements, general contractual agreements and reporting requirements.

G. Prior to placement, approval shall be obtained from the Colorado Department of Human Services, the Colorado Deputy Compact Administrator of the Interstate Compact on the Placement of Children (ICPC) for any youth, whose legal jurisdiction rests in a state other than Colorado.

H. There shall be a written procedure for classifying youth which includes the level of risk presented, the type of housing required, participation in facility and community programs, and the youth's special needs. The procedure shall be reviewed annually.

I. When a new resident arrives at the facility, the following shall occur

1. A search shall be completed of the youth and his/her possessions. There shall be a disposition of the youth's personal property. Any items held by the center's administration shall be recorded, with a copy of the record maintained in the youth's file and a copy given to the youth.

2. Each youth shall shower; each youth shall receive clothing, personal hygiene articles, and hair care services as necessary. The youth's personal clothing shall be washed or cleaned as appropriate and returned to the youth as soon as possible.

3. Each youth shall be assigned an identification number and personal data shall be recorded.

4. A medical screening shall be performed by a health trainee or qualified health care personnel on each youth upon arrival pursuant to Section 7.713.31, C.

5. The youth shall be classified according to the written procedure and placed in an appropriate situation within two weeks of admission. Information gathered during classification shall be shared with staff members who must make determinations for the child.

6. There shall be a program, which is carried out with the youth, during the days while classification is occurring.

7. The youth shall be given an orientation. If the youth does not understand English, the orientation is to be in the youth's own language. Completion of orientation is documented by a statement signed and dated by the youth. Orientation shall include but is not limited to the following:

   a. A tour of the facility including fire escape routes and exits.

   b. A copy of written rules and regulations of the facility which include but are not limited to daily schedule, medical services, discipline, mail, visitation, grievance, and communication procedures.

   c. A discussion about the procedures to assure the youth's understanding.

   d. Assistance in notifying family members as to his/her arrival at the center and procedure for mail and visiting.

   e. Notifying the individual, legal custodian, and if appropriate, the individual's family and obtaining authorizations from the legal custodian to perform physical management, restraint and seclusion as delineated in Section 7.714.53.

J. The total number of residents admitted to the Secure Residential Treatment Center shall not exceed the licensed capacity.

7.713.22 Youth Rights and Grievance Procedures

A. Each licensed center shall have written policy and procedure which addresses and insures the availability of each of the following rights for residents:

1. No youth shall be subject to discrimination based on race, religion, national origin, sex, or physical handicap.

2. There is equal access to programs and services for male and female youth in co-correctional centers.

3. Each youth has the right to reasonable enjoyment of privacy.

4. Each youth has the right to receive appropriate and reasonable adult guidance, support, and supervision.

5. No youth shall be subjected to corporal or unusual punishment, humiliation, mental abuse, or punitive interference with the daily functions of living, such as eating or sleeping.

6. Each youth has the right to be protected from all forms of sexual exploitation.

7. Each youth has the right to receive adequate and appropriate medical care.

8. Each youth has the right to receive adequate and appropriate food, clothing and housing.

9. Each youth has the right to live in clean, safe surroundings.

10. Each youth has the right to participate in an educational program which will maximize his/her potential.

11. Each youth shall have the right to communicate or correspond with persons or organizations subject only to the limitations necessary to maintain facility order and security.

12. Each youth shall have the right to participate in religious services and religious counseling on a voluntary basis, subject only to the limitations necessary to maintain order and security.

13. Each youth shall have reasonable access to the general public through the communications media, subject only to the limitations necessary to maintain order and security and protect the juvenile's rights. Media requests for interviews and juvenile consents shall be in writing.

14. No youth shall be required to participate in uncompensated work assignments unless the work is related to housekeeping, maintenance of the facility or grounds, personal, hygienic needs, or the work is part of an approved vocational or training program.

15. Each youth shall have access to recreational opportunities and equipment, including, when the climate permits, outdoor exercise.

16. Each youth has the right of access to the courts.

17. Each youth has the right to assistance in making confidential contact with attorneys and the attorneys' authorized representatives; such contact includes, but is not limited to, telephone communications, uncensored correspondence, and visits.

18. Each youth has the right to determine the length and style of hair, except in individual cases where such restrictions are necessary for reasons of health and safety.

19. Each youth has the right to keep facial hair, if desired, except in individual cases where such restrictions are necessary for reasons of health and safety.

B. If the secure residential treatment center enforces any restrictions upon the youth's rights, the center shall:

1. Inform the youth of the conditions of and reasons for restriction or termination of his/her rights.

2. Place a written report summarizing the conditions of and reasons for restriction or termination of the youth's rights in that youth's case record.

C. A center shall not bar a youth's attorney, clergyman, or an authorized representative of the responsible placing agency from visiting, corresponding with, or telephoning the child.

D. Written policies and procedures pertaining to visiting, mail and other forms of communication shall be established and implemented to encourage and maintain family and other relationships while ensuring the protection of the youth, staff and program from unreasonable and unnecessary intrusions and disruptions. Policies and procedures shall address, but not be limited to, the following:

1. Visits of the youth with relatives, friends, or others interested in his/her welfare, unless in the judgment of treatment staff and placement agency it would be detrimental to the youth and/or his family.

2. Reasonable access to the telephone to make and receive personal calls by youth.

3. The forwarding of first class letters and packages after transfer or release.

4. Reasonable access to publications by youth.

5. No limit on the volume of mail a youth may send or receive, except when the center provides postage or when there is clear and convincing evidence to justify such limitations.

6. Youth's letters, both incoming and outgoing, are not read, except where there is clear and convincing evidence to justify such actions; if correspondence is read, the youth is informed in advance and is present when the letter is opened; and the action is documented.

7. Inspection of youth's letters or packages for money or contraband.

8. All cash received through the mail is held for the youth in accordance with the procedures of the center.

9. Incoming and outgoing mail is forwarded within 24-hours and packages are forwarded within 48-hours, excluding weekends and holidays

10. Youth are permitted to send sealed letters to a specified class of persons and organizations, including but not limited to courts, counsel, officials of the confining authority, administrators of grievance systems, and officials of the placing agency.

11. The center shall provide postage for the mailing of a minimum of two letters per week for each youth, if requested, excluding legal correspondence.

E. The secure residential treatment center shall establish a written grievance procedure which provides adequate due process safeguards, spells out an appeal process of at least one level of appeal, and assures that youth are entitled to report any grievance and shall not be subject to any adverse actions as a result of filing the grievance.

1. Grievance procedures shall be processed without alteration, interference, or unreasonable delay.

2. This grievance procedure shall be made available and explained to each resident as provided for in the admission procedures.

3. If a youth files a grievance, it shall be recorded in the youth's record along with the investigation findings and resulting action taken by the center.

7.713.23 Program Description and Individual Treatment Plan [Rev. eff. 6/1/12]

A. A secure residential treatment center shall have a written overall program description which is submitted to the Colorado Department of Human Services for review prior to original licensing. Any significant change in this description shall be submitted to the licensing authority for review prior to implementation. The written description shall include the following:

1. The position title and qualifications of the person who has overall responsibility for the treatment program.

2. Staff responsibility for planning and implementation of the treatment procedures and techniques.

3. Staff competencies and qualifications.

4. The range of services and techniques which shall include at least modes of therapy, behavior management, physical management, restraint and seclusion, education, medical and recreation.

B. Within thirty (30) days of admitting a youth into care, a secure residential treatment center shall conduct a comprehensive assessment of the youth.

1. The assessment shall be conducted by a planning team. This team shall include persons responsible for implementing the treatment plan on a daily basis. At least one member of the team shall have a graduate degree in psychology, psychiatry, social work, or counseling plus two years of treatment-oriented experience.

2. The planning team shall complete an assessment in at least the following areas:

a. Social History

b. Medical and Dental status

c. Education

d. Personal/Social development

e. Family relationships

f. Vocational training

g. Recreation

h. Life skills development

i. Religious interests

j. Mental health

k. Delinquency history

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

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

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

   a. The youth;

   b. His/her parent(s) or guardian, if available and unless contraindicated;

   c. Representative(s) of the placing agency;

   d. Other persons significant in the youth's life.

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

   a. A statement of long-term and short-term goals to be achieved by the youth and the method to be used for evaluating the youth's progress.

   b. Strategies for strengthening positive family relationships.

   c. Specification of the daily activities, including education and recreation, to be pursued by the program staff and the child in order to attempt to achieve the stated goals.

   d. Specification of therapeutic and/or any specialized services that will be provided directly or arranged for, frequency of services, and measures for ensuring their proper integration with the child's ongoing program activities.

   e. Goals and preliminary plans for discharge and aftercare.

   f. Identification of all persons responsible for implementing or coordinating implementation of the plan.

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

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

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

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

E. If an individual treatment plan requires the individual to be placed in seclusion for more than twenty-four (24) hours, the individual:

1. Shall be afforded living conditions and rights approximating those available to the general population, such as one hour of large muscle activity every twenty-four hours, the use of toilet and shower, the receipt and sending of mail, and the same meals as the general population.

2. Shall receive a counseling visit as soon as possible and a visit at least once every twenty-four hours, and an administrative review of the use of seclusion by the facility director or designee, who was not involved in the incident every twenty-four hours.

A record shall be kept pursuant to Section 7.714.53 and include documenting the actions taken while operating under this provision.

7.713.24 Discipline, Physical Management, Restraint, and Seclusion [Rev. eff. 6/1/12]

A. Discipline shall be constructive or educational in nature and may include diversion, withholding of privileges, separation from problem situation, talk with the youth about the situation, praise for appropriate behavior, physical management, and seclusion. Youth shall not be subjected to physical harm or humiliation.

B. A secure residential treatment center shall have written policies and procedures regarding discipline and control, and pursuant to Section 7.714.53, written policies and procedures regarding physical management, restraint and seclusion, which shall be explained to all youth, families, staff, and placing agencies. These policies shall include measures for positive responses to appropriate behavior.

C. A secure treatment center shall prohibit all cruel and unusual punishments including, but not limited to, the following:

1. Punishments including any type of physical hitting or any type of physical punishment inflicted in any manner upon the body such as punching, shaking, biting, or roughly handling a child.

2. Physical exercises such as running laps or push-ups, when used solely as a means of punishment, and when such activities are not approved in the treatment plan.

3. Requiring or forcing the youth to take an uncomfortable position, such as squatting or bending, or requiring or forcing the youth to repeat physical movements when used solely as a means of punishment.

4. Group punishments for misbehaviors of individuals except in accordance with the center's written policy.

5. Verbal abuse or derogatory remarks about the youth, his family, his race, religion or cultural background.

6. Excessive denial of on-grounds program services or denial of any essential program service solely for disciplinary purposes.

7. Deprivation of meals, although scheduled meals may be provid2d individually.

8. Denial of visiting or communication privileges with family solely as a means of punishment.

9. Denial of sufficient sleep.

10. Requiring the youth to remain silent for long periods of time.

11. Denial of shelter, clothing or bedding.

12. Extensive withholding of emotional response or stimulation.

13. Physical management, restraint and seclusion used as sanctions.

14. Assignment of physically strenuous or harsh work which could result in harm to the youth.

D. The secure residential treatment center shall have written rules for resident conduct which specify prohibited acts and the sanctions which may be imposed. The written rules are given to each resident and are to be fully understood by all staff.

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

F. Minor Rule Violations

1. Prior to privilege suspension or a room restriction sanction, the reasons for the sanction shall be explained and the youth shall have the opportunity to explain the behavior leading to the sanction.

   a. Whenever possible, the discussion should take place in a private setting. When a private setting is not available, the youth shall be afforded as much privacy as is possible.

   b. Staff shall advise the youth of the expectations of the program and of the youth's responsibilities in the situation.

   c. Staff shall assist the youth in developing solutions and/or strategies for correcting the problematic behavior.

2. Room restriction or time-out in an unlocked room or area away from the group for minor misbehaviors shall not exceed sixty (60) minutes, to be continuously reviewed in fifteen (15) minute intervals. At the time that the restriction is imposed, the youth shall be informed that the restriction period will last between fifteen and sixty minutes, depending on his/her interaction with staff and participation in the counseling process during the restriction period.

3. Reports are prepared on each incident of a youth's behavior infractions resulting in room restriction or loss of privileges.

4. During room restriction or time-out in or out of an unlocked room, direct staff communication shall occur at least every fifteen minutes or more frequently, depending on the youth's emotional state. During this interaction with the staff, the youth should participate with staff in determining the end of the restriction or time-out period.

G. Major Rule Violations

1. When a youth is charged with violating a major rule of the facility which could result in a disciplinary action, the youth shall be insured the right to due process prior to any disciplinary sanction being imposed.

2. In an emergency, an individual may be placed in seclusion if less restrictive alternatives have failed. Seclusion shall occur in compliance with Section 7.714.53, et seq.

3. A youth charged with a major rule violation shall be given a written notice of charge(s) of the alleged violation as soon as possible, but at least within twenty-four (24) hours of the time that the infraction is discovered.

    a. A written notice of the scheduled disciplinary hearing shall be provided to the youth at least twenty-four hours in advance of the hearing.

    b. Although notice of the time and place of the hearing must be provided to the youth at least twenty-four hours in advance, the youth may consent in writing to waive the twenty-four hour notice and to proceed with an earlier hearing time.

4. A disciplinary hearing shall be conducted within seventy-two (72) hours of the discovery of an alleged violation.

5. The youth shall be present at the disciplinary hearing except when his/her behavior prior to or during the hearing justifies exclusion or he/she has waived the right to be present.

    a. The youth may be temporarily excluded during the testimony of youths who wish their testimony to be given in confidence.

    b. Reasons for the youth's absence or exclusion shall be documented in the youth's file.

6. The disciplinary hearing shall be conducted by an impartial person or committee.

7. A youth may request the assistance of a staff member to represent him/her at a disciplinary hearing. A staff member or another resident shall be appointed when it is apparent that a youth is not capable of presenting evidence on his/her own behalf.

8. The youth shall have the opportunity to make a statement, present evidence, and call witnesses. Any exceptions shall be clearly documented in the youth's file.

9. The disciplinary officer's/committee's decision shall be based solely on the information obtained in the hearing process, including staff reports, statements of witnesses, and evidence. Once it has been determined that a youth has violated a rule and prior to any disciplinary action being taken, the reasons for the disciplinary action shall be explained to the youth. The youth shall have an opportunity to explain the behavior leading to the violation.

10. If the youth is found not guilty of the alleged violation, the disciplinary report shall be removed from all files, except the director may retain his/her copy for administrative review purposes.

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

12. The facility director or designee shall review all disciplinary hearings and dispositions to ensure conformity with policy and procedures.

13. The youth shall be informed of his/her right to appeal the decision of the disciplinary hearing officer/committee to the facility director or his/her designee at the time he/she is provided with the decision. The appeal shall be made in writing stating the basis of the appeal and shall be made within five calendar days of the receipt of the decision. The appeal shall be decided within 10 calendar days and the youth promptly notified in writing of the results of the appeal.

14. If a youth has allegedly violated multiple major rules at the same time, one disciplinary hearing shall be scheduled to hear all the charges. If the youth is found guilty of one or more of those violations, a disciplinary sanction shall be determined according to the facility/program's behavior management program. The hearing officer/committee cannot issue more than one disciplinary sanction for each hearing. Completion of program assignments can reduce the time of a disciplinary sanction. If the youth fails to complete a program assignment within 14 calendar days, an administrative staffing may be held to review the disciplinary sanction

H. When a youth is alleged to have committed a criminal act covered by criminal law, the center should refer the matter to an appropriate law enforcement agency or court-officials.

I. Youth placed in a secure residential center shall not punish other youth except as part of an organized therapeutic self-government program that is conducted in accordance with written policy and is supervised directly by staff. All restrictions of cruel and unusual punishment as found at Section 7.713.24, O, shall apply.

J. Disregard of any of the foregoing disciplinary rules or any disciplinary measure resulting in physical injury or abuse of any child may be grounds for the denial, revocation or making probationary of the license.

7.713.25 Security, Control, and Supervision [Rev. eff. 6/1/12]

A. Youth shall be under the supervision of qualified and trained staff members or volunteers at all times.

B. The door of the bedroom may be locked during sleeping hours for the safety of youth and/or staff and the security of the center.

C. Staff shall conduct visual checks of youth at least every five minutes when youth are in their bedrooms and the door is locked.

D. The center's perimeter shall be controlled by an appropriate means to ensure that youth remain within the facility and to prevent access by the general public without authorization.

E. Residents of the secure residential treatment center shall be physically counted according to a system established by the facility. Any changes in the number of residents shall be reported to the appropriate staff member on a shift by shift basis.

F. Staff shall inspect the center's security system and devices on a weekly basis and shall take appropriate corrective actions.

G. Except in emergency situations, firearms are not permitted in the secure residential treatment center.

H. The use of physical management and restraint shall comply with Section 7.714.53, et seq.

I. The use of mechanical restraints made of metal, soft leather, rubber, plastic or cloth is limited to cases of emergency and prevention of escape and after the failure of less restrictive alternatives. Only the facility director or designee may authorize the use of mechanical restraints. Any mechanical restraint will comply with Section 7.714.53, et seq. The facility shall establish written policy and shall train all staff in the established written policy. The written policy shall include the following elements, at the minimum:

1. Handcuffs shall be applied wrist to wrist in the front or back, or may be attached to a waist belt in the front only. Soft elbow restraints may also be utilized when necessary and shall be applied in the rear only. Thin, hard, portable plastic wrist restraints shall not be used on youth, except under emergency conditions identified in the facility's written policy.

2. Shackles shall be applied on one person's ankles only and shall not be used to connect two persons' ankles together.

3. Handcuffs and shackles shall never be intertwined directly together in such a manner as to interfere with a person's ability to maintain his or her spinal column in an erect or straight position.

4. Youth shall never be handcuffed or otherwise attached to a vehicle.

5. Youth placed in restraints shall not be undressed or intentionally made uncomfortable.

6. Youth shall be immediately removed from restraints and evacuated into a safer area or separate smoke compartment whenever a fire alarm, set off because of concern of a fire, results in the evacuation of other youth from the building or smoke compartment where the restrained youth is located. In the event that a fire alarm sounds which does not result in evacuation, the restrained youth shall not be left unattended during the alarm/emergency/drill.

7. Appropriate allowances shall be made to assure the safety, comfort, and dignity of the youth. Normal bodily functions shall be attended to, including elimination and respiration. The room shall be maintained at a normal room temperature and shall meet all state and local safety, sanitation, and health standards.

8. Because of the vulnerability of the youth during a physical management, precautions shall be taken to assure that the youth is protected from mistreatment, antagonism, and harm from another person.

9. Hard metal restraint may be used for transporting youth from one location to another.

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

11. Following application, all restraint equipment shall be checked by the supervisor on duty to assure that the equipment has been property applied, is of the proper type to assure the youth's safety, and is not likely to cause injury or undue discomfort.

J. All special incidents and emergency situations shall be reported to the director of the center.

K. The secure residential treatment center shall maintain a control center to provide order and security. A manual of all the written procedures for the center's security and control with detailed instructions for the implementation of the procedures shall be maintained at the control center. At least the following procedures shall be written and maintained:

1. A procedure for dealing with escapes.

2. A procedure to govern the supervision of all youth outside the facility and movement of youth within the facility.

3. A procedure regarding searches for control of contraband. The procedure shall be explained to both youth and staff.

4. A procedure to govern the control and use of keys, tools, culinary, and medical equipment.

5. A procedure for the use of physical management, and necessary reporting of their use pursuant to Section 7.714.53, et seq. and Section 7.713.25, et seq.

7.713.26 Educational Programming

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

1. Such programs shall be developed cooperatively by the facility and Local Education Agency (LEA) or State Education Agency based on applicable auricular requirements.

2. The center shall develop assurances that the educational program is an integral part of the total treatment plan. Such assurances shall include procedures for information sharing, joint planning and follow through.

3. The educational program allows for flexible scheduling that permits the youth to enter at any time and to proceed at his/her own learning pace. The youth shall attend classes appropriate to his/her educational level.

4. There shall be a written policy and procedure which provides that each youth is assessed in terms of academic, vocational, and personal needs.

5. Educational and vocational supervisors and instructors shall be licensed or certified by the state or as required by law.

6. Formal educational and vocational programs have a minimum of one teacher for every 15 students.

7. Educational and vocational training opportunities are available to each youth except when there is substantial evidence to justify otherwise.

8. Provision is made to meet the educational and vocational needs of youth who require special placement because of physical, mental, or emotional handicaps or learning disabilities.

9. Educational and vocational counseling are provided so that youth are placed in that phase of an educational or vocational program most suited to his/her needs and abilities.

10. Pre-vocational training programs are integrated with academic programs and are relevant to the vocational needs of the youth and to employment opportunities in the community.

11. There is an annual evaluation to measure the effectiveness 3f the educational and vocational training programs against stated performance objectives.

12. There is a system whereby the educational and vocational training programs are assessed against stated objectives by qualified individuals, professional groups and trade associations; this assessment is done at least every three years.

B. The center shall provide space, staff, equipment, and educational materials for the educational program, which is approved by the Colorado Department of Education.

7.713.27 Library Services

A. Library services shall be provided and shall be available to all youth.

B. There shall be a qualified person who coordinates and supervises library services.

C. Library services which are provided shall include but not be limited to the following:

1. Planned and continuous acquisition of materials to meet the needs of users.

2. Logical organization of materials for convenient use.

3. Circulation of materials to satisfy the needs of users.

4. Information services to locate facts as needed.

5. A reader's advisory service that helps provide users suitable materials.

6. Promotion of the uses of library materials.

7. A congenial library atmosphere.

7.713.28 Religious Services

A. There shall be a written policy and procedure which provides for youth to participate in religious services and counseling on a voluntary basis.

B. A staff member shall coordinate the center's religious programs.

C. The facility shall provide space and equipment for the conduct of religious programs for residents.

7.713.29 Recreation Program

A. There shall be a written policy and procedure which assures the provision of a recreation program with schedules and a plan for constructive leisure time activities, which includes both indoor and outdoor activities.

B. A variety of fixed and movable equipment shall be provided for each outdoor play area.

C. A center licensed for 50 or more youth shall have a full-time, qualified recreation director who plans and supervises all recreation programs. Facilities licensed for less than 50 youth shall have a staff member, who is trained in recreation or a related field and assigned to the responsibilities of the recreation director.

7.713.3 PERSONAL CARE OF THE CHILD

7.713.31 Medical and Health Services [Rev. eff. 6/1/12]

A. A secure residential treatment center shall ensure the availability of a comprehensive policy and procedures for the provision of preventive, routine, and emergency medical, mental health, and dental care for each youth in care. A primary physician, licensed to practice medicine in Colorado, shall advise the facility about establishment and implementation of the medical policy and procedures which shall include, but not be limited to:

1. Ongoing appraisal of the general health of each youth, including immunizations in accordance with state law and regulations.

2. Diagnostic services, emergency care, corrective care, recuperative care, and immunization updates.

3. Provision of medical examination of any youth suspected of having a communicable disease.

4. Provision of health education and sex education as appropriate including information about Acquired Immune Deficiency (AIDS).

5. Provision that any medical treatment administered will be explained to the youth in a language understandable to him/her.

6. Provision of dental care by a dentist, licensed in Colorado, who is available to the center.

7. Provision of mental health treatment by a mental health practitioner who is licensed or certified according to state law.

8. Availability of a physician and an emergency medical facility on a 24-hour, seven-day-a-week basis for treatment of the youth.

9. Procedures for dispensing medication, storage of medication, documentation of administration of all medication, disposition of medications, and notification of primary physician in cases of medication errors and/or drug reactions.

10. Provision of medical and dental prosthesis when the health of the youth would otherwise be adversely affected, as determined by the responsible physician.

11. Assurance that youth are informed both orally and in writing of procedures required for gaining access to medical services.

12. Assurance that program staff are informed appropriately of a youth's special medical problems. At the time of admission, staff are informed of any physical problems which might require medical attention.

13. Provision for the management of serious and infectious diseases which are updated as new information becomes available.

B. The center shall prepare and maintain a quarterly report on the health delivery system and health environment. An annual statistical summary of health care provided to residents shall be maintained.

C. A medical screening shall be performed by health-trained or qualified health care personnel on each youth upon arrival at the facility; all findings shall be recorded on a printed screening form approved by the primary physician.

D. A general medical examination for each child shall be completed by a physician or a qualified nurse practitioner within thirty days after admission unless one was completed within sixty (60) calendar days before admission. A statement form signed by the examiner shall be retained in the child's file. This exam shall include the following:

1. An examination for physical injury and disease.

2. Vision and hearing screening.

3. A current assessment of the child's health, including immunizations.

E. Sick call for non-emergency medical service, conducted by a physician and/or other qualified medical personnel, shall be available to each youth weekly.

F. Whenever indicated, a youth shall be referred to an appropriate specialist for either future assessment or treatment.

G. Subsequent physical and other examinations shall be done annually or as directed by the physician.

H. The facility shall ensure that the youth receive annual dental examinations.

I. There shall be first aid supplies readily available.

J. Youth care staff and other personnel shall be trained to respond to emergency health-related situations within a four minute response time. A training program shall be established which includes the following:

1. Recognition of signs and symptoms, and knowledge of action required in potential emergency situations.

2. Administration of first aid and cardiopulmonary resuscitation (DPR).

3. Methods of obtaining assistance.

4. Signs and symptoms of mental illness, retardation, and chemical dependency.

5. Procedures for patient transfers to appropriate medical facilities or health care providers.

K. The facility shall make every effort to ensure that a child needing corrective devices such as glasses, hearing aids, etc., is provided with the necessary equipment.

L. If a youth wishes an exemption from a medical examination or medical treatment due to religious beliefs, the youth shall submit a written statement signed by his/her parents or guardian which states the reasons for such an exemption. A secure residential treatment center has the right to request a statement regarding general health from a medical examiner. In a potential life-threatening situation, the center shall refer the youth's care to the appropriate medical and legal authority. A center does have the right to refuse admission to a youth whose parent or guardian refuses medical treatment or examination.

M. Medications shall be administered and stored in the following manner:

1. Any prescriptive or non-prescriptive medication shall be administered by staff members of the Secure Residential Treatment Center only on the written prescription of a physician for each youth.

2. Medication shall be administered only by a staff member of the secure residential treatment center who is a licensed physician, licensed registered nurse, or a staff member who has passed a competency evaluation, which is authorized by the Colorado Department of Public Health and Environment.

3. The secure residential treatment center shall obtain written authorization from the prescribing physician to administer any prescriptive or non-prescriptive medication.

4. Medication shall be stored in a safe, locked, clean container or cabinet.

5. The center shall have a written medication schedule for each youth for whom medication is prescribed, a copy of which shall be available to appropriate staff.

6. The center shall maintain for each youth a cumulative record of all medication, both prescriptive and non-prescriptive, dispensed to that youth including:

a. The name of the youth,

b. The name and dosage of medication,

c. The reason for prescribing the medication,

d. The time and date the medication is dispensed,

e. The name and position of the dispensing person,

f. The name of the prescribing physician.

N. Under no circumstances is a stimulant, tranquilizer or psychotropic drug administered for purposes of behavior management and control, or for purposes of experimentation and research.

O. When a youth first comes into care, the center shall ascertain all medication the youth is currently taking. At this time the center's physician shall carefully review all medication the youth is using and make plans to either continue the medication or to reconsider the medication needs of the youth.

P. All informed consent standards in the Colorado shall be observed and documented for medical care. The informed consent of parent, guardian, or legal custodian applies when required by law. When health care is rendered against the patient's will, it shall be in accord with State and Federal laws and regulations.

7.713.32 Food and Nutrition

A. Meals shall be served under conditions that minimize regimentation. The dining area shall provide normal group eating facilities and conversation shall be permitted during dining room hours.

B. The center shall provide nutritious foods in the variety and amounts to meet the recommended “National Research Council's Recommended Daily Dietary Allowances” as adjusted for age, sex and activity of each youth in care.

C. At least three meals, of which two are hot meals, shall be provided at regular meal times during each 24-hour period, with no more than 14 hours between the evening meal and breakfast. If basic nutritional goals are met, variations may be allowed during weekend and holidays.

D. Menus shall be planned at least one week at a time, shall be dated, posted and filed for at last 12 months.

E. If menus are not prepared by a qualified nutritionist or dietitian, there shall be review and approval by a qualified nutritionist or dietitian at least quarterly.

F. Youth shall be encouraged to eat a variety of food served but shall not be subjected to undue coercion, including forced feeding or other punishment for refusal to eat.

G. All food shall be from sources approved or considered satisfactory by the health authority. All foods shall be stored, prepared, and served in such a manner as to be clean, wholesome, free from spoilage, and safe for human consumption. Home-canned vegetables and meats shall not be served. Only pasteurized milk shall be served.

H. Special diets as prescribed by appropriate medical, dental or religious personnel shall be prepared for the youth. A record of the diet shall be maintained with the youth's record of medication.

I. Water from an approved source shall be readily accessible to youth by means of an approved water fountain or single service cups.

J. There shall be a weekly inspection of all food service areas, including but not limited to the following:

1. Dining and food preparation areas and equipment.

2. Sanitary, temperature-controlled storage facilities for all foods

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

7.713.33 Personal Hygiene and Daily Routine

A. The center shall establish procedures to ensure that youth receive training in good habits of personal care, hygiene and grooming appropriate to their age, sex, race and culture.

1. There shall be personal supervision by staff to provide for proper grooming and physical cleanliness of the youth.

2. Hair care services shall be available to youth.

3. The center shall insure that youth are provided with all necessary toiletry items, including clean, individual towels and washcloths, toothbrush, toothpaste, comb and shampoo.

B. A secure residential treatment center shall have a written plan of basic daily routines which shall be available to all personnel. This plan shall be revised as necessary.

1. Youth shall be provided activities outside his/her bedroom at least 14 hours per day.

2. Daily routines shall not be allowed to conflict with the implementation of a youth's treatment plan.

3. Daily routines shall be established for mealtimes, waking, and bedtimes.

4. Opportunity for physical exercise shall be planned for each youth to include at least one hour daily of large muscle activity.

7.713.34 Clothing and Personal Belongings

A. A residential facility shall ensure that each child in care has adequate clean, well-fitting, attractive and seasonable clothing as required for health, comfort and physical well-being and as appropriate to age, sex, and individual needs.

1. Each youth shall have clean socks, underwear and towels on a daily basis and other clean clothing at least twice a week.

2. At time of admission the center shall provide for the thorough cleaning and, when necessary, disinfecting of the personal clothing of a new youth before storage or before allowing the youth to keep and wear personal clothing.

3. Each youth's personal clothing shall be identified.

4. A youth's clothing shall be kept clean and in good repair. The youth shall be involved, as appropriate, in the care and maintenance of his/her clothing. As appropriate, laundering, ironing, and sewing facilities shall be accessible the youth.

B. A secure residential treatment center shall ensure that discharge plans make provisions for clothing needs at time of discharge. The wardrobe for each youth shall go with him/her at time of discharge.

C. The center shall allow a youth in care to bring his/her personal belongings to the center as defined by the center's policy, and to acquire belongings of his/her own in accordance with the youth's treatment plan. However, the center shall, as necessary, limit or supervise the use of these items while the youth is in care. Where limitations are imposed, the youth shall be informed of the reasons by staff; and the decision and reasons shall be recorded in the youth's case record. Provisions shall be made for the protection of the youth's property.

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

7.713.4 HUMAN RESOURCES

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

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

1. Job descriptions for all positions required. The descriptions shall describe duties of the job, qualifications for performance, and supervision to be provided.

2. Salary range and provision for increments.

3. Hours of work, holidays, vacations, sick leave, and other leaves.

4. Conditions of employment, tenure, and promotion.

5. Employment benefits, including retirement plan, social security, hospitalization, and other insurances.

6. Employee evaluation procedure.

7. Termination and sanction procedures including but not limited to child abuse and the use and/or sale of an illegal substance.

8. Grievance procedures which may be used by staff.

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

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

1. All new full-time employees shall receive 40 hours of orientation/training prior to being independently assigned to a particular job. This orientation/training is to include, at a minimum, orientation to the purpose, goals, policies and procedures of the center; working conditions and regulations; responsibilities and rights of employees; and an overview of the juvenile justice and correctional field. Depending upon the employee(s) and the requirements of the particular job, the orientation/training may include some preparatory instruction related to the particular job. Provisions may be made for acknowledging and giving credit for prior training received.

2. All clerical/support employees who have minimal contact with youth shall receive an additional 16 hours of training during the first year of employment and 16 hours of training each year thereafter.

3. Professional specialists employees who have contact with youth and all support employees who have regular or daily contact with youth shall receive an additional 40 hours of training during the first year of employment and 40 hours of training each subsequent year of employment.

4. Training for clerical, support and professional specialists employees shall include such topics as security procedures, rights and responsibility of youth, fire and emergency procedures, interpersonal relations, social/cultural lifestyles of the youth population, communication skills, First Aid and CPR.

5. All new youth care/supervisory staff shall receive an additional 120 hours of training during the first year of employment and 40 hours of training each subsequent year of employment. At a minimum this training covers the following areas:

   a. Security Procedures,

   b. Supervision of Youth,

   c. The use of physical management, restraint and seclusion pursuant to the requirements of Section 7.714.53, et seq.

   d. Report Writing,

   e. Youth Rules and Regulations,

   f. Rights and Responsibilities of Youth,

   g. Fire and Emergency Procedures,

   h. Key Control,

   i. Interpersonal Relations,

   j. Social/Cultural Lifestyles of the Youth Population,

   k. Child Growth and Development.

   l. Communication Skills,

   m. First Aid and CPR.

6. All part-time staff and volunteers working less than 40 hours per week shall receive training appropriate to their assignments; volunteers working the same schedule as full-time, paid staff shall receive the same training as full-time staff.

7. Personnel who work with youth confined separately from the total population shall receive specialized training.

8. All administrative and managerial staff shall receive 80 hours of training during their first year of employment, and 40 hours of training each subsequent year of employment. This training shall cover the following areas, at a minimum: General Management and Related Subjects, Labor Law, Employee-Management Relations, The Interaction of Elements of the Criminal and Juvenile Justice Systems, and Relationships with Other Service Agencies.

9. The center shall maintain written documentation of training held, the participation of individual staff members, the hours involved, and/or other in-service training activities in which each staff member was involved. Activities related to supervision of the staff members' routine tasks shall not be considered training activities for the purpose of this requirement.

D. All training programs shall be presented by persons who are qualified in the areas in which they are conducting training.

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

7.713.42 General Requirements for All Personnel

A. The Secure Residential Treatment Center shall provide professional staff and service personnel necessary to assure the health, safety, proper care, and treatment of the youth under care.

B. All personnel in the center shall evidence an interest in and a knowledge of youth and a concern for their proper care and well-being.

C. The center shall have written screening and hiring procedures and make reasonable efforts to evaluate the overall emotional health and stability of each applicant. Procedures shall include exploring for history of child battering, child abuse, child molestation, child neglect, previous criminal convictions, and drug or alcohol abuse. (See Section 7.701.36).

D. The center shall not hire or continue to employ any person whose health, educational achievement, emotional, or psychological makeup impairs his/her ability to properly protect the health and safety of the youth, or is such that it would endanger the physical or psychological well-being of the youth.

E. Each member of the staff, including part-time and substitutes, students, and volunteers whose assignment is required to meet staff qualifications or staff ratio shall have a medical examination within six months prior to employment and thereafter as required, in writing, by a physician, nurse practitioner, or physician's assistant (see Section 7.713.48 for volunteers). The written reports of the medical examinations, which shall be on file at the facility, shall be dated and signed by the examining medical personnel. Reports shall include:

1. Statement of evaluation of the person's physical condition and his/her suitability for employment in a secure facility caring for youth.

2. A list of known immunizations he/she has had and the most recent dates when immunized.

3. Tuberculin status. If the staff member has a certificate of previous negative tuberculin testing, the testing need not be repeated. If there is no certificate, the testing needs to be completed prior to employment.

F. In addition to a physical examination, food handlers, or those who prepare food for youth, shall have special tests as may be required by local ordinances or by the physician's recommendation.

G. An employee who, upon examination or as a result of tests, shows indication of a physical condition which could be hazardous to a youth, other staff, or self, or which would prevent performance of duties, shall not be assigned or returned to his/her position until the condition is corrected to the satisfaction of the examining physician.

H. Any employee suspected of a communicable disease shall have a medical examination.

7.713.43 Administrative Staff

A. Administrator

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

1. The administrator shall have received a bachelor's degree from an accredited college or university and have five years of verified experience in the human services field with youth; three years of experience shall be in a supervisory and/or administrative position.

2. The administrator shall assume the following duties:

   a. Overall direction and responsibility for the youth program, facility and fiscal management.

   b. Overall direction and responsibility for supervision of adequate staff.

   c. The selection and training of a capable staff member who can assume responsibility for management of the center in the administrator's absence.

   d. The establishment and maintenance of relationships with allied agencies, services and resources within the community.

B. Assistant or Acting Administrator

1. In each Secure Residential Treatment Center, there shall be a specifically designated staff member, age 21 or over, capable of acting as a substitute for the administrator during his/her absence. The duties and responsibilities of the substitute administrator shall be clearly defined in order to avoid confusion and conflict among other staff and youth.

2. If the administrator is regularly absent from the facility more than 50 percent of his/her working hours, an assistant administrator shall be appointed who meets the same qualifications as the administrator found at Section 7.713.43, A.

C. Administrative Coverage

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

2. The administrator or the staff member to whom the administrator has delegated responsibility shall be available at all times.

7.713.44 Medical and Health Staff

A. A secure residential treatment center shall have a primary physician, licensed to practice medicine in Colorado, available to establish and maintain the health and medical policy and procedures of the facility as found at Section 7.713.31.

1. If the physician is not a full-time employee, the description of the physician's consultative services or other duties to be performed shall be set forth clearly in a written, signed agreement with the facility.

2. Any medical personnel, who is an employee, a volunteer, or whose services are purchased by the center, shall hold appropriate state and federal license, certification or registration and be responsible to the primary physician for the medical aspects of his/her job. A copy of the credentials shall be maintained at the center.

7.713.45 Youth Care Staff

A. Each youth care staff member shall be at least 21 years of age and have completed two years of college education. A high school diploma or equivalent and one year's experience in the human services field may be substituted for the required college.

B. Youth care staff aides shall be at least 18 years old, shall work under the direct supervision of a youth care staff member in activities specified by the youth care staff member, or with the approval of the director.

C. Relief staff shall have the same qualifications as the regularly assigned youth care staff.

7.713.46 Youth Care Staff-to-Youth Ratios

A. The center shall know the intended whereabouts of each youth in care at all times. Youth shall be supervised at all times (Section 7.713.25).

B. There shall be a minimum of one (1) adult qualified as a youth care staff member on duty and one (1) adult on call who can be summoned at all times when there is one or more youth at the center.

C. At night there shall be at least one awake youth care staff member within each physically separate building and within hearing of youth, and a second person who can be summoned in case of emergency.

D. The ratio of youth care staff members to youth in care shall not be less than the following schedule except when transporting youth in vehicles (see Section 7.713.57):

Waking Hours	Sleeping Hours
1 youth care staff member to 10 youth	1 awake youth care staff member to 20 youth

7.713.47 Case Management Staff and Other Professional Staff

A. Case management shall be provided by:

1. A qualified professional having a master's degree in social work, psychology, or related fields from an accredited college or university. This professional shall have two years of treatment-oriented experience; or,

2. A designated member of the staff, who shall have a bachelor's degree from an accredited college or university with a major in behavioral science, human services or related fields, and three years experience in working with youth, and for whom there is an effective arrangement for consultation from a qualified professional as described above at Section 7.713.47, A, 1.

3. The ratio of case management staff to youth shall be at least one full-time case management staff member for every twenty (20) youth, or a part-time staff member assigned for a fraction thereof.

B. The case management staff shall be responsible for implementing the individual treatment plan as stated at Section 7.713.23.

C. Psychiatrists used by the center shall be qualified and licensed to practice, and shall provide, as needed, diagnosis, treatment and consultation services.

D. Psychologists who perform testing and diagnostic services shall have a master's degree in psychology, or shall have a bachelor's degree in a human services field and receive supervision from a psychologist who has a master's degree or a Ph.D. in psychology.

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

7.713.48 Volunteers and Students

A. If volunteers or students are used by a center, the administration shall define specifically the services to be given by that individual.

B. A volunteer shall perform professional services only when certified or licensed to do so.

C. Volunteers and students who are assigned to work directly with the youth shall:

1. Be subject to reference and criminal record checks similar to those performed for applicants for employment.

2. Be in good general health. The center has the right to contact the individual's physician.

D. Volunteers and students shall be:

1. Directly supervised by a paid staff member.

2. Oriented and trained as required at Section 7.713.4, C.

7.713.49 Food Services and Maintenance Staff Members

A. All staff members shall comply with the requirements for all personnel as specified in Sections 7.713.41 and 7.713.42.

B. Food service staff of the center shall meet requirements of the state or local health requirements for food handlers.

C. There shall be one food service staff member who has basic knowledge and understanding of nutrition, food purchasing, menu planning, and food preparation. If the staff member is not qualified as a dietitian or nutritionist, there shall be regular consultation from a specialist in the field.

D. Maintenance staff shall be in sufficient numbers to maintain an adequate physical plant.

7.713.5 BUILDING AND FACILITIES

7.713.51 Building Site

A. A secure residential treatment center shall be located in an area that is readily accessible to health resources, public and private utilities, adequate and safe water supplies, sewage disposal, fire and police protection.

B. The site shall be approved by the local zoning department.

C. If the secure residential treatment center is located in the same building as, or immediately adjacent to, other residential facilities, such as a residential child care facility or an adult treatment center, it shall be so arranged that the care and activities of the youth residing in the secure residential treatment center are completely separate and independent from the other residential facility. A secure residential treatment center may not be operated on the premises of a business of a nature which might be hazardous to the health, safety, morals, welfare of youth, and the operation of the secure residential treatment center. The center shall only care for youth of the age stated on the license. The center shall not be used for the care of persons over the age of 21 years old.

7.713.52 Building Approvals

A. Each licensed center shall meet the requirements of the State Department of Public Health and Environment or its local unit, and the local fire department, and shall be inspected at least annually for compliance with current sanitation and life safety code regulations. All health and life safety hazards shall be corrected as required by the appropriate regulatory agency.

B. A center staff member, who is trained in and is familiar with the safety and sanitation requirements, shall conduct weekly inspections of the center and assure that any items of non-compliance with safety and sanitation regulations are corrected immediately. A record of each inspection shall be maintained for 12 months.

C. Licensed centers shall comply with applicable state or local building code regulations.

D. Prior to construction, architectural plans for new buildings, or for extensive remodeling of existing buildings, shall be submitted for review and approval by the State Department of Public Health and Environment or its local unit, the local fire department, and local building department. Plans shall be submitted and reviewed by the State Department of Human Services as to appropriateness, general adequacy, and suitability for youth care.

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

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

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

B. Each youth shall be provided suitable sleeping facilities consisting of individual beds or bunks complete with mattresses in good repair and constructed so as to facilitate cleaning while in use by residents and upon each change of occupancy. Triple-deck bunks are prohibited. Beds being used by youth shall have a mattress, clean linens, pillows, pillowcases, and blankets.

C. Each room of occupancy shall have natural light, be well-lighted and adequately ventilated by exterior windows or by an approved air-conditioning system. If a mechanical ventilation system is provided, it shall meet requirements of local building codes and fire regulations and a backup system to assure that ventilation is available in the event of power failure.

D. Each sleeping room has, at a minimum, the following facilities and conditions:

1. Toilet facilities available for use 24 hours a day.

2. A hand washing sink with hot and cold running water.

3. A desk, chair or stool.

4. Temperatures which are appropriate to the summer and winner comfort zones.

E. Staff rooms shall be located on the same floor or in the general area of youth's sleeping rooms so that the youth care worker can supervise youth and be readily accessible when needed.

F. There shall be a minimum of 35 square feet of space for each youth for informal individual or group activities. The area shall be adequately and appropriately furnished to accommodate social and recreational activities associated with such living areas.

G. There shall be a designated space distinct from youth's living areas 1o serve as an administrative office for such activity as secretarial work and bookkeeping.

H. There shall be a designated space to allow private discussions and counseling sessions.

I. Each center shall have a telephone. Each separate living unit within a center shall have 24-hour telephone service or an intercom system connected with an outside telephone service. Emergency telephone numbers, including fire, police, physician, poison control, health agency and ambulance, shall be conspicuously posted adjacent to the telephone.

7.713.54 Outdoor Space and Equipment

A. All structures on the grounds of the center shall be maintained in good repair and free from any danger to health or safety.

B. The grounds of the center shall be maintained in an acceptable manner and shall be free from any hazard to health or safety.

1. Garbage and rubbish which is stored outside shall be stored securely in noncombustible, covered containers and shall be removed at least once every week, or more frequently if necessary.

2. Garbage and rubbish containers and incinerators shall be located separate from play areas.

3. Fences shall be in good repair.

4. Areas determined to be unsafe, including steep grades, cliffs, open pits, swimming pools, high-voltage boosters, or high-speed roads, shall be fenced off or have natural barriers to protect youth.

5. Playground equipment shall be so located, installed and maintained as to ensure the safety of youth.

C. A secure residential center shall have access to outdoor recreational space and suitable recreational equipment.

D. When a swimming pool is provided, it shall meet the requirements of the Colorado Department of Public Health and Environment. Safety precautions shall include protective fencing, winter coverage, which shall exclude plastic or inflatable-type domes, and a non-skid surface area of at least four (4) feet adjoining poolsides.

7.713.55 Dining, Kitchen, Laundry, Bathroom Facilities

A. The dining area, whether located in the living unit or in a separate, central dining facility, shall meet the following requirements:

1. It shall be clean, well-lighted, properly heated, and ventilated.

2. Fifteen (15) square feet per person be provided to accommodate the youth and staff.

3. Floors shall be constructed and maintained with a non-skid surface.

4. Tables and chairs shall be of sturdy construction, scaled or adjusted to the proper height and size so that youth can be comfortably served.

5. Table service and settings shall be of the type, size, and design appropriate to the security of the facility.

6. All dishes, cups, and glasses used by youth in care shall be free from chips, cracks, or other defects.

7. Walls and floors shall be of materials that are easy to keep clean.

8. Dining and recreation areas may be combined if regulations for dining areas are consistently met.

B. The kitchen shall be designed and equipped to meet the requirements of sanitation, fire safety, and comfortable working conditions for the staff. There shall be:

1. Adequate space for receiving, storage, refrigeration, and preparation of food. Storage space shall be clean and well-ventilated; and containers of food shall be covered and stored above the floor on shelves or other clean surfaces.

2. Provision for daily disposal of garbage and other refuse. Food waste grinders shall be installed in compliance with applicable laws and regulations.

3. Separate storage of poisonous and toxic materials from food. Such materials shall be labeled and used only in ways that will neither contaminate food nor be hazardous to employees.

4. Mechanical dish washing equipment or other approved methods of dish washing in accordance with requirements of the State Department of Public Health and Environment.

5. Provision for a CO2 or dry powder fire extinguisher(s) in kitchen. If a commercial-type range is used, a hood with a filter must be installed.

6. Hand washing and toilet facilities for use of kitchen staff shall be readily accessible.

C. When a center has a central laundry facility, it shall be located in an area separate from areas occupied by youth. Laundry facilities with ample space for sorting, drying, and ironing shall be made available to youth old enough and capable of handling their personal laundry. These facilities shall be in an area supervised by a responsible adult.

D. Laundry trays or slop sinks shall be available and located conveniently for purposes of cleanliness and sanitation.

E. There shall be a ratio of at least one toilet, lavatory, and bathtub or shower for every six (6) youth, readily accessible and kept in sanitary condition. Separate toilet and bath facilities shall be available for boys, girls, and staff. Toilets and bath facilities shall have doors and partitions. Urinals may be substituted for up to one-third of the required number of toilets for boys in facilities which accept boys. Toilets and bath facilities shall be accessible from a common hallway and be on the same floor with sleeping rooms.

F. Bath and toilet rooms shall be constructed of easily cleanable, nonabsorbent materials. Floors shall have an impermeable, nonskid surface. Walls shall have a finished surface extending to a height of four (4) feet in toilet rooms and six (6) feet in shower rooms. All surfaces shall be maintained in good repair.

G. Hot and cold water under pressure shall be supplied to all required plumbing fixtures except toilets. Water temperature control valves shall be inaccessible to youth, and water temperature shall be controlled by employees. Hot water in lavatories and bathing facilities shall not be above 110 degrees Fahrenheit.

H. If drinking fountains are provided, they shall be approved, angle-jet type with adequate water pressure at all times.

7.713.56 Building Safety [Rev. eff. 6/1/12]

A. Maintenance

1. Buildings shall be kept in good repair and maintained in a safe, clean, and sanitary condition. Good housekeeping shall be observed in all areas at all times. A housekeeping plan shall be written and implemented.

2. All areas available for youth's activities shall be maintained in safe condition, including elimination of debris and hazardous items of all kinds, and removal of broken play and recreational equipment and any other devices which are in poor repair.

3. There shall be a written procedure, which shall be implemented, to provide for the control of vermin and pests.

4. Closets, attics, basements, cellars, furnace rooms, and exit routes shall be kept free from accumulation of extraneous materials such as discarded furniture, furnishings, newspapers, or magazines. Combustibles such as cleaning rags, mops, and cleaning compounds shall be stored in well-ventilated areas. Solutions, cleaning compounds, and other hazardous substances will be properly labeled and stored in areas inaccessible to youth.

5. Storage of gasoline, kerosene, fuel oil, and other flammable material shall meet requirements of safety and fire codes.

6. There shall be a written policy to govern the control and use of all flammable, toxic, and caustic materials. The policy shall be implemented.

7. Provision shall be made for collection, storage, and disposal of refuse in an approved manner to prevent nuisance conditions.

8. Storage shall not be permitted around or near water heaters and furnaces.

9. There shall be ample closets for cleaning supplies and equipment. Closets shall have good ventilation and be located in each principal area.

B. Exits

1. Every building or structure, new or old, shall be provided with exits sufficient to permit the prompt escape of occupants in case of fire or other emergency. Additional safeguards shall be provided for life safety in case any single safeguard is ineffective due to some human or mechanical failure.

2. There shall be at least two approved, alternate, remotely-located means of egress from each floor of the building to safe and open space at ground level.

3. Egress from each dwelling unit or sleeping room shall be directly available without passage through another dwelling or room unit to the outside or to a common hallway leading to the outside.

4. Exits from bedrooms and other interior rooms, and exits to the outside of the building shall have the capability to be locked to limit the freedom of the youth in residence. Because of this capability the local fire department has the right to require safeguards not commonly found in less restrictive settings.

5. Every exit shall be clearly visible, or the route to reach it shall be conspicuously indicated in such a manner that every occupant of every building or structure who is physically and mentally capable will readily know the direction of escape from any point. Each path of escape shall be so arranged or marked that the way to a place of safety outside is unmistakable.

6. Pathways or hallways which lead to an exit shall not be cluttered or hazardous thus resulting in the obstruction of access to the exit.

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

8. Compliance with this rule shall not be construed as eliminating or reducing the necessity for other provisions for safety of persons using a structure under normal occupancy conditions, nor shall any provision of this rule be construed as requiring or permitting any condition that may be hazardous under normal occupancy conditions.

9. The local fire department shall determine the adequacy of exits and other measures for life safety in accordance with the requirements of the Uniform Building Code and the National Fire Protection Codes. In cases of practical difficulty or unnecessary hardship, the local fire department may grant exceptions from the Uniform Building Code or the National Fire Protection Codes, but only when it is clearly evident that reasonable safety is thereby secured.

C. Heating and Electrical Equipment

1. All heating units, gas or electric, shall be installed and maintained with safety devices to prevent fire, explosions, and other hazards. No open-flame gas or oil stoves, hot plates or unvented heaters shall be used for heating purposes.

2. Electrical wiring systems in all buildings shall conform to the requirements of the state electrical board. Electrical appliances shall be examined frequently for worn or otherwise defective wiring.

3. Heating devices such as radiators, registers, fireplaces, and steam and hot water pipes within the reach of youth shall be screened or otherwise protected as deemed necessary for the youth in residence at the center.

D. General Safety Practices

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

2. A secure residential treatment center shall not maintain any firearm on the grounds or within the structures of the facility.

   a. A facility shall not permit any staff member or youth to be in possession of any firearm on the grounds or within the structures of the center. If chemical weapons are carried by a staff member for personal protection, the weapons shall be locked when the staff member is in the center.

   b. Security guards patrolling the grounds and structures of a center, whether employed by the center or by a security service under contract to the center, shall not be permitted to be in possession of any firearm or chemical weapon on the grounds or within the structures of the facility except in emergency situations which are detailed in written policy.

3. Porches, elevated walkways and elevated play areas within the center shall have barriers to prevent falls.

4. Power-driven equipment used by the center shall be kept in safe and good repair. Such equipment shall be used by youth only under the direct supervision of a staff member and according to state law.

5. All stairways containing more than four steps shall be equipped with a handrail.

6. Staff and youth shall be trained to report fires and other emergencies appropriately and shall be trained in fire prevention.

7. Power generators shall be tested at least every two weeks, and other emergency equipment and systems tested at least quarterly for effectiveness and shall be repaired or replaced if necessary.

8. The center shall have access to an alternate power source to maintain essential services in an emergency.

9. There shall be a procedure which provides for a communications system in emergency situations within the center and between the center and the community.

E. Evacuation and Fire Drills

1. There shall be a written evacuation plan prepared in the event of fire or major emergency which is approved by the local fire protection authorities pursuant to national fire safety codes. The plan shall be reviewed annually, updated if necessary, and reissued to the local fire jurisdiction. The plan shall include but not limited to the following:

    a. Location of building/room floor plans.

    b. Use of exit signs and directional arrows for traffic flow.

    c. Location of publicly posted plan.

    d. At least quarterly drills or simulated drills on all shifts throughout the center.

    e. Simulation of drills for evacuating extremely dangerous youth.

    f. The means for the release of youth from locked areas and provision for a back-up system of security and control of youth.

2. All center personnel shall be trained in the implementation of the written emergency plans including fire, riot, hostage, medical, evacuation, and natural disasters. These plans are made available to all personnel. The plan and amendments shall be reviewed by staff at least annually.

3. In every building or structure, fire alarms shall be provided to warn occupants of the existence of fire so that they may escape, or to facilitate the orderly conduct of fire exit drills.

4. Responsibility for the planning and conduct of fire drills shall be assigned to competent persons qualified to exercise leadership.

5. Drills shall be held at unexpected times and under varying conditions to simulate the unusual conditions prevailing in case of fire or other disasters.

6. In the conduct of drills, emphasis shall be placed upon orderly evacuation under proper discipline rather than upon speed. No running or horseplay shall be permitted.

7. Drills shall include suitable procedures to make sure that all persons in the building, or all persons subject to the drill, actually participate.

8. Fire alarms shall be regularly used in the conduct of fire exit drills.

9. The center shall make special provisions for the evacuation of any physically handicapped youth.

10. The center shall take special care to help emotionally disturbed or perceptually handicapped youth understand the nature of such drills.

F. A secure residential treatment center shall maintain an active safety program, including investigation of all accidents and recommendations for prevention.

7.713.57 Transportation

A. A secure residential treatment center shall ensure that each youth is provided with the transportation necessary for implementing the youth's treatment plan.

B. A Secure Residential Treatment Center shall have means of transporting youth in cases of emergency.

C. There shall be a written procedure to govern safety and security precautions pertaining to center and staff vehicles.

D. Any vehicle used in transporting youth in care of a Secure Residential Treatment Center, whether such vehicle is operated by the center, a staff member or any other person acting on behalf of the center, shall be properly licensed, and shall be maintained in conformity with all applicable motor vehicle laws. The vehicle shall be enclosed, provided with door locks, and shall be equipped with a first aid kit and fire extinguisher.

E. Any staff member of a secure residential treatment center or other person acting on behalf of the center operating a vehicle for the purpose of transporting youth shall be properly licensed to operate that class of vehicle in accordance with applicable laws of the Department of Revenue.

F. A secure residential treatment center shall not allow the number of persons in any vehicle used to transport youth to exceed the capacity established by the manufacturer for the vehicle.

G. In addition to the driver, there shall be sufficient number of supervisors traveling in any vehicle to meet the required staff-youth ratio as stated at Section 7.713.46 when transporting youth.

H. A secure residential treatment center shall ascertain the nature of any need or problem of a youth which might cause difficulties during transportation, such as seizures, a tendency toward motion sickness or a disability. The center shall communicate such information to the operator of any vehicle transporting youth in care.

7.713.6 RECORDS

7.713.61 Confidentiality

A. There shall be a written procedure to govern record management which includes but is not limited to the following: Establishment and utilization, content, privacy, security, preservation, and a schedule for retiring or destroying inactive records. These policies and procedures shall be reviewed annually.

1. Records shall be the property of the secure residential treatment center; and the center, as custodian, shall secure records against loss, tampering, or unauthorized use. The center shall designate who is to supervise the maintenance of records and to whom records may be released.

2. Employees of the center shall not disclose or knowingly permit the disclosure of any information concerning a youth or his/her family, directly or indirectly, to any unauthorized person except in case of medical emergency.

3. Information concerning a youth in care shall not be released without the voluntary, written consent of the parent(s) or guardian except to the youth, his/her parents(s) or guardian, their respective legal counsel, the court having jurisdiction over a youth's case, or an authorized public official in the performance of his/her mandated duties.

4. A secure residential treatment center may make available information in the case record to the youth, his parent(s) or guardian and their respective legal counsel if the information being released does not contain material which violates the right of privacy of another individual and/or material that must be withheld from release according to other laws or by order of the court. If, in the professional judgment of the administration of the center, it is believed that information contained in the record would be damaging to a youth, that information may be withheld except under court order. Educational records shall be governed by federal and state laws.

5. It is acceptable to use material from case records for teaching or research purposes, development of the governing body's understanding and knowledge of the center's services or similar educational purposes, when names are deleted and other identifying information is disguised or deleted.

6. It is necessary to obtain an employee's permission or court order for the release of information from a personnel file.

7. The contents of records shall be identified and separated according to an established format.

8. All entries in the master file are dated and identified.

9. Personnel and records of youth shall be available, upon request, to authorized personnel of the Colorado Department of Human Services. All records regarding youth and all facts learned about youth and their relatives shall be kept confidential by the staff of the Colorado Department of Human Services pursuant to the state law.

B. There shall be a procedure which upholds the principle of confidentiality of the health record and includes the following requirements:

1. The active health record is maintained separately from the confinement record.

2. Access to the health record is controlled by the center's primary physician and the medical policy and procedure.

3. The center's primary physician or his/her designee shares with the center administrator information regarding a youth's medical management, security, and ability to participate in programs.

7.713.62 Necessary Records and Their Retention

A. The secure residential treatment center shall maintain complete records as required for licensing the center in accordance with the Minimum Rules and Regulations for a Secure Residential Treatment Center.

B. A permanent register shall be maintained which contains:

1. Identifying information, such as name, sex, birth date, race, on each youth who has been in care at the center including a youth admitted in an emergency.

2. Name and address of referring agency. Name of referring personnel.

3. Date of admission.

4. Discharge date and name and address of person or agency to whom the youth is discharged.

C. Records for youth shall be retained for at least seven years. Retention of records for a longer period may be desirable when they reflect an accident, injury, or other unusual circumstance.

D. Records for personnel shall be retained for at least three years.

E. The following records shall be on file at the center or its administrative office:

1. Documents regarding the governing body including the charter, articles of incorporation, by-laws or other legal basis for existence, and names and addresses of current board of directors and officers of primary workers of the governing body.

2. Current health department inspection report.

3. Current fire department inspection report.

4. Weekly safety and sanitation inspection reports.

5. A list of current staff members, substitutes, and staffing pattern

6. Insurance coverage.

7. Annual audit.

7.713.63 Case Record for Youth

A. A record for each youth in care shall be maintained in a master file at the center where the youth resides which shall contain the following:

1. Name, age, sex, place of birth.

2. Initial intake information form and study;

3. Documented legal authority to accept juvenile;

4. Information on referral source;

5. Social history;

6. Medical consent forms;

7. Name, relationship, address, and phone number of parent(s) and/or guardian(s) and person(s) juvenile resides with at the time of admission;

8. Driver's license number, social security number, and Medicaid number, when applicable;

9. Court and disposition;

10. Signed release of information forms, when required;

11. Progress reports on program involvement;

12. Program rules and disciplinary policy signed by juvenile;

13. Grievance and disciplinary record, if applicable;

14. Referrals to other agencies; and

15. Written agreements signed by parents or legal guardians pertaining to permission to care for youth, financial responsibility, medical services, and other permits. This may include the placement agreement signed by the center and the placement agency or individual placing youth.

16. The treatment plan, a summary of the periodic evaluations of the child's progress, and resultant changes in treatment plan.

17. Educational records and reports;

18. Incident reports;

19. Summary recording of significant contacts with parents or guardians and other agencies involved.

20. A summary of the discharge of the youth from the center which includes, but is not limited to the following:

    a. The date of the discharge of the youth from the center,

    b. To whom the youth was released,

    c. The physical condition of the youth at time of discharge

    d. A summary of services provided during residence at the center.

    e. A summary of the youth's response to treatment, accomplishments during residence and psychosocial status at the time of discharge.

    f. The assessed needs which remain to be met and alternate service possibilities which might meet those needs.

    g. A statement of an aftercare plan and identification of agency responsible for follow-up services and after care.

    h. Circumstances which led to an unplanned discharge.

B. There shall be a health record maintained for each youth. The form and format of the health record, and the procedures for its maintenance and safekeeping shall be approved by the center's primary physician. The health record shall include but not be limited to the following:

1. The completed receiving screen form.

2. Health appraisal data forms.

3. All findings, diagnoses, treatments, dispositions.

4. Prescribed medications and their administration.

5. Laboratory, x-ray, and diagnostic studies.

6. Signature and title of documenter.

7. Consent and refusal forms.

8. Release of information forms.

9. Place, date, and time of health encounters.

10. Health service reports, e.g., dental, mental health and consultations.

11. Treatment plan, including nursing care plan.

12. Progress reports.

13. Discharge summary of hospitalization and other termination summaries.

7.713.64 Personnel Records

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

7.713.65 Incident Reports and Logs [Rev. eff. 6/1/12]

A. There shall be maintained a permanent log in which is reported a summary of situations involving individual or groups of youth for use by supervisory and treatment staff. Each shift of staff members shall prepare shift reports that record routine and emergency situations.

B. All special incidents such as emergency situations, injuries, physical management or major rule violations shall be recorded and reported as required in these rules, Section 7.714.53, et seq., and reported to the director of the facility or his/her designee. A copy of the record shall be maintained in the youth's case record.

7.713.66 Reports

A. A residential center shall notify immediately the youth's parent(s), guardian, and/or the placing agency of any illness, injury, or severe psychiatric episode resulting in medical treatment, hospitalization, or death.

B. Critical incidents shall be reported as outlined in Section 7.701.52.

7.714 QUALITY STANDARDS FOR TWENTY–FOUR (24)-HOUR CHILD CARE [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 and will apply to all child care applicants and licensees subject to licensing as a specialized group facility, residential child care facility, shelter residential child care facility, or psychiatric residential treatment facility. 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., 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's Plan" ("the Plan") is based upon an assessment of the child immediately following placement at the facility. It is developed by the facility for each child and must be consistent with the Family Service Plan for the child.

"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 a child by one adult for 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.

7.714.2 ADMISSION POLICY AND PROCEDURES [Rev. eff. 6/1/12]

A. Admission of a child shall be in keeping with the stated purpose of the child care facility and shall be limited to those children for whom the facility is qualified by staff, program, equipment, and needs of children already in residence to provide care deemed necessary. Care must be provided in the least restrictive, most appropriate setting in order to meet the child's needs.

B. Each facility shall have a written admission policy which at a minimum must include:

1. The policies and procedures related to intake.

2. The age range and sex of children accepted for care.

3. The needs, problems, situations or patterns best addressed by the facility's program.

4. Any pre-placement requirements for the child, the parent(s) or guardian, and/or the placing agency.

5. The anticipated criteria, problems, situations, and patterns that would result in the facility requesting removal of a child from placement prior to the planned discharge.

6. The facility's policy concerning self-admission of children, if appropriate, and the application of Section 27-10-103,C.R.S. (Voluntary Application for Mental Health Services) when a child is admitted for mental health treatment.

7. A statement regarding the religious orientation or affiliation of the facility, of the child care program, and of the activities at the facility, if applicable.

8. Opportunities for children's participation in recreational activities religious activities, and community life.

C. The written description of admission policies and criteria shall be provided to referring agencies and to parents or guardians of any child referred for placement.

D. The facility shall accept a child into care only after a preliminary assessment/screening of presenting problems in areas such as social, physical health, mental health, psychological concerns, previous physical or sexual abuse, and concerns about previous delinquent, assaultive, or destructive behavior, if appropriate, has been conducted.

E. The facility shall obtain a current comprehensive intake evaluation, including a social, health, and family history, developmental assessment or mental health evaluation, and a psychological evaluation, if determined to be necessary by the facility. Educational records shall be obtained 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.

7.714.3 RELIGION, RIGHTS, AND GRIEVANCE PROCEDURES

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

A. The facility shall have written policies and procedures that address and ensure the availability of each of the following core rights for children in residence. These rights may not be restricted or denied by the facility.

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

2. Every child has the right to a reasonable degree of privacy.

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

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

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

6. Every child has the right to receive adequate and appropriate medical and mental health and psychiatric care in the least restrictive setting possible, suited to meet individual needs.

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

8. Every child has the right to live in clean, safe surroundings.

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

10. Every child has the right to communicate with “significant others” outside the facility, such as a parent or guardian, caseworker, attorney or guardian ad litem, current therapist, physician, religious advisor, and, if appropriate, probation officer.

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

12. A child may be photographed upon admission for identification and administrative purposes of the facility pursuant to Section 19-3-306, C.R.S. Such photographs shall be confidential and shall not be released by the facility except pursuant to court order. No other non-medical photographs or videotaping shall be taken or used without the written consent of the child's parent or legal guardian except in the case of a child abuse or police investigation.

13. Every child has the right to the same consideration for care and treatment as anyone else regardless of race, color, national origin, religion, age, sex, political affiliation, sexual orientation, financial status or disability.

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

15. Every child has the right to receive assistance from the resident representative in filing a grievance and to receive copies of the grievance procedure.

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

17. Every child fifteen (15) years of age and older, who is not in the custody of human services, has the right to accept treatment of his/her own free will and may sign in as a voluntary resident. The child has the right to refuse to sign the consent for voluntary treatment at the time of admission or may take back the consent at a later date pursuant to Section 27-10-103, C.R.S.

B. The following children's rights may be limited to reasonable periods during the day or restricted according to written policies of the facility to ensure the protection of the children, staff, and program from unreasonable and unnecessary intrusions and disruptions and from health and safety hazards.

1. Every child has the right to have access to letter-writing materials, including postage, and to have staff members of the facility assist him/her if unable to write, prepare, and mail correspondence.

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

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

4. Every child has the right to wear his/her own clothes, keep and use his/her own personal possessions, and keep and be allowed to spend a reasonable sum of his/her own money.

5. Every child has the right to receive and send sealed correspondence. No incoming or outgoing correspondence shall be opened, delayed, held, or censored by the personnel of the child care facility.

C. Written policies that restrict or limit a child's rights as listed at 7.714.31, B, must include at a minimum:

1. Plans for how and when telephone and written communications will take place.

2. Plans for regular visits of the child with relatives, friends, or others interested in his/her welfare, both within and outside of the facility, unless in the judgment of treatment staff and the placement agency visits would be detrimental to the child and/or his/her family.

3. Plans for extenuating circumstances and emergency situations affecting the child and his/her family.

4. The requirement that the facility notify the child, if appropriate to the age of the child, and his/her parent(s) or guardian(s) at the time of admission of any policy that would limit or restrict a child's rights. The notification must be communicated in a language or mode of communication the child can understand and, if possible, be signed by the child and his/her parent(s) or guardian(s).

D. If the facility enforces any restrictions upon the child's rights as listed at 7.714.31, B, the facility must, in compliance with the written policy and procedure of the facility:

1. Inform the child and the child's family and custodian or legal guardian, in a language or mode of communication the child can understand, of the conditions of and reasons for restriction or termination, of his/her rights.

2. Place a written report summarizing the conditions of and reasons for restriction, denial, or termination of the child's rights in that child's case record or treatment record. Information pertaining to a restriction, denial, or termination of a child's rights contained in the child's treatment or case record must be made available, upon request, to the child or the child's guardian ad litem (GAL).

3. When a restriction of a child's rights affects another individual, the individual shall be informed, in a language or mode of communication the individual can understand, of the conditions of and reasons for the action.

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

A. The facility must designate a client representative and establish a written grievance procedure that provides adequate due process safeguards, spells out the appeal process and assures that children and parent(s) or guardian(s) are entitled to report any grievance and shall not be subject to any adverse action as a result of filing the grievance.

1. The facility must follow grievance procedures without alteration or interference and must respond to any grievance filed within 72 hours.

2. This grievance procedure shall be made available to all children as provided for in the resident rights.

3. If a grievance is filed with the facility, the grievance shall be recorded in the child's record along with the investigation findings and resulting action taken by the facility. Information regarding the grievance must be sent to the individual or agency holding legal custody of the child. A copy of the child's grievance may be sent to the parent with the child's permission.

4. A list of the resident rights shall be prominently posted in all facilities in areas frequented by children and legal guardians. These rights shall include the grievance procedure, the name, address, and telephone number of their resident representative, as well as a list of agencies where complaints may be filed.

B. A list of the children's rights and the grievance procedures must be provided and explained to the child and the parent or guardian in a language or manner of communication that they can understand.

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

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

A. A child in care at the facility shall be allowed and encouraged to celebrate his/her religious holidays.

B. Opportunity and assistance shall be provided for each child to practice the chosen/preferred religious beliefs and faith of his/her family. If the family has no preference, the individual preference of the child shall be respected. This includes, but is not limited to, making necessary arrangements for attendance of children at the appropriate religious institution or at a study group for religious instruction.

C. A child may be invited to participate in the religious activities of the facility.

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

E. Prior to placement of the child at the facility, the parent(s), guardian(s), and/or placing agencies must be notified of the practices, philosophy, and religious affiliation of the facility.

F. Any form of religious intervention used by the facility to control or change a child's behavior, or treat or heal a medical condition, must be approved, in writing, by the legal guardian(s) of the child prior to the use of the intervention.

G. A facility cannot deny medical care to a child because of the religious beliefs of the facility.

H. The child's family and/or guardian must be consulted prior to any planned change in religious affiliation made by the child while he/she is in care at the facility.

7.714.4 PROGRAM DESCRIPTION AND INDIVIDUAL CHILD'S PLAN [Rev. eff. 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 ail four of the child's extremities.

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

7. 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.

C. Within seven (7) calendar days of admitting a child in care, a facility shall begin a comprehensive assessment/evaluation of the child.

1. The assessment/evaluation shall be conducted by a planning team This team shall include persons responsible for implementing the plan on a daily basis and persons who have had direct interaction with and observation of the child.

2. The planning team shall assess and evaluate the needs and strengths of the child in at least the following areas where information is available:

a. Medical, health and dental care, including a health history of the child and family, and if appropriate health information regarding speech therapy, occupational therapy, and physical therapy needs of the child;

b. Mental and psychological health, including treatment history;

c. Education/vocation;

d. Personal/social development;

e. Family and community relationships;

f. Vocational training, if appropriate;

g. Recreation;

h. Life skills development;

i. Emancipation skills, if appropriate;

j. Legal status and history;

k. Treatment/placement history;

l. Alcohol/substance abuse history.

3. All direct assessments/evaluations of the child shall be conducted in the child's dominant language or mode of communication, including augmented or facilitated communication, if necessary, and shall take into consideration the child's age, disability, and cultural and religious background.

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

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

   a. The primary caregiver for the child;

   b. The child, unless contraindicated;

   c. His/her parent(s) or guardian(s), unless contraindicated;

   d. Representatives of the placing agency;

   e. School personnel;

   f. Other persons significant in the child's life, such as a GAL, attorney, religious advisor, and therapist.

   g. When any of the above persons do not participate, the facility shall have documentation of its efforts to involve the persons(s). When the involvement of parents(s) or guardian(s) of the child is deemed contraindicated by the agency or individual holding legal custody of the child, the reasons for contraindication shall be documented.

2. The individual plan shall include the following components:

   a. The findings of the assessment/evaluation.

   b. A statement of specific, measurable goals to be achieved or worked toward for the child and his/her family.

   c. Strategy for fostering, maintaining, and enhancing positive family relationships with the child and his/her family, including siblings, or other individuals considered like family, or guardian(s), and including the development of a permanent home for the child.

   d. Strategy for fostering, maintaining and enhancing active community involvement for the child.

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

   f. Specification of therapeutic services, specialized services, and strategies for positive behavior intervention that will be provided directly or arranged for, frequency of services, and method for ensuring their proper integration with the child's ongoing program activities.

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

   h. Goals and preliminary plans for discharge, aftercare, and moving to a less restrictive setting.

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

j. Signature by a representative of the facility, a representative of the placing agency, the child, if indicated, and the child's parent(s) or guardian(s).

k. Assurance by the facility that the plan and any subsequent revisions are explained to the child in care and his/her parent(s) or guardian(s) in a language or manner of communication the child and parent(s) or guardian(s) can understand.

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

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

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/after-care 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, 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 comers, splinters, protruding nails, broken play and recreational equipment.

C. Closets, attics, basements, cellars, and furnace rooms shall be kept free from accumulation of significant amounts of extraneous materials such as furnishings, newspapers, or magazines that could pose a fire or health hazard.

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

A. Fire hazards, such as defective electrical appliances and electric cords, dangerous or defective heating equipment or flammable material stored in such a manner as to create a risk of fire shall be corrected or eliminated.

B. The facility shall contain at least one U.L.-approved fire extinguisher on each floor of the facility that is highly visible, easily accessible, and in working condition, weighing not less than five pounds, that has a rating of 2A, 10BC. This requirement may be waived where more extensive fire-control measures are required by a local fire department.

C. A smoke detector, in working condition, must be installed on each level of the facility where child care occurs and near sleeping areas.

D. All heating units, gas or electric, shall be installed and maintained with safety devices to prevent fire, explosions, and other hazards. No gas or electric space heaters, open-flame gas or oil stoves, hot plates, or unvented heaters shall be used in the facility for heating purposes.

E. Flammables, aerosol paints, insecticides, chemicals, and other dangerous materials shall be locked or stored so they are inaccessible to children and must be stored in areas separate from sleeping or living areas. Flammables shall be stored in an OSHA approved container.

F. Heating devices such as radiators, registers, fireplaces, and steam and hot water pipes that pose a fire or burn hazard to children shall be screened or otherwise protected.

G. Flammable material must not be stored near a furnace, hot water heater, or other heating device.

H. There shall be no candles or other burnable objects permitted in sleeping areas.

I. Exit doors shall be obvious, clearly identified as an exit, and marked by an approved sign that is clearly visible from any direction of exit access. No lock or fastening to prevent free escape from the inside of any room used by the children shall be permitted except for a Department-approved locked quiet room.

J. Exit routes shall be kept free of any barriers to free escape including, but not limited to, discarded furniture, furnishings, laundry, and stacks of newspapers or magazines that could interfere with the prompt evacuation of the facility.

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

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

B. Fire exit drills must be held on each shift on a rotating basis with no less than one (1) shift per quarter so that all occupants are familiar with the drill procedure and their conduct during a drill is a matter of established routine.

C. Drills must be held at unexpected times and under varying conditions to simulate the conditions of an actual fire.

D. Drills must emphasize orderly evacuation under proper discipline rather than speed. Running or horseplay shall not be permitted.

E. Drills must include suitable procedures for ensuring that all persons in the facility actually participate.

F. A record of fire drills held over the past twelve (12) months must be maintained by the facility on a drill log, including the number of children and staff participating in the drill.

G. Fire alarm facilities shall be regularly used in the conduct of drills.

H. The facility shall make special provisions for the evacuation of any physically handicapped children in the facility.

I. The facility shall take special care to help emotionally disturbed or perceptually handicapped children understand the nature of such drills.

J. If appropriate to the location of the facility, tornado drills must be held often enough so that all occupants are familiar with the drill procedure and conduct during a drill is a matter of established routine. A record of tornado drills held over the past 12 months must be maintained by the facility.

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

A. All hazardous chemicals, tools, and other equipment, including matches, plastic bags, paints, gasoline, medicines, insecticides, and cleaning and laundry materials, shall be inventoried and stored in a secured locked area.

B. A facility shall not maintain any weapons such as firearms, air rifles, hunting bows, hunting knives, or hunting sting shots on the grounds or within the structure of the facility. A facility shall not permit any staff member or child to be in possession of any firearm on the grounds or within the structures of the facility. Chemical weapons, even when carried by staff members to and from work for protection, shall be locked when present at the facility. Weapons must not be transported in any vehicle in which children are riding. Law enforcement professionals are exempt from the requirements of this section if conditions of their employment require them to carry weapons.

C. The facility shall be equipped with adequate light, heat, ventilation, and plumbing for safe and comfortable occupancy.

D. All stairways containing more than four steps shall be equipped with a handrail.

E. The facility shall have an unblocked, non-mobile landline telephone, and emergency numbers shall be posted near the telephone, including those related to medical care, fire, law enforcement, and poison control where available. Numbers for the agency or person having legal custody of each child shall also be readily available.

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

A. A facility shall ensure that each child is provided with the transportation necessary for implementing the child's individual plan.

B. A facility shall have means of transporting children in cases of emergency.

C. Any vehicle used by the facility in transporting children in care, whether such vehicle is operated by a staff member or any other person acting on behalf of the facility, shall be properly licensed, and the vehicle shall be maintained in accordance with Colorado law.

D. Any staff member or other person acting on behalf of the facility operating a vehicle for purpose of transporting children shall be properly licensed to operate the class of vehicle in accordance with Colorado law.

E. Children under 21 years of age must be properly fastened into a child restraint system that conforms to all applicable Federal Motor Vehicle Safety Standards and pursuant to Colorado law.

F. A facility shall not allow the number of persons in any vehicle used to transport children to exceed the number of available seats in the vehicle.

G. The vehicle shall be enclosed and provided with door locks, and contain a First Aid kit and fire extinguisher.

H. A facility shall ascertain the nature of any need or problem of a child which might cause difficulty during transportation, such as seizures or a tendency toward motion sickness. The facility shall communicate this information to the driver of any vehicle transporting children in care.

I. The facility shall have a written policy concerning under what circumstances a vehicle may be driven by a licensed resident alone or with one resident passenger. Such driving privileges, if granted, shall be a part of the child's individual plan.

7.714.52 Discipline [Rev. eff. 6/1/12]

A. The facility shall have written policies and procedures regarding discipline that must be explained to all children, parent(s), guardian(s), staff, and placing agencies. These policies must include positive responses to a child's appropriate behavior.

B. Discipline shall be constructive or educational in nature and may include talking with the child about the situation, praise for appropriate behavior, diversion, separation from the problem situation, and withholding privileges.

C. Basic rights shall not be denied as a disciplinary measure.

D. Separation when used as discipline must be brief and appropriate to the child's age and circumstances. The child shall always be within hearing of an adult in a safe, clean, well-lighted, well-ventilated room in the facility that contains at least 50 square feet of floor space. No child shall be isolated in a bathroom, closet, attic, pantry, or garage.

E. Children in care at the facility shall not discipline other residents. This does not prohibit a facility from operating an organized therapeutic self-government program or positive peer culture that is conducted in accordance with the written policies of the facility and these rules, and is directly supervised by a staff member.

F. A facility shall prohibit all cruel and unusual discipline including, but not limited to, the following:

1. Any type of physical hitting or any type of physical punishment inflicted in any manner upon the body of the child such as spanking, striking, swatting, punching, shaking, biting, hair pulling, roughly handling a child, striking with an inanimate object, or any humiliating or frightening method of discipline to control the actions of any child or group of children.

2. Discipline that is designed to, or likely to, cause physical pain.

3. Physical exercises such as running or walking laps, push-ups, or carrying or stacking heavy rocks, bricks, or lumber when used solely as a means of punishment.

4. Assignment of physically strenuous or harsh work that could result in harm to the child.

5. Requiring or forcing a child to take an uncomfortable position such as squatting or bending, or requiring a child to stay in a position for an extended length of time such as standing with nose to the wall, holding hands over head, or sitting in a cross-legged position on the floor, or requiring or forcing a child to repeat physical movements when used solely as a means of punishment.

6. Group discipline except in accordance with the facility's written policy and these rules.

7. Verbal abuse or derogatory remarks about the child, his/her family, his/her race; religion, or cultural background.

8. Denial of any essential/basic program service solely for disciplinary purposes.

9. Deprivation of meals or snacks, although scheduled meals or snacks may be provided individually.

10. Denial of visiting or communication privileges with family, clergy, attorney, Guardian Ad Litem (GAL) or caseworker solely as a means of punishment.

11. Releasing noxious, toxic, or otherwise unpleasant sprays, mists, or aerosol substances in proximity to the child's face.

12. Denial of sleep.

13. Requiring the child to remain silent for a period of time inconsistent with the child's age, developmental level, or medical condition.

14. Denial of shelter, clothing or bedding.

15. Withholding of emotional response or stimulation.

16. Discipline associated with toileting, toileting accidents or lapses in toilet training.

17. Sending a child to bed as punishment. This does not prohibit a facility from setting individual bed times for children.

18. Force feeding a child.

19. 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]

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 [Ref. eff. 6/1/12]

At the time of admission to the facility, the legal custodian of the individual shall be notified that physical management or seclusion may performed in certain circumstances. For a facility to perform physical management or seclusion, the legal custodian must give written consent for physical management and/or seclusion to be performed on the individual. No physical management or seclusion shall be performed on an individual without the specific written permission of the individual’s legal custodian.

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

Facility staff, including pre-approved family foster care home providers, may only use:

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 structuring 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 [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 management.

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

1. A transitional measure may be used during an episode of physical 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. 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.

7.714.535 STAFF TRAINING [Rev. eff. 6/1/12]

A. Staff utilizing any physical management in facilities or programs shall be trained in the appropriate use and implementation of a model that includes nationally recognized criteria prior to any staff being approved to use physical management. The model shall include, at a minimum, the following:

1. 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.

a. Staff will be periodically observed when performing a physical management by a supervisor of the facility who has been training in physical management. If a supervisor of the facility determines a staff member did not correctly perform a physical management, the staff member must be immediately retrained or be restricted from performing further physical 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. How to assess the signs of physical distress in a person in restraint.

3. 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.

4. 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.

5. 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.

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.

7.714.536 DOCUMENTATION [Rev. eff. 6/1/12]

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.

7.714.537 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 Management

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

b. According to the policies and procedures of the facility, the entire individual's behavior management or treatment plan must be reviewed if it appears that the individual is being physically managed an excessive number of times, frequently in a short period of time, or frequently by the same staff member.

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

d. If either the individual or a staff member was seriously injured or died during a physical management, a thorough review of the physical management and injuries must be instituted immediately. Based on the findings of the review, the staff members involved in the physical management must be retrained, be restricted from performing further physical management, and/ or corrective personnel action must be taken.

e. If a staff member appears to be involved in a larger number of physical managements 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 individuals in care, prior physical management training, and need for further training or corrective personnel action as required by program's policies.

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.

C. Pursuant to Section 26-6-106(2)(k) of the Colorado Revised Statutes, a license can be suspended or revoked for failure to comply with the rules governing seclusion.

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

A. Educational/vocational programs shall be developed and provided for all school-age children who are residents of the facility in accordance with the individual child's plan, the Public School Finance Act and as required by the Exceptional Children's Educational Act and Rules and Regulations.

   1. Children shall attend educational/vocational programs in the most appropriate and least restrictive educational setting for the child, including, but not limited to, attending regular classes conducted in accredited elementary, middle, and secondary schools within the community.

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

   3. The facility shall develop assurances that the educational/vocational program is an integral part of the total plan. Such assurances shall include procedures for information sharing, joint planning, and follow-through.

B. In order to ensure that all students who may have disabilities are provided an appropriate education, the facility shall ensure that adequate “child find” procedures are utilized. Such procedures shall be developed cooperatively with local education agencies (LEA) in accordance with Exceptional Children's Educational Act rules and regulations and LEA procedures. Child find includes a process for screening, referring, assessing and staffing students suspected of having a disabling condition.

C. The facility that operates its own educational program shall provide adequate space, staff, equipment and educational materials as required in Exceptional Children's Educational Act Rules and Regulations.

D. School records shall be transmitted according to State law, pursuant to Section 24-72-204, C.R.S., and the Individuals with Disabilities Education Act (IDEA).

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

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

A. The facility shall reflect consideration for, and sensitivity to, the racial, cultural, ethnic and/or religious backgrounds of children in care. The facility shall involve a child in cultural and/or ethnic activities appropriate to his/her cultural and/or ethnic background.

B. The facility shall utilize available services, facilities, and activity programs of the community, and children shall be given 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 shall be provided work opportunities according to the established policy of the facility and the age of the child, and shall have opportunities to experience the use and value of money by making purchases for items according to their own choice.

1. Money earned, received as a gift, or received as allowance by a child in care shall be deemed to be that child's personal property. The facility shall maintain a written record of all monies earned or given to a child.

2. Limitations may be placed on the amount of money a child may possess or have access to when such limitations are considered to be in the child's best interests.

3. The facility may deduct reasonable sums from a child's allowance as restitution for damages done by the child. Restitution must be negotiated with the child and based on the child's ability to pay. The facility may deduct no more than half of what a child earns or was given during a week. A written record of damages and any restitution paid by a child must be maintained by the facility.

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

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

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

G. Paid or voluntary work assignments outside of the facility shall be approved by the administrator of the facility, a staff member, or the parent(s) or guardian(s) of the child, who shall know the employer, the specific type of work, and the conditions of employment.

H. A child shall not be exploited in any manner. A child may not participate in solicitation on behalf of the facility for a fund- raising activity without the written permission of the parent(s) or guardian(s) for each specific activity, and the child must be willing to participate in the activity.

7.714.8 PERSONAL CARE OF THE CHILD

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

A. The facility shall ensure the availability of a comprehensive program of preventive, routine, and emergency medical and dental care for each child in care. Every reasonable effort shall be made to obtain routine and corrective dental care. The facility shall have a written plan for providing such care. This plan shall include at a minimum:

1. Assignment of one person to be responsible for the coordination of medical care for the children residing in the facility.

2. Ongoing appraisal of the general health of each child, including immunizations, in accordance with state law and regulations.

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

4. Provision of health education, which includes sex education, and birth control information and education, age appropriate to the child.

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

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

7. Procedure for obtaining the written authorization from the child’s legal guardian or custodian prior to any new psychotropic medication being dispensed.

8. Procedures for dispensing medication, storage of medication, documentation of administration of all medication, disposing of medications when not needed or no longer in use, and notification to a primary physician in cases of medication errors and/or drug reactions.

B. A general medical examination for each child must be completed or scheduled with a physician, physician's assistant or a nurse practitioner prior to or within fourteen (14) calendar days following admission. A statement from the examiner shall be retained in the child's file. This exam shall include the following:

1. An examination for physical injury and disease.

2. Vision and hearing screening.

3. A current assessment of the child's health, including immunizations.

C. Whenever indicated, a child shall be referred to an appropriate specialist for either further assessment or treatment.

D. Subsequent physical and other examinations shall be done annually or as directed, in writing, by the physician or other qualified health professional.

E. Dental examinations for all children three years of age or older, or at a younger age if recommended by a physician or dentist, must have been completed within four months prior to placement or within eight (8) weeks following placement. The facility or governing body shall ensure that each child receives a dental examination every six months or as required in writing by a dentist.

F. At all times there shall be first aid supplies readily available at the facility and at least one (1) person present at the facility and supervising the children for every 20 children present, who is certified in First Aid or the equivalent and CPR for all ages of children in care.

G. The facility, in conjunction with the parent(s) or guardian(s), shall make every effort to ensure that a child needing corrective devices such as glasses, hearing aids, etc., is provided with the necessary equipment.

H. The facility has the right to request a statement regarding the child's general health from a medical examiner. In a potentially life- threatening situation, the facility shall refer the child's care to the appropriate medical and legal authority. If a child wishes an exemption from a medical examination or medical treatment due to religious beliefs, the child shall submit a written statement signed by his/her parent(s) or guardian(s) which states the reasons for such an exemption. The facility has the right to refuse admission to a child whose parent(s) or guardian(s) refuses medical treatment or examination based upon religious convictions.

I. The facility shall regularly maintain and update a child's Human Services Health Passport, or a document containing all the information listed in the Health Passport, for children placed by a county department of social services. If received, the original of the document shall be given to the caseworker upon the child's discharge so that it can be given to the facility where the child is being admitted or to the child's parent(s), guardian(s), or family member(s) with whom the child is placed.

J. Medications shall be administered and stored in the following manner:

1. When a child first comes into care, the facility shall ascertain all medication the child is currently taking.

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

3. All prescriptive medications shall be administered only upon the written prescription of a physician or nurse practitioner. The facility shall also obtain written authorization from the prescribing physician or nurse practitioner to administer any non-prescriptive medication, including dietary supplements.

4. The facility shall have a written medication schedule for each child to whom medication is prescribed, a copy of which shall be available to staff.

5. In an emergency situation, non-prescriptive medication may be administered on the verbal authorization of a physician. Written confirmation must then be obtained for the verbal authorization.

6. The facility shall maintain for each child a cumulative record of all medication, both prescriptive and non-prescriptive, dispensed to that child including:

a. The name of the child.

b. The name and dosage of medication.

c. The time and date the medication was dispensed.

d. The name of the person administering the medication.

7. The facility shall document the following information as it relates to handling and dispensing medication:

a. Documentation of:

1) all medication errors; and,

2) drug reactions.

b. Documentation of all discontinued medication and disposing of medications.

8. Only staff members trained and authorized by State statute shall administer medications. All direct care staff shall be trained in the recognition of common side effects of medication.

K. In all instances where a new prescription medication is to be ordered as a part of a treatment program, the following information shall be provided to the client and his/her custodian or legal guardian:

1. The name of the medication being prescribed;

2. The proper use of the medication;

3. The reasons for ordering the medication for this client;

4. A description of the benefits expected;

5. The common side effects, if any;

6. The major risks, if any;

7. The probable consequences of not taking the medication explained in a language or mode of communication that is easily understood by the child, his/her family and/or legal guardian.

L. No involuntary medications may be administered.

M. The facility shall have policy and procedures for documenting that the required information was given to the child before the child took the medication. When information is given to the child, the documentation shall include an assessment regarding whether the child understood.

N. The child may refuse to take his/her medication at any time. The facility must document the refusal in the medication log.

O. No child shall be threatened with or experience adverse behavioral consequences by staff action due to refusal to take medication.

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

A. The facility shall provide nutritious foods in the variety and amounts as appropriate for the age, appetite, and activity of each child in care.

B. At least three nourishing, wholesome, well-balanced meals a day shall be offered at regular intervals except when children receive their morning and/or noon meal(s) at school. No more than fourteen (14) hours shall elapse between the evening and morning meals. Nourishing snacks shall be part of the daily food provided.

C. Children shall be encouraged to eat a variety of the food served but shall not be subjected to undue coercion, including forced feeding, or punished for refusal to eat.

D. All food shall be from sources approved or considered satisfactory by the local health department.

E. There shall be a record made of the special diets prescribed and prepared for a child.

F. Children must not be given foods that are contrary to their religious beliefs, or those of their family, or are known to cause an allergic reaction or a health hazard.

G. Water shall be readily accessible to children.

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

A. The facility shall establish procedures to ensure that children receive training in good habits of personal care, hygiene, and grooming appropriate to their age, gender, race and culture.

1. There shall be supervision by staff to provide for proper grooming and physical cleanliness of the children.

2. The facility shall ensure that children are provided with necessary and appropriately maintained toiletry items, individual towels and washcloths, toothbrush, toothpaste, comb, and shampoo.

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

1. Daily routines shall not be allowed to conflict with the implementation of a child's plan.

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

3. Opportunity for physical exercise shall be planned for each child.

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

A. The facility shall allow a child in care to bring his/her personal belongings to the program, as defined by the facility policy, and to acquire belongings of his/her own in accordance with 1he child's plan. However, the facility shall, as necessary, limit or supervise the use of these items while the child is in care. Where extraordinary limitations are imposed, the child shall be informed of the reasons, in a language or manner of communication the child can understand. The decision and reasons shall be recorded in the child's case record. Provisions shall be made for the protection of the child's property.

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

1. Each child's clothing shall be distinguished as his/her own in accordance with the facility's policies.

2. A child's clothing shall be kept clean and in good repair. The child shall be involved, as appropriate, in the care and maintenance of his/her clothing. As appropriate, laundering, ironing, and sewing facilities shall be accessible to tie child.

C. The facility shall ensure that discharge plans make provisions for clothing needs at time of discharge. The wardrobe for each child shall go with him/her at time of discharge.

7.714.9 PERSONNEL/POLICY REQUIREMENTS

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

A. The facility shall provide adequate numbers of staff to assure the health and safety and the proper care and treatment of the children in care.

B. All staff in the facility shall demonstrate an interest in, and a knowledge of, children and a concern for their proper care and well- being.

C. The facility shall have written screening procedures and make reasonable efforts to evaluate the overall emotional health and stability of each applicant and/or staff member. Procedures should include exploring for any history of child battering, child abuse, child molestation, child neglect, or previous criminal convictions.

D. A facility shall not hire or continue to employ any person whose health, educational achievement, or emotional or psychological makeup impairs his/her ability to properly protect the health and safety of the children in care, or who could endanger the physical or psychological well-being of the children.

E. A staff member who, upon examination or as a result of tests, shows indication of a physical condition which could be hazardous to a child, other staff, or self, or which would prevent performance of duties, shall not be assigned or returned to his/her position until the condition has cleared to the satisfaction of the examining physician or nurse practitioner.

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

A. The facility shall have a comprehensive written plan for the recruitment, hiring or certification, orientation, ongoing training, and professional development of staff.

1. The facility shall have an introductory training and orientation program for all staff. This program shall include orientation to emergency and safety procedures and the general and specific duties and responsibilities of the job.

2. The facility shall maintain written documentation of specific in-service training held, staff participating in the training, the hours involved, and/or other on-going training activities in which staff were involved. Activities related to supervision of the staff members' routine tasks shall not be considered training activities for the purpose of this requirement.

B. The facility shall document that staff receive appropriate training in the following areas:

1. The facility's emergency and safety procedures, including but not limited to fire evacuation drills and disaster drills, on at least a semiannual basis.

2. The principles and practices of child care, including developmentally appropriate practices.

3. The facility's and, where appropriate, certifying authority's administrative procedures and overall program goals.

4. Acceptable behavior management techniques, appropriate discipline 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.

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

6. Annual review of these regulations by all appropriate staff members of the facility.

7. 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.

8. Individuals that are qualified by education, training, and experience must provide staff training.

9. 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. The facility must document in the staff personnel record that the training and demonstration of competency were successfully completed. Documentation must include the date training was completed and the name of persons certifying the completion of training.

7.714.93 Records and Reports

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

A. The facility shall have a policy as to the maintenance, storage and confidentiality of records.

B. Records shall be the property of the facility and shall be protected against loss, tampering, or unauthorized use.

C. Facts learned about children and their families shall be kept confidential, with the following exceptions:

1. In medical emergencies, and then only when the assistance and/or expertise is required of that unauthorized person; or

2. To the child, his/her parent(s) or guardian(s) and their respective legal counsel(s), a court having jurisdiction over the child, or an authorized public official, or licensing representative in performance of his/her mandated duties; or,

3. If the parent(s) or guardian(s) has given voluntary, written consent.

D. School records shall be transmitted according to State law, pursuant to Section 24-72-204, C.R.S., and the Individuals with Disabilities Education Act.

E. Medical records shall be kept in a secure location at the facility and only be released in accordance with the Health Insurance Portability and Accountability Act (HIPAA).

F. Any information concerning observed behavior which reasonably appears to constitute a criminal offense committed on the premises of a facility or any criminal offense committed against any person while performing or receiving services is not considered privileged or confidential.

G. All researchers conducting clinical research must sign an oath of confidentiality. All information identifying individual children by name, address, telephone number and/or social security number collected for research purposes, shall not be disclosed.

H. When names are deleted and other identifying information is disguised or deleted, material from case records may be used for teaching purposes, development of the governing bodies' understanding and knowledge of the facilities' services or similar educational purposes.

I. Information regarding treatment for alcohol or drug abuse may be released only in compliance with the Federal Regulations on Confidentiality of Alcohol and Drug Abuse Resident Records, 42 CFR, Part 2. No amendments or later editions incorporated.

7.714.932 Records [Rev. eff. 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, 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 Service 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 client. 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.

7.715 STANDARDS FOR HOMELESS YOUTH SHELTERS

7.715.1 INTRODUCTION [Rev. eff. 9/15/12]

All rules in Section 7.715 will be known and hereinafter referred to as the Standards for Homeless Youth Shelters. All homeless youth shelters shall comply with the General Rules for Child Care Facilities located at Section 7.701.

7.715.11 Definitions [Rev. eff. 9/15/12]

"Homeless youth" is defined in the general rules at Section 7.701.21.

"Homeless youth shelter" is defined in the general rules at Section 7.701.21.

"Religion" when used in these rules includes traditional religious beliefs and spiritual beliefs such as those of Native Americans.

"Staff member" of the shelter, as used in these rules, includes staff that work time-limited work shifts and do not live at the shelter on a permanent basis.

7.715.2 MANAGEMENT REQUIREMENTS

7.715.21 Governing Body

A. The governing body is the individual, partnership, corporation or association in whom the ultimate authority and legal responsibility is vested for the conduct of the shelter.

B. When the governing body does not include a board of directors, there shall be an advisory committee of at least two other individuals who act in an advisory capacity to the governing body. The names of the advisory committee members shall be disclosed to the Department. The advisory committee shall meet at regularly- stated intervals.

C. Minutes of the advisory committee or the board of directors shall be maintained. The minutes shall be available to the Department upon request, except that the minutes containing confidential personnel information need not be shared with the Department.

D. The functions of the governing body shall include:

1. The appointment of an administrator who shall be responsible, according to established performance criteria, to the governing body, and shall delegate to him/her the executive authority and responsibility for the administration of the shelter according to its defined purpose.

2. The formulation and regularly-planned review of policies and procedures to be followed by the shelter.

3. The provision of necessary facilities, adequate financing, qualified personnel, services, and program functions for the welfare and safety of youth in accordance with these standards.

7.715.22 Fiscal Management

A. A shelter shall demonstrate that it is financially sound and manages its financial affairs prudently. All funds disbursed by the shelter shall be expended in accordance with the program objectives as specified by the governing body.

B. A shelter shall demonstrate fiscal accountability through regular recording of its finances.

7.715.23 Insurance

A. Every shelter shall carry public liability insurance. The applicant or licensee shall submit the amount of the insurance and the name and the address of the insurance agency providing the insurance for the shelter. Information about the insurance should be maintained at the shelter.

B. Facilities operating their own transportation vehicles shall carry insurance in compliance with the minimum limits as required by the Colorado Revised Statutes.

C. The shelter shall carry workman's compensation and unemployment insurance as required by law.

7.715.3 HUMAN RESOURCES

7.715.31 Administrative Staff

A. Administrator

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

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

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

2. The administrator shall assume the following duties:

   a. Overall direction and responsibility for the youth, program, shelter, and fiscal management.

   b. Overall direction and responsibility for supervision of adequate staff.

c. The selection and training of a capable staff member who can assume responsibility for management of the shelter in the administrator's absence.

d. The establishment of relationships and contact maintenance with allied agencies, services, and resources within the community.

B. Assistant or Acting Administrator

1. In each youth care shelter, there shall be a specifically designated staff member, age 21 or over, capable of acting as a substitute for the administrator during his/her absence. The duties and responsibilities of the substitute administrator shall be clearly defined in order to avoid confusion and conflict among other staff and youth.

2. If the administrator is regularly absent from the shelter more than 50 percent of his/her working hours, an assistant administrator shall be appointed who meets the same qualifications as the administrator found at Section 7.715.31, A.

C. Administrative Coverage

1. The Department shall be notified in writing when a possible change in administrator is anticipated or at the time there is a change in administrator. Documents verifying the qualifications of the acting/interim or new administrator, including official transcripts and documents verifying work experience, shall be submitted to the Department.

2. The administrator or the staff member to whom the administrator has delegated responsibility shall be available at all times.

7.715.32 Youth Care Staff

A. Each youth care staff shall be at least 21 years of age and have completed two years of college education. A high school diploma or equivalent and one year's experience in the human services field may be substituted for the required college.

B. Each peer counselor shall be at least 17 years old and shall work directly under the supervision of a youth care staff in activities specified by the youth care staff or with the approval of the shelter director.

C. Relief staff shall have the same qualifications as regularly assigned youth care staff.

D. There shall be one staff member that has basic knowledge and understanding of nutrition, food purchasing, menu planning, food handling, preparation, and storage.

7.715.33 Youth Care Staff-to-Youth Ratios [Rev. eff. 9/15/12]

A. There shall be a minimum of one (1) adult qualified as a youth care staff on duty and one (1) adult on call who can be summoned at all times when there is one youth or more at the shelter.

B. At night there shall be at least one awake staff person within each physically separate building, and within hearing of youth, and a second person who can be immediately summoned in case of emergency.

C. The ratio of youth care staff to youth in care shall be dependent on the needs of the youth. The ratio of on duty staff shall not be less than the following schedule except when transporting youth in vehicles (see Section 7.715.87):

Age of Youth	Waking Hours	Sleeping Hours
18 years and over	1 staff member: 20 youth	1 staff member: 20 youth
11 to 18	1 staff member: 20 youth	1 staff member: 20 youth

For facilities that serve youth under the age of eighteen, and youth over the age of eighteen, a separate staff member is required to serve each population.

The ratio of youth care staff to youth in care does not apply to the adult on call identified in provision A, above. A single individual can serve as the adult on call when a facility size or age range requires more than one on duty adult staff member.

7.715.34 Volunteers and Students

A. If volunteers or students are used by a shelter, the administration shall define specifically the services to be given by that individual.

B. Volunteers and students who are assigned to work directly with the youth shall:

1. Be subject to reference checks similar to those performed for employment applicants.

2. Be in good general health. The shelter has the right to contact the individual's physician.

C. Volunteers and students shall be:

1. Directly supervised by a paid staff member.

2. Oriented and trained in the philosophy of the shelter, confidential nature of their work, and the specific job which they are to do, prior to assignment.

7.715.35 Medical and Health Staff

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

7.715.36 Case Management Staff and Other Professional Staff

A. Case management shall be provided by:

1. A qualified professional having a master's degree in social work, psychology, or child development from an accredited college or university. This professional shall have two years of treatment-oriented experience, or

2. A designated member of the staff, who shall have a bachelor's degree from an accredited college or university with a major in behavioral science, human services or related fields, and three years experience in working with youth, or a designated member of the staff, who shall have at least five years verified full-time experience working with homeless or runaway youth; and for whom there is an effective arrangement for consultation from a qualified professional as described above.

3. The qualified professional, as specified in Section 7.715.36, A, 1, may be a full-time or part-time employee of the shelter, a staff member of a recognized agency, or an individual with which the shelter has a contract to provide the necessary services and/or consultation.

4. The ratio of case management staff to youth shall be dependent on the type of shelter and the needs of the youth therein, but there shall be at least one full-time case management staff member for every twenty (20) youth, or a part-time staff member assigned for a fraction thereof.

B. The case management staff shall be responsible for providing case management services as stated at Section 7.715.42, B.

C. Youth in need of specific individual therapy shall be referred to an appropriate treatment provider.

7.715.37 General Requirements for All Staff

A. The shelter shall provide adequate numbers of staff to assure the health and safety and the proper care and treatment of the youth in care.

B. All staff in the shelter shall demonstrate an interest in, and a knowledge of, youth and a concern for their proper care and well-being.

C. The shelter shall have written screening procedures and make reasonable efforts to evaluate the overall emotional health and stability of each applicant and/or staff member. Procedures should include exploring for any history of youth battering, youth abuse, youth molestation, youth neglect, or previous criminal convictions.

D. Each staff member, including part-time staff and substitute staff, shall have on file at the shelter verification of tuberculin status. If the staff member has a certificate of previous negative testing, the testing does not need to be repeated. If there is no certificate, the testing needs to be completed prior to employment or certification.

E. A staff member who, upon examination or as a result of tests, shows indication of a physical condition which could be hazardous to a youth, other staff, or self, or which would prevent performance of duties, shall not be assigned or returned to his/her position until the condition has cleared to the satisfaction of the examining physician or nurse practitioner.

7.715.38 Personnel Policy, Orientation, and Training

A. The shelter shall have a comprehensive written plan for the recruitment, hiring or certification, orientation, ongoing training, and professional development of staff.

1. The shelter shall have an introductory training and orientation program for all staff. This program shall include orientation to emergency and safety procedures and the general and specific duties and responsibilities of the job.

2. The shelter shall maintain written documentation of specific in-service training held, staff participating, the hours involved, and/or other on-going training activities in which staff were involved. Activities related to supervision of the staff members' routine tasks shall not be considered training activities for the purpose of this requirement.

B. The shelter shall document that all staff receive appropriate training in the following areas:

1. The shelter's emergency and safety procedures, including but not limited to fire evacuation drills, tornado drills, where appropriate, and flood evacuation drills, where appropriate, on at least a semiannual basis.

2. Universal precautions regarding safe work practices to prevent exposure to blood and bodily fluids.

3. The principles and practices of working with youth.

4. The shelter's administrative procedures and overall program goals.

5. Acceptable behavior management techniques, including appropriate discipline in accordance with shelter policies and these rules.

6. Appropriate professional boundaries (both physical and emotional) between staff and youth while in placement at the shelter and after discharge.

7. Positive and constructive methods of dealing with the youth including but not limited to physical structuring of the environment and de-escalation of crisis situations.

8. Annual review of these regulations by all appropriate staff members of the shelter.

9. All staff must have twenty-clock hours of on-going job specific training a year. Training may include areas listed above.

7.715.4 PROGRAM

7.715.41 Program Description

A. The shelter shall have a written overall program description for the shelter.

B. The written description shall address at least the following areas:

1. Case Management Provided

2. Family counseling

3. Education

4. Shelter provided (housing, food, clothing)

7.715.42 Case Management Services

A. A staff member qualified as stated at Section 7.715.36, A, shall be assigned the responsibility for case management for each youth.

B. Each individual assigned the responsibility of providing case management services for a youth shall:

1. Participate actively in the treatment planning, discharge and after care planning.

2. Assure that appropriate information concerning the youth and her/his background is shared with other staff members who deal with the youth regularly and to maintain communication with parents, guardians, if available, and with the individual or agency responsible for discharge planning and follow-up care of the youth, if applicable.

3. Assure that the plan developed for each youth is implemented, and documented in the youth's file.

7.715.43 Admission Policy and Procedures [Rev. eff. 9/15/12]

A. Admission of a youth shall be in keeping with the stated purpose of the homeless youth shelter and shall be limited to those youth for whom the shelter is qualified by staff, program, equipment, and needs of youth already in residence to provide care deemed necessary. Care must be provided in the least restrictive, most appropriate setting in order to meet the youth's needs.

B. Each shelter shall have a written admission policy which at a minimum must include:

1. The policies and procedures related to intake.

2. The age range and sex of youth accepted for care.

3. The needs, problems, situations or patterns best addressed by the shelter's program.

4. The anticipated criteria, problems, situations, and patterns that would result in the shelter requesting removal of a youth.

5. A statement regarding the religious orientation or affiliation of the shelter, and of the religious activities at the shelter, if any.

6. A statement regarding any charges or costs for services that may be expected from the youth, the youth's family or others who may be responsible for the youth.

C. The shelter shall accept a youth into care only after a preliminary assessment and screening of presenting problems in areas such as social, physical health, mental health.

D. Upon admission of a youth to a shelter, the shelter shall provide all necessary services pursuant to Section 26-5.7-106(2), C.R.S.

E. Within 24 hours of arrival at the shelter, a youth shall be given an orientation to the shelter, consistent with the youth's age and ability to participate, which includes at least the following:

1. Tour of the shelter and instruction on fire alarm and fire evacuation procedures, escape routes and exits.

2. The rules/regulations of the shelter.

3. Procedures affecting the youth's behavior, including limiting or restricting a youth's rights where allowed, the type of discipline used in the shelter, and consequences for certain behaviors.

4. The complete youth's rights and youth's grievance procedures as developed by the shelter or by the certifying authority.

F. For youth under the age of eighteen (18), if reconciliation with the youth's family has not occurred within forty-eight (48) hours following admission to the shelter, excluding Saturdays, Sundays and legal holidays, and the director of the shelter or other person in charge does not anticipate that reconciliation will be achieved within twenty-one (21) consecutive days, the director or other person in charge shall provide the youth and the youth's parent with a written statement identifying:

1. The availability of counseling services;

2. The availability of longer term residential arrangements; and

3. The possibility of referral to the county department.

G. Youth may reside at a shelter for a period not to exceed twenty-one (21) consecutive days unless the youth is paced in a voluntary alternative residential placement pursuant to Section 26-5.7-107 or 26-5.7-108, C.R.S.

For youth under the age of eighteen (18), a voluntary residential agreement shall be developed with the involvement of the youth and, if possible, the youth's parent or the legal guardian(s). Where the involvement of any of these is not feasible or desirable, the reasons for the exclusion shall be recorded by the shelter. If the youth and the youth's parent cannot agree on an initial voluntary alternative residence within twenty-one (21) days, the shelter may make a referral to the county department. If an agreement can be reached, the placement agreement shall include at least the following information:

1. Discussion of the youth's and the parent's or guardian's expectations regarding: family contact, reconciliation and involvement; how family contact and involvement are to occur, the nature and goals of care, the anticipated planned discharge date and the plan for the youth following discharge.

2. A delineation of the respective roles and responsibilities of all agencies and persons involved with the youth and his/her family.

3. Legal status or custody of the youth.

4. If a youth is placed by a Colorado county department of social services, the appropriate state form or contract shall be completed. This form or contract may provide some of the required authorizations.

For youth between the age of eighteen (18) and twenty-one (21), the voluntary residential agreement shall be developed with the involvement of the youth. Other individuals may participate in the development of the agreement at the youth and shelter's discretion The agreement shall include at least the following information: the nature and goals of care, the anticipated planned discharge date, and the plan for the youth following discharge.

H. Pursuant to Section 26-5.7-105(5), C.R.S., if the director of the homeless youth shelter or other person in charge determines that a referral for additional services needs to be made, the director or other person in charge shall make a referral to the county of residence of the parents of the youth.

For youth under the age of eighteen (18), the shelter will contact the county department of residence of the parents of the youth for the limited purpose of determining whether a county department is serving the youth.

I. Pursuant to Section 26-5.7-105(4), C.R.S., when a youth under fifteen years of age is admitted to a licensed homeless youth shelter, the director of the shelter or other person in charge shall notify the county department of residence of the parents of the youth within seventy-two (72) hours of the youth's admission.

J. Pursuant to Section 26-5.7-105(7), C.R.S., if a youth who is at least eleven (11) years of age but less than fifteen (15) years of age has been served up to twenty-one (21) consecutive days and returns again to the licensed homeless youth shelter after leaving the shelter, the director of the shelter or other person in charge shall notify the county department of residence of the parents of the youth within seventy-two (72) hours of the youth's admission.

K. If the shelter staff know the youth is away from home without permission, the shelter shall notify the youth's parent or law enforcement pursuant to Section 26-5.7-106, C.R.S.

7.715.44 Youth Rights

A. The shelter shall have written policies and procedures that address and en sure the availability of each of the following core rights for youth in residence. These rights may not be restricted or denied by the shelter.

1. Every youth has the right to enjoy freedom of thought, conscience cultural and ethnic practice, and religion.

2. Every youth has the right to a reasonable degree of privacy.

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

4. Every youth has the right to receive appropriate and reasonable adult guidance, support and supervision.

5. Every youth has the right to be free from physical abuse or neglect and inhumane treatment. Every youth has the right to be protected from all forms of sexual exploitation.

6. Every youth has the right to receive adequate, appropriate, and timely emergency medical care.

7. Every youth has the right to receive adequate and appropriate food, clothing, and housing.

8. Every youth has the right to live in clean, safe surroundings.

9. Every youth has the right to participate in an educational program that will maximize his/her potential in accordance with existing law.

10. Every youth has the right to communicate with others outside the shelter, such as a parent or guardian, caseworker, attorney or guardian ad litem, current therapist, physician, religious advisor, and, if appropriate, probation officer.

B. The following youth's rights may be limited to reasonable periods during the day or restricted according to written policies of the shelter to ensure the protection of the youth, staff, and program from unreasonable and unnecessary intrusions and disruptions and from health and safety hazards.

1. Every youth has the right to have access to letter-writing materials, including postage, and to have staff members of the shelter assist him/her if unable to write, prepare, and mail correspondence.

2. Every youth has the right to have access to telephones to both make and receive local emergency telephone calls.

C. Written policies that restrict or limit a youth's rights as listed at Section 7.715.44, B, must include at a minimum the requirement that the shelter notify the youth at the time of admission of any policy that would limit or restrict a youth's rights. The notification must be communicated in a language or mode of communication the youth can understand and, if possible, be signed by the youth.

D. If the shelter enforces any restrictions upon the youth's rights as listed at Section 7.715.44, B, the shelter must, in compliance with the written policy and procedure of the shelter

1. Inform the youth in a language or mode of communication the youth can understand, of the conditions of and reasons for restriction or termination of his/her rights.

2. Place a written report summarizing the conditions of and reasons for restriction, denial, or termination of the youth's rights in that youth's case record along with information about if or when the youth's right(s) can be restored. This Information must be made available to the youth upon request.

3. When a restriction of a youth's rights affects another youth at the shelter, the youth shall be informed, in a language or mode of communication the individual can understand, of the conditions of and reasons for the action.

7.715.45 Youth's Grievance Procedure

A. The shelter must establish a written grievance procedure that provides adequate due process safeguards, spells out the appeal process, and assures that youth and parent(s) or guardian(s) are entitled to report any grievance and shall not be subject to any adverse action as a result of filing the grievance.

1. The shelter must follow grievance procedures without alteration, interference, or unreasonable delay.

2. If a grievance is filed with the shelter, the grievance shall be recorded in the youth's record along with the investigation findings and resulting action taken by the shelter.

B. A list of the youth's rights and the grievance procedures must be provided and explained to the youth and the parent or guardian in a language or manner of communication that they can understand.

7.715.46 Discipline [Rev. eff. 6/1/12]

A. The shelter shall have written policies and procedures regarding discipline that must be explained to all youth, parent(s), guardian(s), staff, and placing agencies. These policies must include positive responses to a youth's appropriate behavior.

B. Discipline shall be constructive or educational in nature and may include talking with the youth about the situation, praise for appropriate behavior, diversion, separation from the problem situation, and withholding privileges.

C. Basic rights shall not be denied as a disciplinary measure.

D. Youth in care at the shelter shall not discipline other residents.

E. A shelter shall prohibit all cruel and unusual discipline including, but not limited to, the following:

1. Any type of physical hitting or any type of physical punishment inflicted in any manner upon the body of the youth such as spanking, striking, swatting, punching, shaking, biting, hair pulling, roughly handling a youth, striking with an inanimate object, or any humiliating or frightening method of discipline to control the actions of any youth or group of youth.

2. Discipline that is designed to, or likely to, cause physical pain.

3. Physical exercises such as running laps, push-ups, or carrying heavy rocks, bricks, lumber or other heavy items when used solely as a means of punishment.

4. Assignment of physically strenuous or harsh work that could result in harm to the youth.

5. Requiring or forcing a youth to take an uncomfortable position such as squatting or bending, or requiring a youth to stay in a position for an extended length of time such as standing with nose to the wall, holding hands over head, or sitting in a cross-legged position on the floor, or requiring or forcing a youth to repeat physical movements when used solely as a means of punishment.

6. Group discipline except in accordance with the shelter's written policy and these rules.

7. Verbal abuse or derogatory remarks about the youth, his/her family, his/her race, religion, or cultural background.

8. Denial of any essential/basic program service solely for disciplinary purposes. This does not prohibit the shelter from requesting the youth to leave the shelter because of inappropriate behavior.

9. Deprivation of meals or snacks to a youth that has not been requested to leave the shelter.

10. Releasing noxious, toxic, or otherwise unpleasant sprays, mists, or aerosol substances in proximity to the youth's face.

11. Denial of sleep.

12. Requiring the youth to remain silent for a period of time inconsistent with the youth's age, developmental level, or medical condition.

13. Denial of shelter, clothing or bedding to a youth that has not been requested to leave the shelter.

14. Withholding of emotional response or stimulation.

15. Use of physical management, seclusion or restraint as discipline for a youth.

7.715.47 Non-Discrimination

In compliance with Section 7.701.14, the shelter shall not discriminate against a youth based upon race, religion, age, gender or disability.

7.715.48 RELIGION AND CULTURE

A. The shelter shall demonstrate consideration for, and sensitivity to, the cultural and religious backgrounds of youth in care.

B. Youth in care at the shelter shall be allowed and encouraged to celebrate their cultural and religious holidays.

C. A youth may be invited to participate in religious and cultural activities of the shelter.

D. A youth shall not be coerced or forced to participate in the religious activities of a shelter or to attend religious services.

E. Any form of religious or cultural intervention used by the shelter to control or change a youth's behavior, or treat or heal a medical condition, must be approved, in writing, by the legal guardian(s) of the youth prior to the use of the intervention.

F. A shelter cannot deny medical care to a youth because of religious beliefs.

7.715.5 PERSONAL CARE OF THE YOUTH

7.715.51 Medical and Health Services

A. The shelter shall ensure the availability of emergency medical care for each youth in care.

B. Whenever indicated, a youth shall be referred to an appropriate specialist for either further assessment or treatment.

C. At all times there shall be first aid supplies readily available at the shelter and at least one (1) person present at the shelter or with the youth who is certified in first aid, or the equivalent, and CPR for all ages of youth in care.

D. The shelter, in conjunction with the parent(s) or guardian(s), shall make every effort to ensure that a youth needing corrective devices such as glasses, hearing aids, etc., is provided with the necessary equipment.

E. In a potentially life.-threatening situation, the shelter shall refer the youth's care to the appropriate medical and legal authority.

F. Administration of any medication at the shelter shall be done only by a person licensed and authorized by law and administered according to the written policies of the shelter.

G. All medication to be administered must be kept in a clean storage area inaccessible to the youth and stored according to pharmacy instructions.

H. All prescribed medications shall be administered only upon the written prescription of a physician.

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

7.715.61 Food and Nutrition

A. The shelter shall provide nutritious foods in the variety and amounts as appropriate for the age, appetite, and activity of each youth in care.

B. At least three nourishing, wholesome, well-balanced meals a day shall be offered at regular intervals.

C. Menus shall be planned at least one week at a time, shall be dated, posted and filed for at least one month.

D. Youth shall be encouraged to eat a variety of the food served but shall not be subjected to undue coercion, including forced feeding, or punished for refusal to eat.

E. All food shall be from sources considered satisfactory by the health authority. All foods shall be stored, prepared, and served in such a manner as to be clean, and wholesome.

F. Youth must not be given foods that are contrary to their religious beliefs, or of their family, or are known to cause an allergic reaction or a health hazard.

G. Water shall be readily accessible to youth by means of an approved water fountain or single-service cups.

H. Common drinking cups shall not be permitted.

7.715.62 Personal Hygiene and Daily Routine

A. The shelter shall establish procedures to ensure that youth receive training in good habits of personal care, hygiene, and grooming appropriate to their age, gender, race and culture.

B. There shall be supervision by staff to provide for proper grooming and physical cleanliness of the youth.

C. The shelter shall ensure that youth are provided with necessary and appropriate toiletry items, including clean, individual towels and washcloths, toothbrush, toothpaste, comb, and shampoo.

7.715.63 Clothing and Personal Belongings

A. The shelter shall allow a youth in care to bring his/her personal belongings to the program, as defined by the shelter policy, and to acquire belongings of his/her own in accordance with the youth's plan. However, the shelter shall, as necessary, limit or supervise the use of these items while the youth is in care. Where extraordinary limitations are imposed, the youth shall be informed of the reasons, in a language or manner of communication the youth can understand. The decision and reasons shall be recorded in the youth's case record.

B. Provisions shall be made for the protection of the youth's property while the youth is residing at the shelter. If the shelter safeguards any money, valuable: or personal property for a youth, the shelter shall maintain and inventory as such possessions. A full return or accounting of such possessions shall be made upon discharge of the youth from the shelter.

C. The shelter shall ensure that each youth in care has adequate clean, proper-filling, and seasonable clothing as required for health, comfort, and physical well-being and as appropriate to age, gender, individual needs, culture, and ethnicity.

D. The wardrobe for each youth shall go with him/her at time of discharge.

7.715.7 LIVING SPACES, EQUIPMENT, AND NECESSARY FACILITIES

7.715.71 Living Spaces and Equipment Necessary in a Shelter [Rev. eff. 9/15/12]

A. Youth eleven to eighteen years of age may be housed in the same area in a shelter. Youth eighteen (18) to twenty-one may be housed in the same area in a shelter. Youth under the age of eighteen may not be housed in the same area as youth over the age of eighteen.

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

C. Each youth shall be provided suitable sleeping equipment consisting of individual beds, or bunks, complete with mattresses in good repair, or individual cots. All sleeping equipment shall be constructed so as to facilitate cleaning while in us 3 by youth and upon each change of occupancy. Triple-deck bunks are prohibited. Sleeping equipment being used by youth shall have, clean sheets, pillows, pillowcases and blankets.

D. Each room of occupancy shall be well-lighted and adequately ventilated.

E. Staff rooms shall be located on the same floor or in the general area of youth's sleeping rooms so that the youth care staff can supervise youth and be readily accessible when needed.

F. There shall be a designated space distinct from youth's living areas to serve as an administrative office.

G. There shall be a designated space distinct from youth's living areas to allow for private discussions and/or counseling sessions.

H. Each shelter shall have a telephone. Each separate living unit within a shelter shall have 24-hour telephone service or an intercom system connected with an outside telephone service. Emergency telephone numbers, including fire, police, physician, poison control, health agency, and ambulance shall be conspicuously posted adjacent to each telephone.

7.715.72 Dining, Kitchen, Laundry, Bathroom Facilities

A. The dining area, whether located in the living unit or in a separate central dining room in the shelter, shall meet the following requirements:

1. It shall be clean, well-lighted, properly heated, and ventilated.

2. Walls and floors shall be of materials that are easy to keep dean.

B. The kitchen shall be designed and equipped to meet the requirements of efficiency, sanitation, fire safety, and comfortable working conditions. There shall be:

1. Adequate space for receiving, storage, refrigeration, and preparation of food. Storage space shall be dean and well-ventilated, and containers of food shall be covered and stored above the floor on shelves or other clean surfaces.

2. Provision for daily disposal of garbage and other refuse.

3. Separate storage of poisonous and toxic materials from food. Such materials shall be labeled and used only in ways that will neither contaminate food nor be hazardous to staff or youth.

4. Mechanical dish washing equipment or other approved methods of dish washing in accordance with requirements of the State Department of Public Health and Environment.

5. Hand washing and toilet facilities for use of kitchen staff shall be readily accessible.

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

7.715.8 BUILDING, FIRE SAFETY AND TRANSPORTATION

7.715.81 Building Site

A. The shelter must be located in an area that is readily accessible to health resources, public and private utilities, adequate and safe water supplies, sewage disposal, and fire and police protection.

B. The shelter site shall be located in accordance with local zoning department requirements.

C. The entire premises of the shelter are subject to inspection for licensing purposes, including but not limited to the residence where care is to be provided, the grounds surrounding the shelter, the basement, the attic (if accessible), any storage buildings, and a garage or carport, if applicable.

D. If the shelter is located in the same building as, or immediately adjacent to, other facilities, or an adult treatment center, or a nursing home, it shall be so arranged that the care and activities of the youth residing in the shelter are completely separate and independent from the other facility. The shelter may not be operated on the premises of a business that might be hazardous to the health, safety, morals, or welfare of youth and the operation of the shelter.

E. The shelter, including indoor and outdoor space, shall be maintained in a dean and safe condition free from hazards to health and safety.

F. There shall be outdoor space available to provide some recreation area for south.

7.715.82 Building Maintenance

A. Buildings shall be Kept in good repair and maintained in a safe, dean, and sanitary condition. Good housekeeping must be observed in all areas at all times.

B. All areas of the shelter available to youth's activities including equipment, materials and furnishings shall be of sturdy, safe construction, easy to dean, and free of hazards, such as sharp points or comers, splinters, protruding nails, broken play and recreational equipment or paint that contains lead or other poisonous materials and might be dangerous to the life or health of youth.

C. Closets, attics, basements, cellars, and furnace rooms shall be kept free from accumulation of significant amounts of extraneous materials such as furnishings, newspapers, or magazines that could pose a fire or health hazard.

D. Provision shall be made for collection, storage, and disposal of refuse in an approved manner to prevent nuisance conditions.

7.715.83 Building Safety

A. Egress from each dwelling unit sleeping room, and dormitory shall be available directly to the outside or to a common hallway leading directly to the outside.

B. In every building or structure, exits shall be so arranged and maintained as to provide free and unobstructed egress from all parts of the building or structure at all times when it is occupied. No lock or fastening to prevent free escape from the inside of any building shall be installed.

C. Every exit shall be clearly visible or the route to reach it shall be conspicuously indicated in such a manner that every occupant of every building or structure who is physically and mentally capable will readily know the direction of escape from any point Each path of escape shall be so arranged or marked that the way to a place of safety outside is unmistakable.

D. In every building or structure adequate and reliable illumination shall be provided for all exit facilities.

E. Every building or structure shall be so constructed, arranged, equipped, maintained, and operated as to avoid undue danger to the lives and safety of its occupants from fire, smoke, fumes, or resulting panic during the period of time reasonably necessary for escape from the building or structure in case of fire or other emergency.

F. The local fire department shall determine the adequacy of exits and other measures for life safety.

7.715.84 Fire Safety [Rev. eff. 6/1/12]

A. Fire hazards, such as defective electrical appliances and electric cords, dangerous or defective heating equipment or flammable material stored in such a manner as to create a risk of fire shall be corrected or eliminated.

B. The shelter shall contain at least one U.L.-approved fire extinguisher, highly visible, easily accessible, and in working condition, weighing not less than five pounds, that has a rating of 2A, 10BC. This requirement may be waived where more extensive fire-control measures are required by a local fire department

C. A smoke detector, in working condition, must be installed on each level of the shelter where care occurs and near sleeping areas.

D. No gas or electric space heaters, open-flame gas or 09 stoves, hot plates, or unvented heaters shall be used in the shelter for heating purposes.

E. Flammables, aerosol paints, insecticides, chemicals, and other dangerous materials shall be locked or stored so they are inaccessible to youth and must be stored in areas separate from sleeping or living areas. Flammables shall be stored in an approved container.

F. Heating devices such as radiators, registers, fireplaces, and steam and hot water pipes that pose a fire or bum hazard to youth shall be screened or otherwise protected.

G. Flammable material must not be stored near a furnace, hot water heater, or other heating device.

H. There shall be no candles or other burnable objects permitted in sleeping areas.

I. Exit doors shall be obvious. No lock or fastening to prevent free escape from the inside of any room used by the youth shall be permitted.

J. Exit routes shall be kept free of discarded furniture, furnishings, laundry, and stacks of newspapers or magazines that could interfere with the prompt evacuation of the shelter.

7.715.85 Emergency Drills

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

B. Fire exit drills must be held regularly.

C. Drills must be held at unexpected times and under varying conditions to simulate the conditions of an actual fire.

D. Drills must emphasize orderly evacuation under proper discipline rather than speed. Running or horseplay shall not be permitted.

E. Drills must include suitable procedures for ensuring that all persons in the shelter actually participate.

F. A record of fire drills held over the past 12 months must be maintained by the shelter.

G. Fire alarm facilities shall be regularly used in the conduct of drills.

H. The shelter shall make special provisions for the evacuation of any physically handicapped youth in the shelter.

I. The shelter shad take special care to help emotionally disturbed or perceptually handicapped youth understand the nature of such drills.

J. If appropriate to the location of the shelter, tornado drills must be held often enough so that all occupants are familiar with the drill procedure and conduct during a drill is a matter of established routine. A record of tornado drills held over the last 12 months must be maintained by the shelter.

7.715.86 General Comfort and Safety

A. AH hazardous chemicals, tools, and other equipment, including matches, plastic bags, paints, gasoline, medicines, insecticides, and cleaning and laundry materials, shall be stored in a safe manner. Products which could cause poisoning or contamination shall not be stored in rooms or areas where food is stored or prepared.

B. A shelter shall not maintain any firearms or air rifles on the grounds or within the structure of the shelter. A shelter shall not permit any staff member or youth to be in possession of any firearm on the grounds or within the structures of the shelter. Any other weapons such as bows, hunting knives and hunting sling shots must be unstrung at all times and must be locked and inaccessible to youth. Chemical weapons, even when carried by staff members to and from work for protection, shall be locked when present at the shelter. Weapons must not be transported in any vehicle in which youth are riding.

C. Water from any source other than a regular municipal water supply shall be tested annually for compliance with water quality requirements. (Sterilized containers for free laboratory tests of drinking water may be secured from the county health department or by writing to the Colorado Department of Public Health and Environment, 4210 East 11th Avenue, Denver. Colorado 80220.)

D. The shelter shall be equipped with adequate light, heat, ventilation, and plumbing for safe and comfortable occupancy.

E. The shelter must be equipped with hot and cold running water.

F. All garbage, refuse and other wastes shall be kept in a suitable receptacle and disposed of in such a manner as not to constitute a health hazard or nuisance.

G. All stairways containing more than four steps shall be equipped with a handrail.

H. The shelter shall nave a telephone, and emergency numbers shall be posted near the telephone, including those related to medical care, fire, law enforcement and poison control where available.

7.715.87 Transportation

A. A shelter shall ensure that each youth is provided with the transportation necessary for implementing the youth's individual plan.

B. A shelter shall have means of transporting youth in cases of emergency.

C. Any vehicle used by the shelter in transporting youth in care, whether such vehicle is operated by a staff member or any other person acting on behalf of the shelter, shall be properly licensed, and the vehicle shall be maintained in accordance with Colorado law.

D. Any staff member or other person acting on behalf of the shelter operating a vehicle for purpose of transporting youth shall be property licensed to operate the class of vehicle in accordance with Colorado law.

E. Youth under 16 years of age must be property fastened into a restraint system that conforms to Section 42-4-236, C.R.S.

F. A shelter shall not allow the number of persons in any vehicle used to transport youth to exceed the number of available seats and seatbelts in the vehicle.

G. The vehicle shall be enclosed.

H. A shelter shall ascertain the nature of any need or problem of a youth which might cause difficulty during transportation, such as seizures or a tendency toward motion sickness. The shelter shall communicate this information to the driver of any vehicle transporting youth in care.

7.715.9 RECORDS, REPORTS AND CONFIDENTIALITY

7.715.91 Confidentiality

A. The shelter shall have a policy as to the maintenance, storage and confidentiality of records.

B. Records shall be the property of the shelter and shall be protected against loss, tampering, or unauthorized use.

C. Facts learned about youth and their families shall be kept confidential, with the following exceptions:

1. In medical emergencies, and then only when the assistance and/or expertise is required of that unauthorized person; or

2. To the youth, his/her parent(s) or guardian(s) and their respective legal counsel(s), a court having jurisdiction over the youth, or an authorized public official, or licensing representative in performance of his/her mandated duties; or

3. If the parent(s) or guardian(s) has given voluntary, written consent.

4. Mandatory reporting of child abuse as required by law; and;

5. Reporting to the appropriate authority a youth's attempt to harm his/herself or others.

6. A youth's records may only be released upon the written consent of the youth.

7.715.92 Records

A. The shelter shall maintain complete records as required for the licensing of the shelter in accordance with the rules regulating the shelter.

B. Records for youth shall be retained for at least three years. Retention of records for a longer period may be desirable when they reflect an accident, injury or other unusual circumstance.

C. A record of admission shall be completed for each youth in care at the time of admission. The admission record shall be maintained at the shelter where the youth resides and shall contain:

1. Youth's name, date and place of birth (verified by a birth certificate when possible), gender, race, religious preferences, and date of admission.

2. Psychiatric and psychological reports, when available.

3. Summary recording of significant contacts with parent(s), guardian [s) and other involved agencies.

D. When a youth is removed or discharged from placement, the shelter shall complete a summary of the youth's discharge from the shelter which includes at a minimum:

1. The date of the discharge of the-youth from the shelter.

2. The plan for the youth.

3. Circumstances which led to an unplanned discharge.

E. Copies of a youth's file, including discharge information, shall be provided to parent(s) or guardian(s) upon request or to others by written consent pursuant to Section 7.715.91.

F. A copy of all policies developed by the shelter shall be maintained for at least three years.

7.715.93 Reports

A. The shelter shall immediately attempt to notify the youth's parent(s), guardian(s), and/or the responsible agency of any serious illness or serious injury resulting in medical treatment away from the shelter, hospitalization or death involving a youth in care.

B. The shelter must immediately report in writing to the licensing authority any accidents, injuries, serious illnesses, or fatalities that occurred at the shelter and that resulted in emergency medical treatment away from the shelter, hospitalization or death. The report must be made within 48 hours after the accident, illness, or death occurred.

C. A report about a death must include:

1. The youth's name, birth date, address, and telephone number.

2. If known, the names of the youth's parent(s) or guardian(s) and their address and telephone number if different from that of the youth.

3. Date of the fatality.

4. Brief description of the incident or illness leading to the death.

5. Names and addresses of witnesses or persons who were with the youth at the time of death.

6. Name and address of police department or authority to whom the report was made.

D. The shelter must immediately report in writing to the department any change in the status of the shelter that would affect care of youth.

E. The facility must immediately report in writing to the department any legal action brought against a shelter regarding any youth, staff, or conduct of the shelter at the time of initiation of such legal action

7.716 COLORADO SCHOOL READINESS QUALITY IMPROVEMENT PROGRAM

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

7.716.1 DEFINITIONS [Rev. eff. 1/1/11]

“Child” means a child five (5) years of age or younger.

“Child Care Center” means a facility, by whatever name known, that is maintained for whole or part of a day for the care of five or more children who are eighteen years of age or younger and who are not related to the owner, operator, or manager thereof, whether the facility is operated with or without compensation for such care and with or without stated educational purposes pursuant to Section 26-6-102(1.5), C.R.S.

“Early Care and Education Provider” or “Early Care and Education Facility” means a school district, provider, or facility that:

A. Is licensed pursuant to the Child Care Licensing Act as found in Section 26-6-101, et seq., C.R.S., or that participates in the Colorado Preschool Program pursuant to Article 28 of Title 22, C.R.S.; and,

B. Participates in local community councils.

"Early Childhood Care and Education Council" or "Early Childhood Council" means a council that represents public and private stakeholders identified or established locally in communities throughout the state pursuant to Section 26-6.5-106, C.R.S. An Early Childhood Care and Education Council shall provide School-Readiness Quality Improvement funding to early care and education providers pursuant to Section 26-6.5-106(3), C.R.S. for the purpose of developing and ultimately implementing a comprehensive early childhood system to enhance the school readiness of children five years of age or younger.

"Eligible Elementary School" means a public elementary school that:

A. For the school year immediately preceding submission of the Council's application for funding pursuant to Section 26-6.5-106, C.R.S., is required to implement a priority improvement or turnaround plan as described in Section 22-11-405 or 22-11-406, C.R.S., respectively, or is subject to restructuring pursuant to Section 22-11-210, C.R.S.; and,

B. As of the date on which the Council applies for funding through the Program, is receiving moneys pursuant to Title I of the Federal "Elementary and Secondary Education Act of 1965", 20 U.S.C. Section 6301, et seq., as re-authorized in 2002 as the "No Child Left Behind Act of 2001." No later editions or amendments are included. Copies may be obtained or examined by contacting the Child Care Administrator, Colorado Department of Human Services, Division of Child Care, 1575 Sherman Street, Denver, Colorado 80203; or any State Publications Depository Library; also available at: http://www2.ed.gov/policy/elsec/leg/esea02/index.html.

"Family Child Care Home" means a facility for child care in a place of residence of a family or person for the purpose of providing less than twenty-four hour care for children under the age of eighteen years who are not related to the head of such home pursuant to Section 26-6-102(4), C.R.S.

"Family support" means home visitation programs, family resource centers, income assistance programs, and other programs or resources to support family self sufficiency.

"Guidance" means a way of teaching that empowers children to make decisions that are ethical, intelligent, and socially responsible.

"Participates in an Early Childhood Council" means to be a member of a council or to work with a council in any manner.

"Provisional" means the rating designation for early care and education facilities that earn zero through nine (0-9) points or receive a learning environment score of zero, and do not achieve at least a 1 star rating.

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

7.716.2 ELIGIBILITY [Rev. eff. 1/1/11]

A. Eligible Early Childhood Councils

1. An Early Childhood Council must apply for School-Readiness Quality Improvement funding on behalf of the community it represents.

2. Communities that are not under the purview an Early Childhood Council may identify an existing entity to serve as the Early Childhood Council, such as an interagency coordinating council or a Colorado Preschool Program advisory council, or may establish a new council. Early Childhood Council membership shall include representatives from the public and private stakeholders from early care and education, family support, health, and mental health programs to reflect local needs and cultural diversity. The membership of each Early Childhood Council shall represent the geographic diversity within the county or counties involved in the council. Each council shall include, but not be limited to, each of the following stakeholder groups within the Council's services area:

    a. Local government including, but not limited to, local county departments of human services;

    b. Early care and education stakeholders including, but not limited to, licensed and legally exempt child care providers, head start grantees, district preschool and kindergarten programs, and school districts;

    c. Health care including, but not limited to, local public health agencies and health care providers;

    d. Parent(s)/guardian(s) of a child/children five years of age or younger;

    e. Mental health care including, but not limited to, community health centers and local mental health care providers;

    f. Child care resource and referral agencies;

    g. Family support programs that reflect local needs, conditions, and cultural diversity.

3. In addition to stakeholder groups referred to in Section 7.716.2, A, 2, a-g, stakeholder representation may include any combination of the following groups:

    a. Child care associations;

    b. Parent organizations;

    c. Head Start policy councils;

    d. A chamber or chambers of commerce;

    e. Local businesses;

    f. Faith-based, private for profit, and nonprofit organizations;

    g. Higher education institutions; and,

    h. Libraries.

4. The Council must submit a school-readiness plan to improve the readiness of children in the Council's community. The Council's school-readiness plan must:

    a. Be for a three-year period; and,

b. Contain strategies for improving the school readiness of children who will ultimately attend eligible elementary schools in the Council's community.

5. Each Council's school-readiness plan must include, at a minimum, the following:

a. The number and location of “eligible elementary schools”in the Council's community, as defined in Section 7.716.1, Definitions”.

b. The number and location of early care and education providers that will voluntarily participate in the program.

c. A commitment that the providers identified in the school-readiness plan will cooperate with and participate in the school-readiness rating system identified in the plan.

d. Community strategies to target school-readiness funds shall engage young children, providers, schools, families, and/or local communities. Community strategies shall be determined by the level of quality demonstrated by participating early care and education providers upon application to the School-Readiness Quality Improvement Program. All community strategies shall be implemented at an intensity level, to be determined by the local Early Childhood Council, over the course of a funding cycle. Community strategies shall place an emphasis on improving the following:

1) The quality of learning environment;

2) The quality of adult-child interactions;

3) The quality of child guidance techniques and practices;

4) The health and safety of children;

5) Parent and family engagement;

6) Professional development and education;

7) Management and leadership;

8) Business practices including, but not limited to, administering an Early Childhood Care and Education Program;

9) Special needs services; and,

10) Mental health services.

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

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

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

Each participating provider shall sign a memorandum of understanding to participate in the School Readiness Quality Improvement Program. The memorandum of understanding shall:

a. Obligate sites that have never been through a quality rating process before, or those that have been rated in the year immediately prior to entering the program and have scored 0 - 2 stars, to be rated on an annual basis throughout the funding cycle; or,

b. Obligate sites that have been rated in the year immediately prior to entering the program and that have earned 3 or 4 stars to be rated annually for the first two years of the funding cycle. Early care and education providers that have maintained a rating of 3 or 4 stars during the first two years of the funding cycle will enter the maintenance phase of the program.

7. Councils that receive funds must distribute, or otherwise make provisions to distribute, those funds to ECE facilities in a timely fashion per their school-readiness plan as described in Section 7.716.2, A, 4-5.

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

9. The voluntary school readiness rating system shall:

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

1) Quality of the learning environment.

2) Quality of adult-child interactions.

3) Adult-to-child ratios.

4) Provider credentials including recognized credentials through the State Department's voluntary credentialing system or equivalent.

5) Parent-involvement activities at the ECE facility.

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

c. Be supported by statistically valid research as a reliable measure of quality of an ECE facility;

d. Include a quality improvement plan that informs rated providers of their strengths and weaknesses and that provides such providers with strategies to improve the quality of their services; and,

e. Have demonstrated effectiveness at improving the level of quality of providers in geographically diverse Colorado communities.

B. Eligible Early Care and Education Providers

1. Early care and education providers must participate in a local community Early Childhood Council.

2. Early Childhood Councils may work with any licensed ECE provider located within the Council's community.

7.716.3 APPLICATION PROCESS [Rev. eff. 1/1/11]

A. Requests for Proposals (RFPs) will be produced by the State Department.

B. Each Early Childhood Council may submit only one school-readiness application for the community it represents.

C. A review committee comprised of a minimum of five (5) individuals shall be convened to evaluate the applications submitted by the eligible councils. Funds shall be distributed equitably among rural and urban communities. To ensure equitable distribution, the review committee shall consider, at a minimum, the following elements for each application:

1. Community demographic information.

2. Completeness of response to application questions.

3. Viability of the school-readiness plan submitted with applications.

4. Demonstrated ability of the community to achieve the planned goals.

7.716.4 IMPROVEMENT IN RATINGS [Rev. eff. 5/1/10]

A. Ratings must be translated into quality levels that are easily understood by parents.

For both child care centers and family child care homes:

1. Provisional - 0-9 points or learning environment score of 0

2. Star 1 = 10-17 points

3. Star 2 = 18-25 points

4. Star 3 = 26-33 points

5. Star 4 = 34-42 points

[Note: The above number of points for the approved levels are incorporated by reference from the “Qualistar Rating Criteria”, July 2008. No later editions or amendments are included. Copies may be obtained or examined by contacting the Child Care Programs Administrator, Colorado Department of Human Services, Division of Child Care, 1575 Sherman Street, Denver, Colorado 80203; or any State Publications Depository Library.]

B. To maintain eligibility for funding, early care and education facilities must achieve specific and measurable gains in their rating, as established by the rating organization and referred to in Section 7.716.4, A, as follows:

1. ECE facilities with a quality rating of zero (0) to two (2) stars must increase their rating points by at least four (4) points within twelve (12) months following each rating; and if their score in the learning environment subcategory is less than six (6) points, they must also earn at least two (2) of these additional points in this category.

2. Facilities that have maintained a rating of three (3) or four (4) stars for the first two years of the funding cycle will move into the maintenance phase of the program during which they will be rated every two years (biennially). After the facility has earned three (3) or four (4) stars for two consecutive biennial ratings, the facility shall no longer be eligible to participate in the School-Readiness Quality Improvement Program.

3. Sites that fall below a three (3) or four (4) star rating at any time during the funding cycle must enter into the dispute resolution review process in order to remain eligible to participate in the program.

4. Regardless of star level, no early care and education provider shall participate in the School-Readiness Quality Improvement program for more than six (6) years; however, when there are extenuating circumstances beyond the control of the early care and education facility or provider consideration will be given using the waiver process pursuant to Section 7.701.13. This provision shall be applied in the next funding cycle and thereafter.

C. At all quality levels, the ratio of adults-to-children must meet minimum licensing requirements.

7.716.5 PUBLIC ACCESS TO RATINGS

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

7.716.6 DISPUTE RESOLUTION [Rev. eff. 5/1/10]

A. The State Department, through the Division of Child Care, shall provide for an informal dispute resolution process to resolve disputes between the rating organization and a participating provider concerning the ratings which the provider receives, and to resolve disputes arising when a provider's follow-up rating does not meet the criteria for continued eligibility as per Section 7.716.4, B.

B. Participating providers shall be notified of the dispute resolution process by the local council when the providers begin their program participation and by the rating organization as part of the post-rating consultation.

C. The Division of Child Care will convene a dispute resolution panel familiar with the rating system. The panel will consist of one person representing the Division of Child Care, one person representing the Colorado Department of Education, and one person certified as a rater in the approved rating system who is not an employee of the rating organization and who does not otherwise have an interest in the decision of the dispute resolution panel.

D. The dispute resolution panel will make decisions by a simple majority vote of the panelists.

E. Requests for dispute resolution by a provider must be submitted in writing to the Division of Child Care within thirty (30) calendar days of the day the provider receives the rating consultation from the rating organization. Requests must include, at a minimum, the name and address of the provider, the provider’s license number, the rating in dispute, and the provider’s reasons for disputing the rating.

F. The panel will review all information submitted by the provider, the provider's council, the State Department, or the rating organization that is pertinent to the dispute.

G. The dispute resolution panel will be able to conduct, at its discretion, face-to-face interviews or telephone conferences to hear arguments from the provider and/or the rating organization.

H. The dispute resolution panel will require the rating organization to issue a new rating if the panel determines that the original rating was in error.

I. In a dispute about a provider's continued eligibility in the program, the panel may give the provider a probationary period of up to six (6) months in which to improve in specified areas. At the end of the probationary period, the panel will reconvene to determine whether the provider satisfactorily met the terms of its probation.

J. The cost of meeting the terms of probation may be partially or wholly borne by the provider as determined by the dispute resolution panel.

K. The dispute resolution panel will have additional sixty (60) calendar days from receipt of the provider’s request to issue a final decision to the provider in writing.

7.717 (None) [Rev. eff 2/1/12]

7.718 (None) [Rev. eff. 6/1/12]

7.719 RULES REGULATING SPECIAL ACTIVITIES [Rev. eff. 6/1/07]

These rules for Special Activities shall apply to School-Age Child Care Centers, Residential Child Care Facilities, and Children's Resident Camps.

7.719.1 GENERAL PROVISIONS [Rev. eff. 6/1/07]

A. There shall be a written program that reflects the purpose of the child care facility, including a list of activities at the child care facility. The written program must be provided to parents.

B. Parents shall be given the opportunity to indicate to child care facility staff whether they do not wish their child to participate in a special activity (see Section 7.711.61, A. 10).

C. Each phase of the child care facility program shall be under the supervision of a resident qualified staff member who shall be responsible for health and safety precautions. Verification of experience and/or certification shall be in the staff members personnel files at the child care facility.

D. If the child care facility participates in special activities other than those for which rules are found in this section, such as ballooning or winter camping, the child care facility shall develop and follow a written plan which includes at least the following:

1. The qualifications of the supervisor of the activity.

2. The qualifications of any other staff members necessary for proper supervision of the activity.

3. The number of necessary staff members needed to supervise the activity.

4. Conditions under which a child may participate in the activity, such as age or skill level of the child.

5. Any special equipment necessary, its supply and condition.

6. Access to medical treatment.

7. Development of an emergency plan.

E. Paint ball activities where children shoot paint balls at other children are prohibited at a child care facility.

F. The staff member supervising special activities shall possess evidence of appropriate experience, training, and/or certification in the program specialty Said staff member shall be present at the site of the activity whenever the activity is being earned out unless other wise indicated in these rules.

G. The qualified supervising staff member of special activities shall have the following duties:

1. Direct training of other staff members working in the activity.

2. Assign duties to staff members.

3. Assure that all necessary equipment is complete, in good repair, and safe to use.

4. Assure that environmental hazards are not sever enough to cause danger to children.

H. Rules shall be reviewed with children at the beginning of each activity.

I. First Aid supplies shall be available at each special activity site.

J. The staff to child ratio for each type of facility must be followed according to rules for that facility regardless of activity unless the ratio is different for the specified activity, in which case the activity staff to child ratio should apply.

7.719.2 WATER ACTIVITIES

7.719.21 Swimming [Rev. eff. 6/1/07]

A. There shall be a swimming supervisor who, as a minimum, holds a current Red Cross life guard training certificate or equivalent, such as a YMCA or Boy Scout aquatics instructor's certificate. If the child care facility is offering swimming instruction, the swimming supervisor must also hold a Red Cross water safety instructor certificate or equivalent.

B. At any time the swimming area is open, there shall be at the swimming area a staff member who holds at least a current life guard training certificate or equivalent for each thirty campers in the water. There shall be present as least one staff member for each ten children in the water. The lifeguard does not count in the staff to child ratio for supervision of children.

C. The swimming area shall be off limits when appropriate numbers of qualified staff members are not present.

D. If the child care facility uses a pool for which the child care facility is not responsible, the child care facility need not provide a lifeguard if there is a qualified lifeguard provided by the pool. If the pool does not provide a qualified lifeguard, staff members meeting qualifications stated at Section 7.719.2, B. must be provided by the child care facility. There shall be at least one staff lookout counselor at the pool for each ten children in the water.

E. Swimming area rules and emergency procedures shall be posted in a visible location at the swimming area.

F. The swimming pool or swimming area shall meet the standards of the Colorado Department of Public Health and Environment.

G. If children are permitted to swim in a lake or pond, swimming areas shall be clearly designated

H. Before children are permitted to swim in deep water, swimming skills must be tested by property trained staff members.

I. There shall be a system known to child and lookout staff for checking the children when children are in the water.

J. The following equipment must be available for use at the pool side or the take shore in which swimming is permitted:

1. A rescue tube;

2. Reach pole; and,

3. Backboard.

K. Where the size of the body of water makes it impossible to reach victims by reach pole, rescue tube or other rescue device, a rescue boat must be available at all times.

L. If a child care facility has shoreline activities such as wading, fishing, ecology or nature studies, the child care facility shall have a written policy which defines qualifications of persons accompanying the group and safety, factors to be followed. Staff members shall be acquainted with the policy.

M. In the case of a travel-trip camp, there shall be a minimum of one staff member who holds at least current Red Cross life guard training certificate or equivalent who is responsible for all swimming activities.

7.719.22 Boating, Canoeing, Sailing, and Kayaking on Flatwater [Rev. eff. 6/1/07]

A. The boating supervisor shall hold, at a minimum:

1. A current Red Cross life guard training certificate or equivalent; or,

2. Boy Scout certificate; or,

3. Basic small craft instructor, small craft safety, or paddle safety certificate for the type of craft which is to be supervised; or,

4. Documentation of experience indicating knowledge and skill in teaching and supervision specific to the watercraft activities to be conducted.

B. The boating supervisor, or staff member equally qualified who has been trained by the boating supervisor, must be on site during the activity.

C. Other staff members shall have appropriate experience and training for the type of craft to be utilized.

D. Whenever children are on the water they shall be wearing a United States Coast Guard approved personal notation device appropriate to the weight of the child.

E. There shall be a minimum of two lookout staff members at the shoreline and/or on the water at any time when children are on the water in boating, canoeing, kayaking or sailing activities. Hazards such as the size of the lake, the skill of the children, the conditions of the water, and the temperature of the water, shall be taken into account by the supervisor of the activity when determining the number and location of lookout staff necessary with the children, but there shall never be fewer staff with the children than those required at Section 7.711.23, D.

F. Except for kayaking, there shall be a staff member m any boat which holds one or more children under seven years old.

G. At no time shall the occupancy of the craft exceed the capacity established for the craft by the United States Coast Guard standards.

H. There shall be a warning device, such as a loud whistle, air horn, or other audible signal device, which can readily be heard by persons on the water that indicates the need for children and staff to return to the facility.

I. Where the size and depth of the Body of water indicates, there shall be a rescue boat in close proximity to where the activity takes place. This rescue boat shall be in good repair and shall contain appropriate equipment, such as a rescue tube, reach pole, extra oar, or paddle.

J. Water craft shall not enter a swimming area when swimmers are in the water.

7.719.23 Boating, Canoeing, Tubing, and Kayaking on Class I or II Moving Water [Rev. eff. 6/1/07]

A. The boating supervisor shall hold, at a minimum:

1. Current Red Cross life guard training certificate or equivalent; or,

2. Boy Scout certificate; or,

3. Basic small craft instructor certificate for the type of craft which is to be supervised; or,

4. Documentation of experience indicating knowledge and skill in teaching and supervision specific to the watercraft activities to be conducted.

B. The boating supervisor must be on site during the activity.

C. Children shall only canoe, tube, or kayak on Class II or less water.

D. Supervising staff must be experienced and knowledgeable about the river being used, including the height and speed of the river.

E. The child care facility must have a written policy on evaluating the safety of the river. Supervising staff must be trained on the policy.

F. Each child shall wear a Unites States Coast Guard approved personal flotation device whenever they are on the moving water.

G. The supervisor of this activity shall be trained in Red Cross standard First Aid and safety, and CPR.

H. The supervisor shall be familiar with rescue techniques with canoes, kayaks, and tubes on moving water and shall train children in these techniques.

I. Rescue equipment appropriate to the activity shall be available, such as rope throw bag and rescue tubes.

7.719.24 White Water Rafting on Class III and IV Rivers (Classes of rivers are those as defined by the International Scale of River Difficulty) [Rev. eff. 6/1/07]

A. If the child care facility operates white water rafting, the child care facility must be licensed by the Division of Parks and Outdoor Recreation as a river outfitter.

B. If a child care facility provides a white water rafting experience by purchase from a river outfitter, the license of the outfitter must be valid.

7.719.3 ARCHERY AND RIFLERY

7.719.31 Archery [Rev. eff. 6/1/07]

A. The archery supervisor shall have certification, documented training or experience from a recognized organization or certifying body for the type of activities offered.

B. The archery range shall be free from hazards and well-marked. There shall be a clear path to the target which is not obstructed by such things as rocks, trees or branches. Traffic, trail, or other camp activities shall not be placed in the direction of the flight of the arrows.

C. Equipment shall be maintained in safe condition. Bows and arrows shall be inspected for fractures, splinters or cracks before each use. Damaged bows and arrows shall not be utilized.

D. Equipment shall be stored under lock and key when not in use. Bows and arrows shall be used only in the specified archery area.

E. If the child care facility has field archery, a procedure shall be established and posted to provide for the safety of the archers, including issuance of arrows at check-in point of the archery trail, check in of archer at the beginning of the archery trail, and check out when archer has completed the trail.

F. The archery supervisor or a staff person trained and authorized by the archery supervisor must be present at all times when children are present at the archery range or field.

G. All archers shall use the same firing line. Arrows shall be issued only at the firing line.

H. Arrows shall be nocked to bow string after shooters are on the firing line and after the signal to shoot has been given.

I. Before arrows are released, shooters shall have a definite target.

J. Movement must be controlled by a supervising staff member. All persons must stay behind the firing line until the signal to retrieve arrows is given. All arrows shall be retrieved at the same time.

7.719.32 Riflery [Rev. eff. 6/1/07]

A. The riflery supervisor shall hold a National Rifle Association instructor's or assistance instructor's certification in rifle shooting or equivalent certification from a national organization or shall have verified experience equivalent to that necessary to obtain the National Rifle Association Fire Arm certification.

B. If the riflery supervisor is not present at the rifle range whenever children are firing guns, the staff person(s) trained by the riflery supervisor must be present at all times when children are present.

C. The rifle range shall be free from all hazards, away from other activities and traffic of any type; shall be well marked with danger signs or flags; all blind approaches shall be fenced or blocked off.

D. The range shall be constructed with an appropriately designed bullet-stop so that all bullets will be stopped behind the targets. The bullet-stop shall be free of trees, rocks, boulders, or other objects which may cause a bullet to ricochet away from the bullet-stop.

E. There shall be a well-defined firing line which shall be level with the targets and elevated off the ground. A minimum space of five feet between firing points shall be established or firing points separated by a permanent divider. Targets must be designed to minimize potential for ricochet. Targets cannot depict human form.

F. Only the following types of guns shall be permitted:

1. .22 caliber rimfire, single-shot, bolt-action rifles having no trigger modification other than the factory setting.

2. Pneumatic spring-type and CO_2 air guns may be either .22 caliber or .177 (BB size).

G. Proper condition of the firearms shall be maintained by inspection before and after usage, cleaning as necessary. Firearms that do not function properly shall be repaired and tested before usage.

H. Instruction on the use of firearms shall be presented to the children prior to the use of the rifle range.

I. No more than five cartridges at a time shall be distributed to a child by the responsible supervising staff member and issued only at the firing line.

J. Firing shall be permitted at the firing line only. Observers shall remain behind firing line.

K. Actions of uncased firearms shall be kept open except when on firing line ready to fire.

L. All firearms shall be unloaded immediately upon the command “cease firing” regardless of when this command is given. Actions shall remain open until further commands are given.

M. On ranges where shooters must go down range to change targets and score: movement must be controlled by the supervising staff member.

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

7.719.4 HORSEBACK RIDING [Rev. eff. 6/1/07]

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

1. Certificate from nationally recognized organization or riding school.

2. Written verification of successful experience in formal horseback riding instruction.

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

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

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

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

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

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

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

I. Protective head gear/helmets are mandatory for children ring riding and on trail rides.

J. Parents must be notified in advance of what type of protective gear is used by the child care facility. If children bring helmets from home, they must be specifically designed for equestrian use, worn correctly, and in good condition.

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

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

M. Horses shall be cared for with evidence of an adequate feeding schedule and a means to care for sick horses.

N. Horses shall not be permitted in the other designated activity areas.

7.719.5 TRAMPOLINE [Rev. eff. 6/1/07]

A. The trampoline supervisor shall have documented formal training and experience in use of trampoline and knowledge of safety and spotting techniques.

B. Trampolines shall be equipped with pads along the sides and shall be kept in good repair.

C. No person shall be on the trampoline unless a trampoline supervisor is present and spotters are present on all four sides of the trampoline.

D. Trampolines shall be secured from unauthorized use by any person.

E. The child shall dismount the trampoline by sitting on the edge and sliding off. No child shall jump off the trampoline.

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

7.719.6 CLIMBING ACTIVITIES

7.719.61 Rock Climbing and Ropes Courses [Rev. eff. 6/1/07]

A. When a child care facility offers basic/single-pitch rock climbing or advanced/multi-pitched climbing, which includes such topics as the care and use of basic equipment, knots, anchors and belays, verbal signals, safely measures, basic climbing holds and moves, and techniques of rappelling, the following rules must be complied with:

1. The climbing supervisor shall:

   a. Be at least 18 years old;

   b. Have certification or documented experience in knots, anchors, safety zones, verbal signals, belaying, rappelling, and safe tie-ins, or training or experience from a recognized organization, such as the Association for Challenge Course Technology or certifying body for the type of activities offered; and,

   c. Have at least six weeks' experience in a management or supervisory capacity in similar types of programs.

2. A climbing instructor shall have verified knowledge of technical climbing by completion of a course or climbing school, or a minimum of ten hours of instruction.

3. At least two climbing instructors must be present at the climbing site at all times.

4. There shall be one climbing instructor for each six (6) climbers or two climbing instructors for thirteen (13) children.

5. There shall be a staff member who holds at least a current Red Cross standard First Aid and safety certificate or equivalent at the rock climbing site.

6. First Aid supplies, put together by a person knowledgeable in First Aid supplies needed for climbing activities and possible injuries, shall be present at the climbing site.

7. No child shall be forced to participate in this activity.

8. The climbing supervisor shall be responsible for the proper maintenance of all equipment used. Equipment shall be checked by the supervisor immediately prior to use.

9. All rock climbing equipment shall meet industry standards and shall be maintained, visually and physically inspected, and replaced on a timely basis.

10. Climbers must wear helmets at all times when in designated helmet zones.

11. The child care facility shall not permit an unsupervised climb.

12. The climbing supervisor must have knowledge of where the climb is to occur and must give approval on the day of the climb for the climb to occur.

13. Each rock climber must be visually supervised.

14. Children waiting to climb must be supervised by a staff member.

15. All climbers and rappellers shall be belayed in a top rope manner by a belayer that has been instructed in proper procedures, and directly supervised until competency has been demonstrated.

B. If the child care facility offers advanced/multi-pitched climbing, the following rules shall also be complied with:

1. The climbing supervisor accompanying participants shall:

a. Hold a current Red Cross standard First Aid and safety certificate or equivalent, and a current certificate for cardiopulmonary resuscitation;

b. Have been an instructor, under supervision, for two seasons with verifiable experience and a review of any serious accidents;

c. Have completed a technical climbing school or training in technical climbing with evidence by letter of such completion;

d. Have led ten additional multi-pitched Class V climbs (the classification of the climbs as defined by the American Alpine Club) within the last two years; and,

e. Have knowledge of mountain rescue techniques. If the climb is more than sixty (60) minutes from emergency medical services, the climbing supervisor must hold a current wilderness First Aid training certificate or equivalent.

2. The climbing instructor or the rope leader shall have:

a. The same training as the climbing supervisor;

b. Have been an instructor, under supervision, for one season with verifiable experience and a review of any serious accidents;

c. Completed a technical climbing school or training in technical climbing;

d. Led five additional multi- pitched climbs; and,

e. Knowledge of mountain rescue techniques. No instructor shall take campers on a climb he/she has not completed previously.

3. No child will be the rope leader.

4. A child who is permitted to participate in the climb must be at least thirteen (13) years old. The climbing supervisor shall assess the ability of the child as to the difficulty of the climb.

5. The climbing instructor and climbing site must be approved by the climbing supervisor for each climb.

6. The climbing supervisor, an equally qualified person, or two (2) equally qualified rope leaders shall be present at the climb site.

7. There shall be one rope leader that is at least eighteen (18) years of age to each three climbers in an extended climb.

8. First Aid equipment must be carried with the staff on each climb.

C. If the child care facility offers high and/or low ropes courses or a climbing wall, the following rules must be complied with at all times:

1. The rope supervisor must have training and experience on the type of rope course or climbing wall being used and must hold a current standard First Aid and safety certificate or, if the ropes course or climbing wall is more than sixty (60) minutes from definitive care, must hold a wilderness First Aid card.

2. The rope instructor must have training and experience on the type of rope course or climbing wall being used and must be supervised by the rope supervisor and must hold a current standard First Aid and safety certificate or, if the ropes course or climbing wall is more than sixty (60) minutes from definitive care, must hold a wilderness First Aid card.

3. Ropes courses must have written evidence of annual inspection by qualified Association of Challenge Course Technology (ACCT) personnel of course elements for integrity of all hardware, materials, and equipment.

4. Ropes courses must be inspected regularly before use by the rope supervisor or the rope instructor.

5. All equipment and elements of a rope course or climbing wall must be safety checked prior to each use and have written records of regular inspection and maintenance of all equipment and elements utilized.

6. Children must wear safety equipment appropriate to the size of the child and appropriate helmets when using the high ropes course or climbing wall.

7. At all times, there must be a rope supervisor or rope instructor on the ropes course with children.

8. Ropes courses and climbing walls must be off limits to children when a rope supervisor or rope instructor is not present.

9. Access to ropes courses and climbing walls must be controlled by education, signs, and whatever other means are necessary to control unsupervised access.

10. The child care facility must have written safety procedures for use of the ropes course(s) and climbing wall. Staff must be trained on the safety procedures.

7.719.7 HIKING, BACKPACKING, AND CAMPING

7.719.71 Hiking [Rev. eff. 6/1/07]

If the child care facility offers hiking activities, the following rules shall be complied with:

A. The hiking supervisor must hold a current Red Cross standard First Aid and safety certificate or equivalent; shall have knowledge of outdoor experience and the symptoms and correct treatment procedures for hypothermia and dehydration; and, shall have verifiable experience in hiking and backpacking at the elevation where the hike is to take place.

B. The staff members involved in hiking shall be trained by the supervisor and shall continually observe and monitor campers on the trail for early diagnosis and treatment of injury or illness.

C. When a group takes a hike within 60 minutes of definitive medical care, there must be at least one staff member currently qualified with Red Cross standard First Aid and safety training certificate or equivalent, current CPR certificate, and current training in the Department required and approved medication administration training.

D. When a group takes a hiking or backpacking trip where children are either more than 60 minutes away from definitive medical care, there must be at least one staff member with each group of children with current wilderness First Aid training, or equivalent, current CPR training, and current medication administration training.

E. At least two (2) staff members must accompany a group in hikes. From time to time, hiking groups may divide up as long as hikers are always with one staff member and staff members are in visual, verbal or electronic (radio or wireless communication) contact with each other.

F. In selecting the area for hiking, the hiking supervisor shall consider the hiker's age, physical condition and experience, as well as the season, weather trends, methods of evacuation, and communication.

G. Before participation, children must be instructed on:

1. The fundamental safety procedures to follow on the trail;

2. Procedures to follow if lost;

3. Proper health and sanitation procedures on the trail;

4. Rules governing land to be hiked;

5. Potential high-risk areas; and,

6. Fire precautions.

H. Each hiker shall be equipped with protective clothing against natural elements such as ram, snow, wind, cold, sun, and insects.

I. First Aid supplies, put together by a person knowledgeable in First Aid supplies needed for possible accidents and/or injuries, shall be present on each hike. The contents of each kit shall be adequate for the number of children, the terrain, and the length of the hike.

J. An itinerary of the hiking trip and a list of all people on the hike must be kept at the child care facility.

K. The child care facility must have written safety procedures for hiking, including the written protocol for evacuating a child that becomes sick or injured on a hike. Staff and children must be trained on the safety procedures and protocol.

7.719.72 Backpacking and Camping [Rev. eff. 6/1/07]

A. The backpacking and camping supervisor shall have knowledge and verifiable experience in camping and/or backpacking at the elevation where the backpacking or camping will take place.

B. When a group is backpacking or camping within sixty (60) minutes of definitive medical care, there must be at least one staff member currently qualified with Red Cross standard First Aid training certificate or equivalent, current CPR training, and current training in the Department required and approved medication administration training.

C. When a group is backpacking or camping where children are more than sixty (60) minutes away from definitive medical care, there must be at least one staff member with each group of children with current wilderness First Aid training or equivalent, current CPR training, and current medication administration training.

D. If a child will require medication administration while away from the child care facility while backpacking or camping, there must be at least one staff member present with current medication administration training who has been delegated by a registered nurse to administer medication.

E. The staff members involved in backpacking or camping shall be trained by the supervisor and shall continually observe and monitor children on the trail for early diagnosis and treatment of injuries or illness.

F. The backpacking or camping supervisor shall consider the hiker's age, physical condition, and experience, as well as the season, weather trends, methods of evacuation and communication, and water quality and quantity in selecting the area for backpacking or camping.

G. Children shall have a safety orientation and be instructed on the applicable precautions, such as:

1. The fundamental safety procedures to follow on the trail;

2. Procedures for a hiker if he/she becomes lost;

3. Proper health procedures, including the need for drinking fluids and eating appropriate foods;

4. Sanitation procedures;

5. Relevant rules and regulations;

6. Potential high-risk areas which may be found on the trail;

7. Fire danger precautions; flash floods; lightening dangers; and,

8. Procedures when encountering wild animals.

H. Children shall be oriented to minimum impact guidelines and techniques.

I. Each child shall be equipped with protective clothing and equipment against anticipated natural elements such as rain, snow, wind, cold, sun, and insects.

J. Appropriate first aid supplies shall be present on each trip. The contents of each kit shall be adequate for the number of children, the terrain, and the length of the trip.

K. An itinerary of the trip with a list of participants must be available to parents, staff, local police jurisdictions and staff or contractors of the Colorado Department of Human Services.

L. The child care facility must have written safety procedures for backpacking or camping, including the written protocol for evacuating a child that becomes sick or injured.

7.719.8 BIKING [Rev. eff. 6/1/07]

If a child care facility has bicycling trips either on a public road or on mountain trails, the following rules shall be complied with:

A. The bicycling supervisor must be familiar with state laws about bicycling; be knowledgeable about the type of bicycling terrain where the bicycle trips will occur be knowledgeable about bicycling in the mountains, if applicable: shall know how to make simple bicycle repairs; and, shall hold at lest a current Red Cross standard First Aid and safety certificate or equivalent.

B. At least two (2) staff members must accompany a group while biking. From time to time, biking groups may divide up as long as bikers are always with one staff member and staff members are in visual, verbal or electronic (radio or wireless communication) contact with each other. A bicycling supervisor or staff member equally qualified and another qualified staff member must accompany each bicycle trip. Correct staff to child ratios must be complied with at all times. There must be one staff member at the beginning and end of each bicycle group.

C. Each bicycler shall wear head protection and the bicycle shall be equipped with brakes in good condition. Bicycles shall be in good condition, properly maintained, inspected prior to each bicycling trip, and adjusted to the size of the child riding the bicycle. Children using their own bicycles will be informed in advance, in writing, that their bicycles must be in good condition, properly maintained, inspected prior to each bicycling trip, and adjusted to the size of the child riding the bicycle.

D. An appropriate bicycle repair kit and First Aid equipment must be taken on each trip. The First Aid supplies must be put together by a person knowledgeable in First Aid supplies needed for bike trips and possible accidents and/or injuries.

E. The bicycling supervisor must instruct children as to emergency procedures, safe riding practices, and road and trail etiquette.

F. The bicycling supervisor shall evaluate each child as to his/her physical capability to participate in the planned bicycling trip, keeping in mind the trip length, terrain, altitude of the trip, and weather conditions.

G. Water/fluids must be taken on each bicycle trip.

H. An itinerary of the biking trip and a list of all people on the biking trip must be kept at the child care facility.

I. The child care facility must have written safety procedures of bike trips, including the written protocol for evacuating a child that becomes sick or injured on a bike trip. Staff and children must be trained on the safety procedures and protocol.

7.720 RULES REGULATING NEIGHBORHOOD YOUTH ORGANIZATIONS [Eff. 4/1/11]

All Neighborhood Youth Organizations shall comply with the “General Rules for Child Care Facilities”.

7.720.1 DEFINITIONS [Eff. 4/1/11]

“Employee” means a paid employee of a neighborhood youth organization who is of eighteen years of age or older.

“Neighborhood Youth Organization” means a nonprofit organization that is designed to serve youth as young as six years of age and as old as eighteen years of age and that operates primarily during times of the day when school is not in session and provides research-based, age-appropriate, and character-building activities designed exclusively for the development of youth from six to eighteen years of age.

A. These activities shall occur primarily in a facility leased or owned by the neighborhood youth organization. The activities shall occur in an environment in which youth have written parental or legal guardian consent to become a youth member of the Neighborhood Youth Organization and to arrive at and depart from the primary location of the activity on their own accord, without supervision by a parent, legal guardian, or organization.

B. A Neighborhood Youth Organization shall not include faith-based centers, organizations or programs operated by state or city parks or special districts, or departments or facilities that are currently licensed as child care centers as defined in Section 7.702, et seq. (12 CCR 2509-8).

“Volunteer” means a person who volunteers his or her assistance to a neighborhood youth organization and who is eighteen years of age or older.

“Youth member” means a youth who is six years of age through eighteen years of age whose parent or legal guardian has provided written consent for the youth to participate in the activities of a Neighborhood Youth Organization and who pays a nominal fee for said membership.

7.720.2 OPERATION OF A NEIGHBORHOOD YOUTH ORGANIZATION [Eff. 4/1/11]

A. The Neighborhood Youth Organization 's shall post its policies and procedures in bold print and in plain view, and shall make a written copy available to parents and guardians, which shall include the following:

1. The address of the licensed Neighborhood Youth Organization, general hours of operation, and policy regarding closure of the Neighborhood Youth Organization.

2. The Neighborhood Youth Organization's mission statement.

3. The ages of youth accepted.

4. The procedure concerning membership requirements that at a minimum include: name, date of birth, parent/guardian contact information, emergency contact information, and written authorization to attend.

5. The procedures for:

a. Arrival and departure from the Neighborhood Youth Organization;

b. Notification of parents and guardians, for handling emergencies;

c. Youth's personal belongings and money;

d. Filing a complaint against the Neighborhood Youth Organization; and,

e. Background checks and other criminal history checks of employees and volunteers.

6. The policies on:

a. Guidance;

b. Visitors;

c. Meals and snacks;

d. The reporting of child abuse (see Section 7.701.53 of the General Rules for Child Care Facilities).

7. If services are offered for special needs youth that the Neighborhood Youth Organization operates in compliance with Section 7.701.14, Civil Rights.

8. An itemized fee schedule.

9. The role of the governing board.

B. The fee for obtaining a Neighborhood Youth Organization License is located in the General Rules at Section 7.701.4.

7.720.3 COMMUNICATION, EMERGENCY AND SECURITY PROCEDURES [Eff. 4/1/11]

Each Neighborhood Youth Organization is required to have a written mission statement. This statement shall be kept on file, updated periodically, and made known to staff and to parents and guardians, and shall be available during the licensing inspection.

A. During the hours the Neighborhood Youth Organization is in operation, the Neighborhood Youth Organization shall provide an office and/or monitored telephone number known to the public and available to parents in order to provide immediate access to the Neighborhood Youth Organization.

B. There shall be a land line telephone at the primary facility.

C. The Neighborhood Youth Organization shall have an established means of communication between staff and the program office when youth are being transported or are away from the permanent site on a field trip.

D. Emergency telephone numbers shall be posted at each permanent site and taken on all field trips and during mobile Neighborhood Youth Organization programs. The emergency numbers shall include, at a minimum, emergency 911, or rescue unit telephone number if 911 is not available; phone numbers are also required for the clinic or hospital nearest to the activity location; ambulance service; local fire, police, and health departments; and, Rocky Mountain Poison Control.

E. The Neighborhood Youth Organization shall have a written emergency procedure that explains at a minimum, how youth will be evacuated to a safe area in case of fire or other disaster and the reporting of reportable communicable illnesses to the local health department pursuant to regulations of the Colorado Department of Public Health and Environment.

F. The Neighborhood Youth Organization shall be able to provide emergency transportation to a health care facility at all times either via program vehicle or the emergency medical services system.

G. The director of the Neighborhood Youth Organization or the director's delegated substitute shall have a means for determining at all times who is present at the Neighborhood Youth Organization.

H. A written policy regarding visitors to the Neighborhood Youth Organization shall be posted and a record maintained daily by the Neighborhood Youth Organization that includes, at a minimum, the visitor's name and address and the purpose of the visit.

7.720.4 PERSONNEL POLICIES, ORIENTATION, AND STAFF DEVELOPMENT [Eff. 4/1/11]

The duties and responsibilities of each staff position and the lines of authority and responsibility within the Neighborhood Youth Organization shall be in writing.

A. At the time of employment, staff members shall be informed of their duties and assigned a supervisor.

B. Prior to working with youth, the staff member shall read and be instructed about the policies and procedures of the Neighborhood Youth Organization, including those relating to proper supervision of youth and reporting of child abuse. Staff members shall sign a statement indicating that they have read and understand the Neighborhood Youth Organization's policies and procedures.

C. All full time staff shall be required to receive CPR and First Aid certification within the first sixty (60) calendar days of employment at their own expense or as arranged by the Neighborhood Youth Organization.

D. All staff shall complete training in universal precautions within the first three (3) months of employment at their own expense or as arranged by the Neighborhood Youth Organization.

7.720.41 General Requirements for All Personnel [Rev. eff. 6/1/12]

A. All personnel of the Neighborhood Youth Organization shall demonstrate an interest in and knowledge of youth development and concern for youths' well-being.

B. All personnel shall be free from communicable disease and conduct that would endanger the health, safety, or well-being of youth. Each staff member shall furnish the Neighborhood Youth Organization with information concerning communicable health problems that could affect the staff member's ability to perform the duties of the job assigned.

C. A child abuse and neglect and a criminal record check request for all staff shall be completed and on file at the Neighborhood Youth Organization's administrative headquarters pursuant to General Rules sections 7.701.32 and 7.701.33.

7.720.42 Volunteers and Visitors [Eff. 4/1/11]

If volunteers are used by the Neighborhood Youth Organization, there shall be a clearly established policy in regard to their function, orientation, training and supervision.

A. Volunteers shall have qualifications suitable to the tasks assigned.

B. Individuals who volunteer less than five days a month shall be:

1. Directly supervised by a program director or program leader.

2. Given instruction as to the Neighborhood Youth Organization's policies and procedures.

C. Individuals who volunteer more than five days a month shall be:

1. Appropriately trained for the position; and,

2. Have the same background check as staff pursuant to Section 7.720.41, D; and,

3. Section 7.701.33, D, 5 or 6, shall be referenced to determine whether a conviction requires that the individual not be allowed to volunteer or the conviction requires reporting to the Division of Child Care.

D. Visitors and youth members shall always be supervised by a staff member.

7.720.5 NEIGHBORHOOD YOUTH ORGANIZATION SERVICES

7.720.51 Admission Procedure [Eff. 4/1/11]

A. Prior to admission, the parent(s)' or legal guardian's signed authorization for the youth member to arrive or depart without parental or legal guardian supervision shall be obtained.

B. The Neighborhood Youth Organization can accept youth only of the ages for which it has been licensed. At no time shall the number of youth in attendance exceed the number for which the Neighborhood Youth Organization has been certified by the fire department.

C. Admission and membership procedures shall be completed prior to the youth's attendance at the Neighborhood Youth Organization and shall include completion of the registration information for inclusion in the youth's record, as required in Section 7.720.81.

7.720.52 Guidance and Discipline [Eff. 4/1/11]

A. Corporal or other harsh punishment including, but not limited to, pinching, shaking, spanking, punching, biting, kicking, rough handling, hair pulling, or any humiliating or frightening method of guidance shall not be allowed.

B. Separation or time-out, when used as guidance or discipline, shall be brief and appropriate for the youth's age and circumstances. The youth shall be in a safe, lighted, well-ventilated area and be within hearing and vision of a staff member. The youth shall not be isolated in a locked room, bathroom, closet, or pantry.

C. Verbal abuse and derogatory remarks about the youth are not permitted.

D. Authority to provide guidance and/or discipline shall not be delegated to other youth.

E. Youth shall not be denied food or water as a form of guidance or discipline.

7.720.53 Records and Reporting [Eff. 4/1/11]

Each Neighborhood Youth Organization shall develop:

A. A system of gathering, recording, and responding to complaints; and,

B. A method and a training for employees on reporting known or suspected child abuse; and,

C. A method of record keeping for staff, volunteer, visitor, youth member and other program files.

7.720.54 Transportation [Eff. 4/1/11]

A. Transportation Provided by the Neighborhood Youth Organization

1. The Neighborhood Youth Organization is responsible for any youth it transports and shall abide by applicable State and Federal motor vehicle laws.

2. The Neighborhood Youth Organization shall obtain written permission from parents or guardians for any transportation of their youth.

3. Youth shall not be permitted to ride in the front seat of a vehicle unless they are secured in a constraint system that conforms to all applicable Federal Motor Vehicle Safety Standards based on the youth's weight and size.

4. Youth shall be loaded and unloaded out of the path of moving vehicles.

5. Youth shall remain seated while the vehicle is in motion. Youth shall not be permitted to stand or sit on the floor of a moving vehicle and their arms, legs, and heads shall remain inside the vehicle at all times.

6. Prior to a field trip or other excursion, the Neighborhood Youth Organization shall obtain information on liability insurance from parents and staff who transport youth in their own cars and verify that all drivers have valid driver's licenses.

B. Requirements for Vehicles

1. Any vehicle used for transporting youth to and from the Neighborhood Youth Organization or during program activities shall meet the following requirements:

   a. The vehicle shall be enclosed and have working door locks.

   b. The seats of the vehicle shall be constructed and installed according to the vehicle manufacturer's specifications.

   c. The vehicle shall be kept in satisfactory condition to assure the safety of occupants. Vehicle tires, brakes, and lights shall meet safety standards set by the Colorado Department of Revenue, Motor Vehicle Division.

   d. Seating shall be comfortable, with a seat of at least ten (10) inches wide for each youth.

2. In passenger vehicles, which include automobiles, station wagons and vans with a manufacturer's established capacity of sixteen (16) or fewer passengers and less than 10,000 pounds, the following is required:

   a. Each youth shall be restrained in an individual seat belt.

   b. Two or more youth shall never be restrained in one seat belt.

   c. Lap belts shall be secured low and tight across the upper thighs and under the belly.

d. Youth shall be instructed and required to keep the seat belt properly fastened and adjusted.

3. In vehicles with a manufacturer's established capacity of sixteen (16) or more passengers, seat belts for passengers are not required, but shall be used if provided.

4. There shall be a First-Aid kit in all vehicles.

C. Requirements for Drivers of Vehicles

1. All drivers of vehicles transporting youth shall comply with applicable laws of the Colorado Department of Revenue, Motor Vehicle Division, and ordinances of the municipality in which the youth care program is operated.

2. All drivers of vehicles owned or leased by the Neighborhood Youth Organization in which youth are transported shall have a current Department-approved First Aid and safety certificate that includes CPR for all ages of youth.

3. The driver shall ensure that all doors are secured at all times when the vehicle is moving.

4. The driver shall periodically check that each youth is properly belted throughout the trip.

7.720.6 PROGRAM ACTIVITIES

7.720.61 Field Trips [Eff. 4/1/11]

A. The program may include field trips, where youth and staff leave the Neighborhood Youth Organization to visit sites in the community.

1. Youth shall be actively supervised at all times.

2. An accurate itinerary shall remain at the headquarters, office, primary or temporary site of the Neighborhood Youth Organization.

3. During a field trip, the staff shall have the following information with them:

a. Each youth’s emergency contact information; and,

b. The written authorization from parent(s) or guardian(s) for emergency medical care.

B. During a field trip, a list of all youth and staff on the field trip shall be kept at the headquarters or site of the Neighborhood Youth Organization.

C. During all field trips, staff shall bring a First Aid kit.

D. During all field trips, youth members shall have access to water and toilet facilities.

E. During all field trips, staff shall carry with them information regarding the nearest health care facility.

F. Field trip locations shall be accessible to emergency medical service.

7.720.7 BUILDING AND FACILITIES

7.720.71 Facility Requirements [Eff. 4/1/11]

Each Neighborhood Youth Organization shall maintain and post the appropriate fire and health inspection certificates.

7.720.72 Food [Eff. 4/1/11]

A. Areas used for food preparation, dish and utensil washing, and storage shall be in compliance with the requirements of the Colorado Department of Public Health and Environment or its local unit.

B. Youth member dietary allergy information gathered during youth member admission shall be referenced when preparing food for any and all youth members.

7.720.73 Fire and Other Safety Requirements [Rev. eff. 6/1/12]

A. General Requirements

1. Buildings shall be kept in good repair and maintained in a safe condition.

2. Major cleaning involving the use of household or industrial cleaners is prohibited in rooms presently occupied by youth.

3. Volatile substances such as gasoline, kerosene, fuel oil, and oil-based paints, firearms, explosives and other hazardous items shall be stored away from the area used for youth care and be inaccessible to youth.

4. Combustibles such as cleaning rags, mops, and cleaning compounds shall be stored in well-ventilated areas separated from flammable materials and stored in areas inaccessible to youth.

5. Closets, attic, basement, cellar, furnace room, and exit routes shall be kept free from accumulation of extraneous materials that could cause or fuel a fire or hinder an escape or evacuation.

6. All heating units, whether gas or electric, shall be installed and maintained with safety devices to prevent fire, explosions, and other hazards. No open-flame gas or oil stoves, unscreened fireplaces, hot plates, or unvented heaters may be used for heating purposes. All heating elements, including hot water pipes, shall be insulated or installed in such a way that youth cannot come into contact with them. Nothing flammable or combustible may be stored within three (3) feet of a hot water heater or furnace.

7. Indoor and outdoor equipment, materials, and furnishings shall be sturdy, safe and free of hazards.

8. Equipment, materials, and furnishings, including durable furniture such as tables and chairs, shall be stored in a manner that is safe for youth.

9. Extension cords cannot be used in place of permanent wiring.

10. Corridors, halls, stairs, and porches shall be adequately lighted. Operable battery-powered or solar lights shall be provided in locations readily accessible to staff in the event of electric power failure.

B. Fire Safety

A fire safety certificate shall be on file for each Neighborhood Youth Organization or at a central location.

C. Emergency Drills

1. Each staff member and volunteer of the Neighborhood Youth Organization shall be trained in fire safety.

2. Fire exit drills shall be held often enough that all occupants are familiar with the drill procedure and their conduct during a drill is a matter of established routine. Fire drills shall be consistent with local fire department procedures. A record of fire drills held over the past twelve (12) months, including date and time of drill, number of adults and youth participating, and the amount of time taken to evacuate, shall be maintained at the Neighborhood Youth Organization site.

3. Drills shall be held at unexpected times and under varying conditions to simulate the unusual conditions of an actual fire.

4. Drills shall emphasize orderly evacuation under proper discipline rather than speed. No running or horseplay should be permitted.

5. Drills shall include suitable procedures for ensuring that all persons in the building or all persons subject to the drill participate.

6. Fire alarm equipment shall be used regularly in the conduct of fire exit drills.

7. Tornado and emergency evacuation and lock down drills shall be held often enough that all occupants are familiar with the drill procedure and their conduct during a drill is a matter of established routine. A record of these drills held over the past twelve (12) months shall be maintained at the Neighborhood Youth Organization site.

7.720.8 RECORDS AND REPORTS

7.720.81 Youth Records [Eff. 4/1/11]

The central administrative facility or Neighborhood Youth Organization site shall maintain and update annually a record on each youth that includes:

A. The youth's full name, age, current address, date of birth, and membership.

B. Names, addresses, and telephone numbers, which may include cell phone number(s), pagers, fax, and e-mail of parents or legal guardians.

C. Any special instructions as to how the parents or guardians can be reached during the hours the youth is at the Neighborhood Youth Organization.

D. Names, addresses, and telephone numbers of persons who can assume responsibility for the youth in the event of an emergency if parents or guardians cannot be reached immediately.

E. A dated written authorization by a parent or legal guardian for:

1. The youth member to attend and be a member of the Neighborhood Youth Organization and to arrive and depart with parental or legal guardian supervision.

2. Emergency medical care signed and submitted annually by the parent or guardian.

3. The youth to participate in field trips and to participate in program activities, listing any possible exclusions.

F. Reports of critical incidents including, but not limited to, serious injuries and accidents occurring during care that result in medical attention, admission to the hospital, or death of a youth.

G. Information regarding food borne allergies shall be obtained from all youth members and shall be referenced when preparing or serving food to youth members to prevent allergic reactions.

7.720.82 Staff Records [Eff. 4/1/11]

A. The Neighborhood Youth Organization shall maintain a record for each adult staff member, paid or volunteer, that includes the following:

1. Name, address, and birth date of the individual.

2. The date that the staff member was employed by the Neighborhood Youth Organization.

3. Name, address, and daytime telephone number, which may include cell phone numbers, pager numbers, fax numbers and e-mail address, of the person(s) to be notified in the event of an emergency.

4. Record and verification of the staff member's training, education, and experience.

5. Copies of First-Aid and CPR certification or other certification confirming the qualifications for the responsibilities assumed at the Neighborhood Youth Organization, which may include copies of driver's licenses, college transcripts, and diplomas.

6. Verification that a criminal record check has been performed and updated every two years with the Colorado Bureau of Investigation is in process, and a copy of the results of the staff member's criminal record check.

7. Verification that a review of the State Department’s automated system for reporting youth abuse and neglect has occurred or is in process.

B. Each staff member's personnel file shall contain all required information within thirty (30) calendar days of the first day of employment.

7.720.83 Administrative Records and Reports [Eff. 4/1/11]

A. The following records shall be on file at the Neighborhood Youth Organization:

1. Records of enrollment, daily attendance for each youth, and daily record of time each youth arrives at and departs from the Neighborhood Youth Organization.

2. Current Colorado Department of Public Health and Environment or local health department inspection report within the past twenty-four (24) months.

3. Current local fire department inspection report issued within the past twenty-four (24) months.

4. A list of current staff members, available on site or on file at a central location.

B. A report about a critical incident shall include:

1. The youth's name, birth date, address, and telephone number.

2. The names of all involved and witnesses to the incident, the youth's parents or guardians, and their address and telephone number(s) if different from those of the youth.

3. Date of the incident.

4. Brief description of the incident.

5. Documentation of action taken and/or the name and address of the police department or authority if a report was made.

C. Each Neighborhood Youth Organization shall have a written plan for action in case of natural disaster including, but not limited to, floods, tornadoes, severe weather, and injuries. This plan shall be on file at the Neighborhood Youth Organization. The staff shall have received training regarding the implementation of the plan prior to assuming supervisory responsibility for youth. Written verification of the training shall be in the staff member's personnel file.

7.720.84 Confidentiality, Records Retention, and Cooperation with Local Investigations [Eff. 4/1/11]

A. The Neighborhood Youth Organization shall maintain complete records of youth and personnel.

B. The confidentiality of all personnel and youth's records shall be maintained, pursuant to Section 7.701.6, “Confidentiality of Records”.

C. Personnel and youth's records shall be available, upon request, to authorized personnel of the State Department, pursuant to Section 19-1-307(2)(j.7), C.R.S.

D. If records for a headquarters servicing more than one Neighborhood Youth Organization are kept in a central file, duplicate identifying and emergency information for both staff and youth must also be kept on file at the Neighborhood Youth Organization attended by the youth and where the staff member is assigned.

E. The records of youth and personnel shall be maintained by the Neighborhood Youth Organization or Neighborhood Youth Organization central headquarters for at least three (3) years.

F. Neighborhood Youth Organizations shall cooperate with all state and local investigations regarding incidents including but not limited to licensing violations, child abuse, and incidents affecting the health, safety, and welfare of youth members.

7.721 RULES REGULATING HOST FAMILY HOMES [Eff. 9/15/12]

Child Placement Agencies and county departments are authorized to certify Host Family Homes. These rules apply to those child placement agencies and county departments that choose to certify Host Family Homes.

7.721.1 DEFINITIONS [Eff. 9/15/12]

“Homeless youth” is defined in the General Rules at Section 7.701.21.

“Licensed Host Family Home” is defined in the General Rules at Section 7.701.21.

"Host home parent" is the responsible adult in the host family home that is participating in the host family home.

7.721.2 GENERAL REQUIREMENTS [Eff. 9/15/12]

A. The certifying child placement agency or county shall be able to assure the health and safety and the proper care and treatment of the youth in the host family home.

B. The host family home must be located in an area that is accessible to health resources, public and private utilities, adequate and safe water supplies, sewage disposal, and fire and police protection.

C. The child placement agency or county shall have written screening procedures and make reasonable efforts to evaluate the overall emotional health and stability of each host family home applicant and/or staff member. Procedures shall include exploring for any history of youth battering, youth abuse, youth molestation, youth neglect, or previous criminal convictions.

D. The child placement agency or county shall determine policies, procedures and case management structure that clearly defines duties and responsibilities for host home parents.

E. The child placement agency or county shall develop an adequate emergency preparedness and management plan for host home parents.

F. The child placement agency or county shall have on file the verification of tuberculin status of host home parents and other residents of the home. If the host family home residents have certificates of previous negative testing, the testing does not need to be repeated. If there is no certificate, the testing needs to be completed prior to host family home certification and annually thereafter.

G. The child placement agency or county shall ensure that all staff, certified host family homes and program partners demonstrate an interest, receive training and have knowledge of positive youth development, homelessness and a concern for the proper care and well being of youth.

7.721.21 Management Requirements

7.721.211 Certifying Child Placement Agency or County [Eff. 9/15/12]

A. The child placement agency or county is the individual, partnership, corporation or association in whom the ultimate authority and legal responsibility is vested for the conduct of the host family home.

B. When the child placement agency or county does not include a board of directors, there shall be an advisory committee of at least two other individuals who act in an advisory capacity to the governing body. The names of the advisory committee members shall be disclosed to the Department. The advisory committee shall meet at regularly stated intervals.

C. Minutes of the advisory committee or the board of directors shall be maintained. The minutes shall be available to the Department upon request, except that the minutes containing confidential personnel information need not be shared with the Department.

D. The functions of the child placement agency or county shall include:

1. The appointment of an administrator who shall be responsible to establish and implement, according to performance criteria, to the governing body, and shall delegate to him/her the executive authority and responsibility for the administration of Host family home certification according to its defined purpose.

2. The certification of all host family homes.

3. The formulation and regularly planned review of policies and procedures to be followed by the host family homes.

4. As necessary, establish formal agreements with local agencies participating in the host family home. If a local agency delegates responsibility for any responsibility established by the host family home, the child placement agency or county must certify and document that the local agency meets requirements established in rule.

5. Sixty-day notice must be given to State Department of any changes to formal agreements established by child placement agency or county.

6. The provision of necessary emergency services and temporary shelter using host family homes; adequate financing; qualified personnel and host family home provider; and services and program functions for the welfare and safety of youth in accordance with these standards.

7.721.212 Fiscal Management [Eff. 9/15/12]

The child placement agency or county shall demonstrate that it is financially sound and manages its financial affairs prudently. All funds disbursed by the child placement agency or county shall be expended in accordance with the program objectives as specified by the governing body.

7.721.213 Insurance [Eff. 9/15/12]

A. The child placement agency or county certifying the host family home shall determine policy and procedures on liability insurance that includes the host family home supervised by the agency.

B. The host family home shall maintain adequate insurance and submit annually the amount of the insurance and the name and the address of the insurance agency providing the insurance for the host family home.

C. Information about the insurance should be maintained at the child placement agency or county.

D. Agencies and host family homes participating in the host family home operating their own transportation vehicles shall carry insurance in compliance with the minimum limits as required by the Colorado Revised Statutes.

E. The child placement agency or county shall establish procedures to review and establish annually that all agencies and host family homes participating in the host family home meet program insurance requirements.

7.721.22 HUMAN RESOURCES

7.721.221 ADMINISTRATIVE STAFF [Eff. 9/15/12]

A. Administrator of the child placement agency or county shall be qualified as follows:

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

2. The administrator shall assume the following duties:

   a. Overall direction and responsibility for the youth, program, host family home, and fiscal management.

   b. Overall direction and responsibility of supervision of adequate staff.

   c. The selection, roles, responsibilities and training of a capable staff member who can assume responsibility for management of host family homes in the administrator's absence.

   d. The establishment of relationships, protocols, agreements and contact maintenance with allied agencies, services, and resources within the community.

B. Case Manager

The child placement agency or county shall specifically designate a staff member, age twenty-one (21) or over, capable of acting as a substitute for the administrator during his/her absence. The duties and responsibilities of the substitute administrator shall be clearly defined in order to avoid confusion and conflict among other staff, provider within host family home and youth.

C. Administrative Coverage

1. The Department shall be notified in writing when a possible change in administrator is anticipated or at the time there is a change in administrator. Documents verifying the qualifications of the acting/interim or new administrator, including official transcripts and documents verifying work experience, shall be submitted to the Department.

2. The administrator or the staff member to whom the administrator has delegated responsibility shall be available at all times.

7.721.222 Case Management Staff and Other Professional Staff [Eff. 9/15/12]

A. Case management shall be provided by the child placement agency or county.

1. A qualified professional having a Bachelor’s degree in social work, psychology, or child development from an accredited college or university shall supervise the host family home. This professional shall have two years of treatment-oriented experience; or,

2. A case manager who meets the requirements of the child placement agency or county.

B. The case management staff shall be responsible for providing case management services as stated at Section 7.715.42, B.

7.721.23 Capacity [Eff. 9/15/12]

A. When a certified home participating in the host family home only provides temporary emergency shelter for youth, the home may be certified for up to four (4) youth including siblings groups.

B. Child placement agency or county shall instruct homes participating in the host family home in requirements in accommodations and required supervision placement of both male and female youth.

7.721.3 HOST FAMILY HOME CHARACTER, SUITABILITY, AND QUALIFICATIONS [Eff. 7/1/14]

A. A certificate shall be denied in accordance with Section 7.710.34, D and E.

B. A certificate may be denied or revoked if the host family home's own children have been placed in foster care or a residential treatment facility under circumstances which demonstrated that the provider(s) in host family home or another resident of the home was abusive, neglectful, or a danger to the health, safety, or well-being of children within the home.

C. The providers in host family home shall be able to provide for a homeless youth's physical, mental and character development.

D. Applicants shall demonstrate stability in family relationships within the host family home.

E. The licensing or certifying authority must receive at least three written statements which describe the applicant's character, interpersonal relations, and ability to provide care for youth from references provided by the applicant, at least two from a source/person who are not related to the applicant and who have known the applicant one year or longer (references need not be residents of Colorado). Licensing or certifying representatives may contact others who may have knowledge or information regarding the applicant's character or suitability.

F. The host family home provider shall possess basic knowledge of childcare, positive youth development, runaway and homeless youth issues, and good nutrition, and shall cooperate with the licensing or certifying agency in programs designed to increase such knowledge.

G. Providers in a host family home shall protect youth receiving shelter in the home from exposure to second hand smoke.

1. Smoking is prohibited inside the host family home at all times when homeless youth are present.

2. Smoking is prohibited in motor vehicles used by providers in host family homes or case managers when a youth is present.

H. The financial resources of a host family home shall be adequate to assure that the home where the shelter is provided is maintained in safe repair and in conformity with standards and that the requirements of these regulations can be fulfilled.

I. Each host family home provider shall have a health assessment within one year prior to certification or within thirty (30) calendar days after certification and thereafter as required, in writing, by a licensed health care professional. The reports of the medical examinations shall be dated and signed by the examining physician or nurse practitioner and shall be provided to the certifying authority. Reports shall include a statement of the evaluation of the person's physical ability to care for youth.

J. If, in the opinion of the licensed health care professional or the assessment worker, an emotional or psychological condition exists which would have a negative impact on the care of youth, the certification of a host family home shall be conditioned upon the satisfactory report of a licensed mental health practitioner.

K. Other children of the providers of the host family home and any other persons not placed by the agency and living in the host family home shall obtain a medical statement from a licensed health care professional verifying that each such person suffers from no illness or communicable disease which would adversely affect youth receiving shelter in the host family home. This statement shall be obtained annually or as required in writing by an approved health care professional. A licensed health care professional is defined as a physician, nurse practitioner, or a physician's assistant. This statement shall have been signed within the twelve-month period preceding the certificate granted to the home.

7.721.31 Medical and Health [Eff. 9/15/12]

A. The child placement agency or county shall provide referrals to local health care providers for any youth requiring medical attention while participating in a host family home.

B. Child placement agency or county of the host family home will determine policies for storage and distribution of medications.

7.721.32 Personnel Policy, Orientation, and Training [Eff. 9/15/12]

A. The child placement agency or county shall have a comprehensive written plan for the recruitment, hiring or certification, orientation, ongoing training, and professional development of providers in a host family home.

B. The child placement agency or county shall have an introductory training and orientation program for all providers in a host family home. This program shall include orientation to emergency and safety procedures and the general and specific duties and responsibilities of staff/case managers and host family home providers.

C. The child placement agency or county shall maintain written documentation of specific in-service training held, staff/providers participating, the hours involved, and/or other on-going training activities in which staff /providers were involved.

D. The child placement agency or county shall document that all staff and providers in the host family home receive appropriate training in the following areas:

1. The child placement agency or county’s administrative procedures and overall program goals.

2. The emergency and safety procedures, including but not limited to fire evacuation drills, tornado drills, where appropriate, and flood evacuation drills, where appropriate, on at least a semiannual basis.

3. Universal precautions regarding safe work practices to prevent exposure to blood and bodily fluids.

4. CPR and basic First Aid.

5. The principles of positive youth development and practices of working with youth.

6. Acceptable behavior management techniques, including appropriate discipline in accordance with host family home policies and these rules.

7. Appropriate boundaries (both physical and emotional) between case workers, the host home parent, and/or the youth while the youth is in the host family home and after the youth leaves the host family home.

8. Positive and constructive methods of dealing with the youth including, but not limited to, physical structuring of the environment and de-escalation of crisis situations.

9. Hazardous materials.

10. Storage and distribution of medications.

11. Mandated reporting.

7.721.4 PROGRAM

7.721.41 Program Description [Eff. 9/15/12]

A. The child placement agency or county shall have a written overall program description for the host family home.

B. The written description shall address at least the following areas:

1. Provision of case management;

2. Referral to emergency medical and/or dental services;

3. Referral to education/vocational services;

4. Housing, food, and clothing resources;

5. Referral to medical, dental and substance abuse services;

6. Recreation opportunities;

7. Youth rights;

8. Requirements of the host family home provider.

C. Child placement agency or county will develop and provide services using a positive youth development approach that ensures a young person a sense of:

1. Safety and structure;

2. Belonging and membership;

3. Self-worth and social contribution;

4. Independence and control over one's life; and closeness in interpersonal relationships.

7.721.42 Case Management Services [Eff. 9/15/12]

A. The child placement agency or county shall be assigned the responsibility for case management for each youth.

B. Each individual assigned the responsibility of providing case management services for a youth shall:

1. Participate actively with the youth, family, host family home provider, and other supports to create a service and transition plan and to address the provision of resources and/or identified services.

2. Assure that appropriate information concerning the youth and her/his background is shared with other staff members and providers in host family home who deal with the youth regularly and to maintain communication with youth's parents, guardians, if available, and with the individual or agency responsible for discharge planning and follow-up care of the youth, if applicable.

3. Assure that the plan developed for each youth is implemented, and documented in the youth's file.

7.721.43 Admission Policy and Procedures [Eff. 9/15/12]

A. Admission of a runaway/homeless youth to a host family home shall be in keeping with the stated purpose of the program.

B. Notification and contacts:

1. Pursuant to Section 26-5.7-105(4), C.R.S., when a youth under fifteen years of age is admitted to a licensed host family home, the director of the facility, shelter, or other person in charge shall notify the county department of the county of residence of the parents of the youth within seventy-two (72) hours of the youth's admission.

2. Pursuant to Section 26-5.7-105(5), C.R.S., if the director of the facility, shelter, or other person in charge determines that a referral for additional services needs to be made, the other person in charge shall make the referral to the county of residence of the parents of the youth. However, the facility shall contact the county department of residence of the parents of the youth for the limited purpose of determining whether a county department is serving the youth.

3. Pursuant to Section 26-5.7-105(7), C.R.S., if a youth who is at least eleven (11) years of age but less than fifteen (15) years of age has been served up to twenty-one (21) days and returns again to the licensed host family home after leaving the host family home, the child placement agency or county certifying the host family home shall make a referral for services to the county of residence of the parents of the youth.

C. Child placement agency or county shall place youth in host family homes where the provider of the host family home is qualified and taking into account the needs of children already in residence to provide the care necessary. Care must be provided in the least restrictive, most appropriate setting in order to meet the youth's needs.

D. Each host family home and its certifying authority shall have a written admission policy that at a minimum must include:

1. The policies and procedures related to intake.

2. The age range and sex of youth accepted/admitted for care.

3. The needs, problems, situations or patterns best addressed by the host family home.

E. Any pre-placement requirements for the youth, the parent(s) or guardian, and/or the placing agency.

F. The anticipated problems or situations that would result in the host family home or certifying authority requesting removal of a youth from the host family home.

G. The written description of admission policies and criteria shall be provided to referring agencies.

H. The child placement agency or county shall accept a youth into temporary/emergency shelter only after a preliminary intake assessment and screening of immediate needs. Further assessments of areas such as social, physical health, mental health shall be conducted within three days of admission.

I. Pursuant to Section 26-5.7-106(2), C.R.S., upon admission of a youth to a host family home, the child placement agency or county shall:

1. Immediately notify the youth's parent of the youth's whereabouts, physical and emotional condition, and the circumstances surrounding the youth's placement;

2. Notify the youth's parent that it is the paramount concern of the facility or shelter to achieve reconciliation between the parent and the youth, to reunify the family, and to inform the parent about the alternatives that are available;

3. Arrange transportation for the youth to the residence of the youth's parent when the youth and the parent agree that the youth shall return to the home of the youth's parent. The parent shall reimburse the party who paid for the transportation costs to the extent of the parent's ability.

4. Arrange transportation for the youth to an alternative residential placement facility when the youth and the youth's parent agree to such placement. The parent shall reimburse the appropriate person for transportation costs to the extent of the parent's ability.

J. Within 24 hours of admission the child placement agency or county is responsible to contact parents/legal guardians of youth under the age of eighteen and document their permission to serve or attempts made to contact parents/legal guardians.

K. Within 24 hours of arrival at the host family home, a youth shall be given an orientation to the host family home, consistent with the youth’s age and ability to participate, which includes at least the following:

1. Tour of the host family home and instruction on fire alarm and fire evacuation procedures, escape routes and exits.

2. The rules of the host family home.

3. Procedures affecting the youth's behavior, including limiting or restricting a youth's rights where allowed, the type of discipline used in the host family home, and consequences for certain behaviors.

4. The complete youth’s rights and youth’s grievance procedures as developed by the host family home or by the certifying authority.

L. If reconciliation with the family and voluntary return of the youth has not been achieved within 48 hours following admission to the host family home, excluding Saturdays, Sundays and legal holidays, and the child placement agency or county department does not anticipate reconciliation occurring within twenty-one (21) consecutive days, the child placement agency or county shall provide the youth and the youth’s parent with a written statement identifying:

1. The availability of counseling services;

2. The availability of longer term residential arrangements; and,

3. The possibility of referral to the county department.

M. The case plan shall be developed with the involvement of the youth, the parent(s) or guardian(s) of the youth, the representative of the child placement agency or county, and when possible, the host family home provider. Where the involvement of any of these is not feasible or desirable, the certifying authority shall record the reasons for the exclusion. The case plan shall include by reference or attachment at a minimum the following:

1. Discussion of the youth'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 host family home; and, the anticipated planned discharge date and plan for the youth following discharge.

2. Written authorization for care and treatment of the youth.

7.721.5 YOUTH RIGHTS [Eff. 9/15/12]

A. The child placement agency or county shall have written policies and procedures that address and ensure the availability of each of the following core rights for youth in host family home. These rights may not be restricted or denied by the host family home.

1. Every youth has the right to enjoy freedom of thought, conscience, cultural and ethnic practice, and religion.

2. Every youth has the right to receive adequate and appropriate food, clothing, and housing.

3. Every youth has the right to live in clean, safe surroundings.

4. Every youth has the right to participate in an educational program that will maximize his/her potential in accordance with existing law.

5. Every youth has the right to communicate with others outside the host family home, such as a parent or guardian, caseworker, attorney or guardian ad litem, current therapist, physician, religious advisor, and, if appropriate, probation officer.

B. The following youth's rights may be limited to reasonable periods during the day or restricted according to written policies of the host family home to ensure the protection of the youth, staff, and program from unreasonable and unnecessary intrusions and disruptions and from health and safety hazards.

1. Every youth has the right to have access to letter-writing materials, including postage, and to have staff members of the host family home assist him/her if unable to write, prepare, and mail correspondence.

2. Every youth has the right to have access to telephones to both make and receive local emergency telephone calls.

3. Every youth has the right to receive and send sealed correspondence.

C. Written policies that restrict or limit a youth's rights as listed at Section 7.721.5 must include at a minimum the requirement that the host family home notify the youth at the time of admission of any policy that would limit or restrict a youth's rights. The notification must be communicated in a language or mode of communication the youth can understand and, if possible, be signed by the youth.

D. If the host family home enforces any restrictions upon the youth's rights as listed at Section 7.721.5, the host family home must, in compliance with the written policy and procedure of the host family home:

1. Inform the youth in a language or mode of communication the youth can understand, of the conditions of and reasons for restriction or termination of his/her rights.

2. Place a written report summarizing the conditions of and reasons for restriction, denial, or termination of the youth's rights in that youth's case record along with information about if or when the youth's right(s) can be restored. This Information must be made available to the youth upon request.

3. When a restriction of a youth's rights affects another youth in the host family home, the youth shall be informed, in a language or mode of communication the individual can understand, of the conditions of and reasons for the action.

7.721.51 Youth's Grievance Procedure [Eff. 9/15/12]

A. The child placement agency or county of the host family home must establish a written grievance procedure that provides adequate due process safeguards, spells out the appeal process, and assures that youth and parent(s) or guardian(s) are entitled to report any grievance and shall not be subject to any adverse action as a result of filing the grievance.

1. The host family home must follow grievance procedures without alteration, interference, or unreasonable delay.

2. If a grievance is filed with the host family home, the grievance shall be recorded in the youth's record along with the investigation findings and resulting action taken by the child placement agency or county.

B. A list of the youth's rights and the grievance procedures must be provided and explained to the youth and the parent or guardian in a language or manner of communication that they can understand.

7.721.6 DISCIPLINE [Eff. 9/15/12]

A. The child placement agency or county shall have written policies and procedures regarding discipline that include:

1. Discipline shall be constructive or educational in nature.

2. Procedures for diversion or separation from the problem situation.

3. Procedures for withholding privileges.

4. Positive responses to youth's appropriate behavior.

B. Policies and procedures must be explained to all youth, parent(s), guardian(s), staff, host family home provider and placing agencies. Basic rights shall not be denied as a disciplinary measure.

C. Youth in care at the host family home shall not discipline other residents.

D. Separation when used as discipline must be brief and appropriate to the youth's age and circumstances. The youth shall always be within hearing of an adult in a safe, clean, well-lighted, well-ventilated room in the host family home that contains at least 50 square feet of floor space.

E. The child placement agency or county shall prohibit all cruel and unusual discipline and ensure providers of host family home and case managers are trained on established guidelines and appropriate discipline.

7.721.7 NON-DISCRIMINATION [Eff. 9/15/12]

In compliance with Section 7.701.14, the host family home shall not discriminate against a youth based upon race, religion, age, gender or disability.

7.721.71 Religion and Culture [Eff. 9/15/12]

A. The host family home shall demonstrate consideration for, and sensitivity to, the cultural and religious backgrounds of youth in care.

B. Youth in care of the host family home shall be allowed and encouraged to celebrate his/her cultural and religious holidays.

C. A youth may be invited to participate in religious and cultural activities of the host family home but shall not be required to participate.

D. Any form of religious or cultural intervention used by the host family home to control or change a youth's behavior, or treat or heal a medical condition, must be approved, in writing, by the legal guardian(s) of the youth prior to the use of the intervention.

E. The host family home cannot deny medical care to a youth because of host family home's religious beliefs.

F. Opportunity and assistance shall be provided for each youth to practice the chosen/preferred religious beliefs and faith of his/her family. If the family has no preference, the individual preference of the youth shall be respected. The child placement agency or county will attempt to make necessary arrangements for attendance of youth at the appropriate religious institution or at a study group for religious instruction.

7.721.8 EDUCATION AND COMMUNITY INVOLVEMENT

7.721.81 Education [Eff. 9/15/12]

Youth shall attend educational/vocational programs in the most appropriate and least restrictive educational setting for the youth, including, but not limited to, attending regular classes conducted in accredited secondary schools within the community and workforce programs to achieve outcomes such as decreasing secondary school dropout rates, increasing rates of attaining a secondary school diploma or its recognized equivalent, or increasing placement and retention in postsecondary education or advanced workforce training programs.

7.721.82 Community Participation [Eff. 9/15/12]

A. Participation in community activities shall be encouraged, supported, and a vital part of each youth's life and choice.

B. The child placement agency or county shall reflect consideration for, and sensitivity to, the racial, cultural, ethnic and/or religious backgrounds of youth in care. The host family home shall involve a youth in cultural and/or ethnic activities appropriate to his/her cultural and/or ethnic background. Other factors should include, but are not limited to, consideration of the child's family, community, neighborhood, faith or religious beliefs, school activities, friends, and child's and family's primary language.

C. The host family home shall utilize available services, facilities, and activity programs of the community, and youth shall be given opportunities to participate as individuals or as a group in agency-sponsored recreational and cultural programs.

D. Chores at the host family home are considered part of the participatory responsibility of living together. They shall provide constructive experiences in accordance with the age and ability of the youth. All chores shall be scheduled so as not to conflict with other essential scheduled activities. Youth participating in the host family home cannot provide independent care/supervision of other residents in the host family home.

E. The child placement agency or county shall comply with all child labor laws and regulations in making work assignments, with consideration for agricultural work assignments in those communities.

F. Case manager shall approve paid or voluntary work assignments outside of the host family home. Approval shall include knowledge of the employer, the specific type of work, and the conditions of employment/voluntary work.

G. A youth shall not be exploited. A youth may not participate in solicitation on behalf of the child placement agency or county or certifying authority for a fund-raising activity without the written permission of the parent(s) or guardian(s) for each specific activity, and the youth must be willing to participate in the activity.

7.721.9 PERSONAL CARE OF THE YOUTH

7.721.91 Medical and Health Services [Eff. 9/15/12]

A. The child placement agency or county of the host family home shall ensure the availability of emergency medical care for each youth in care.

B. Whenever indicated, a youth shall be referred to an appropriate specialist for either further assessment or treatment.

C. At all times there shall be first aid supplies readily available at each host family home and at least one (1) person present at the home or with the youth who is certified in First Aid, or the equivalent, and CPR for all ages of youth in care.

D. The child placement agency or county, in conjunction with the parent(s) or guardian(s), shall make every effort to ensure that a youth needing corrective devices such as glasses, hearing aids, etc., is provided with the necessary equipment.

E. In a potentially life-threatening situation, the child placement agency or county shall refer the youth's care to the appropriate medical and legal authority.

F. Child placement agency or county of the host family home will determine policies for Medications which include the following:

1. Required storage procedures in homes participating in the host family home including locked containment of all medication.

2. During admission process case manager shall ascertain all medication the youth is currently taking.

3. All medication must be kept in a clean storage area inaccessible to youth and stored according to pharmacy instructions.

4. All prescriptive medications shall be administered only upon the written prescription of a physician. The child placement agency or county shall also obtain written authorization from the prescribing physician to administer any non-prescriptive medication.

5. Child placement agency or county will provide providers of host family homes complete instructions to ensure proper administration of medication for each youth.

6. For youth under 18 years old, in an emergency situation, non-prescriptive medication may be administered on the verbal authorization of a physician. Written confirmation must then be obtained for the verbal authorization.

7. The child placement agency or county maintains for each youth a cumulative record of all medication, both prescriptive and non-prescriptive, dispensed to that youth, including:

    a. The name of the youth.

    b. The name and dosage of medication.

    c. The time and date the medication was dispensed.

    d. The name or initials of the person administering the medication.

8. The child placement agency or county will establish guidelines for documenting an error of any sort with medication including:

    a. Notification to poison control if medication is administered incorrectly.

    b. Documentation of missing medication.

7.721.92 Food, Nutrition, Personal Hygiene, Daily Routine, Clothing, and Personal Belongings

7.721.921 Food and Nutrition [Eff. 9/15/12]

A. The host family home shall provide nutritious foods in the variety and amounts as appropriate for the age, appetite, and activity of each youth.

B. At least three nourishing, wholesome, well-balanced meals a day shall be offered at regular intervals. The host family home provider will document meals in a log to be audited by the child placement agency or county.

C. Family meals including all children and adults present in the home shall be provided whenever possible.

D. Youth shall be encouraged to eat a variety of the food served but shall not be subjected to undue coercion, including forced feeding, or punished for refusal to eat.

E. All food shall be from sources approved or considered satisfactory by the health authority. All foods shall be stored, prepared, and served in such a manner as to be clean, wholesome, free from spoilage, and safe for human consumption. Only pasteurized milk shall be served. Home pressure-canned fruits and vegetables and canned meats cannot be served because of the possible severe health concerns for youth from botulism in unsafe canned foods. Fruits, vegetables and meats may be frozen.

F. The child placement agency or county of the host family home shall inform providers of host family home of the special diets prescribed for youth including those that are contrary to their religious beliefs, or of their family, or are known to cause an allergic reaction or a health hazard.

G. Water shall be readily accessible to youth by means of an approved water source. Youth will be provided clean single-service cup for administering medication and rinsing mouth in bathroom.

7.721.922 Personal Hygiene and Daily Routine [Eff. 9/15/12]

A. The child placement agency or county of host family home shall establish procedures to ensure that youth receive training in good habits of personal care, hygiene, and grooming appropriate to their age, gender, race and culture.

B. The host family home shall ensure that youth are provided with necessary and appropriate toiletry items, including clean, individual towels and washcloths, toothbrush, toothpaste, comb, shampoo and clean cups and dishes.

7.721.923 Clothing and Personal Belongings [Eff. 9/15/12]

A. The host family home shall allow a youth in care to bring his/her personal belongings to the program, as defined by the child placement agency or county policy, and to acquire belongings of his/her own in accordance with the youth's plan. However, the host family home shall, as necessary, limit or supervise the use of these items while the youth is in the program. Where extraordinary limitations are imposed, the youth shall be informed of the reasons, in a language or manner of communication the youth can understand. The decision and reasons shall be recorded in the youth's case record.

B. The child placement agency or county shall establish provisions for the protection of the youth's property while the youth is participating in the host family home. If the host family home safeguards any money, valuables or personal property for a youth, the child placement agency or county shall maintain and inventory all such possessions. A full return or accounting of such possessions shall be made upon discharge of the youth from the host family home.

7.721.93 Living Spaces, Equipment, and Necessary Facilities for a Host Family Home

7.721.931 Physical Requirements for a Safe and Adequate Host Family Home [Eff. 9/15/12]

A. The entire premises of homes participating in the host family home are subject to inspection for licensing or certification purposes, including, but not limited to, the interior of the home, the grounds surrounding the home, the basement, the attic (if accessible), any storage buildings, and a garage or carport, if applicable.

B. Homes participating in the host family home, including indoor and outdoor space, shall be maintained in a clean and safe condition free from hazards to health and safety.

C. The following shall be required for all host family homes:

1. Although the presence of firearms and ammunition is strongly discouraged in host family homes, if child placement agency or county policies allow the presence of any weapons such as firearms, air rifles, bows, hunting knives or hunting sling shots, they shall be unstrung and unloaded at all times when youth are in the home and shall be stored in locked containers out of the reach youth. Ammunition and arrows shall be stored in separate locked containers. Firearms that are solely ornamental can be excepted from the storage requirement. Weapons shall not be transported in any vehicle in which youth are riding. Law enforcement professionals are exempted from the requirements of this section if conditions of their employment require them to carry weapons.

2. At least thirty-five (35) square feet of usable indoor space exclusive of halls, baths and sleeping area shall be available for each child. All floor space shall have carpets, tile or smooth finish that may be easily cleaned. Interior walls shall be constructed of solid material and be free from holes. Unfinished basements must be inaccessible to youth when safety hazards are present.

3. Exterior doors shall be maintained in such a manner that would permit easy exit. Interior doors shall be designed to prevent youth from being trapped.

4. A basement that will be used regularly in the care of youth in any manner shall be equipped with more than one exit; such exit may be an accessible window.

5. The home shall be equipped with refrigeration, and provisions shall be made for the washing, rinsing and storing of dishes in a safe and sanitary manner.

6. A comfortable bed in a well-ventilated room, which is not customarily used for other purposes, shall be available for each youth in the host family home. There shall be a minimum of forty (40) square feet of floor space for each youth's bed, and the beds should be placed at least two feet apart when arranged in parallel. Youth under the age of eighteen (18) may not be housed in the same living areas, including bedrooms, as youth over the age of eighteen.

7. No home participating in the host family home shall be used for a rental income business or an adult foster care facility. A business of a nature that might be hazardous to the health, safety, morals or welfare of youth shall not be operated on the premises of the home.

8. Mobile homes participating in the host family home shall have at least two exits, be skirted and properly installed and stabilized.

9. The child placement agency or county shall establish procedures for safety issues related to swimming pools; trampoline or other outdoor equipment shall be assessed by the child placement agency or county, addressed by the county or state health department as necessary, and documented in the case file.

D. A certificate shall be denied, suspended, revoked or made probationary for failure to repair or otherwise comply with any of the preceding requirements when a defect or noncompliance with such requirement has been noted by the licensing or certifying representative of the child placement agency or county and brought to the attention of the licensee or applicant in writing.

7.721.932 Host Family Home Maintenance [Eff. 9/15/12]

Child placement agency or county shall ensure that homes participating in the host family home:

A. Are kept in good repair and maintained in a safe, clean, and sanitary condition.

B. All areas available to youth's activities including equipment, materials and furnishings shall be of sturdy, safe construction, easy to clean, and free of hazards, such as sharp points or corners, splinters, protruding nails, broken play and recreational equipment, or paint that contains lead or other poisonous materials and might be dangerous to the life or health of youth.

C. Are kept free from accumulation of significant amounts of non-essential materials such as furnishings, newspapers, or magazines that could pose a fire or health hazard.

D. Have provisions for collection, storage, and disposal of trash to prevent infestation by rodents.

7.721.933 Fire Safety [Eff. 9/15/12]

Child placement agency or county shall establish procedure for homes participating in the host family home that ensure:

A. All homes participating in the host family home shall contain at least one Underwriters Laboratories (U.L.) approved fire extinguisher, highly visible, easily accessible, and in working condition, weighing not less than five pounds, that has a rating of 2A, 10BC. This requirement may be waived if more extensive fire-control measures are required by a local fire department.

B. A smoke detector and carbon monoxide detector, in working condition, must be installed on each level of the home and near sleeping areas.

C. 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.

D. No gas space heaters, open-flame gas or oil stoves, hot plates, or un-vented heaters are used in the home for heating purposes. No electric space heaters shall be used in the home for permanent heating purposes.

E. Flammables, aerosol paints, insecticides, chemicals, and other dangerous materials shall be locked or stored so they are inaccessible to youth and must be stored in areas separate from sleeping or living areas. Flammables shall be stored in an approved container and not be stored near a furnace, hot water heater, or other heating device.

F. Heating devices such as radiators, registers, fireplaces, wood-burning stoves, and steam and hot water pipes that pose a fire or burn hazard to youth shall be screened or otherwise protected.

G. There shall be no candles or other burnable objects permitted in youth's sleeping areas. Youth shall not be permitted to smoke inside host family home or in any vehicle used to transport.

H. Exit doors shall be clearly identified to all youth. No lock or fastening to prevent free escape from the inside of any room used by the youth shall be permitted.

I. Exit routes shall be kept free of discarded furniture, furnishings, laundry, and stacks of newspapers or magazines that could interfere with the prompt evacuation of the homes participating in the host family home.

7.721.94 Transportation [Eff.9/15/12]

A. The child placement agency or county of the host family home shall ensure that youth are provided with the transportation necessary for implementing the youth's service plan.

B. Homes participating in the host family home shall have means of transporting youth in cases of emergency.

C. Any vehicle used by the host family home in transporting youth in care shall be properly licensed and the vehicle shall be maintained in accordance with Colorado law.

D. Any host home parent or other person acting on behalf of the host family home operating a vehicle for purpose of transporting youth shall be properly licensed to operate the class of vehicle in accordance with Colorado law.

E. Youth must be properly fastened into a restraint system that conforms to all applicable Federal Motor Vehicle Safety Standards and pursuant to Colorado law.

F. The host family home shall not allow the number of persons in any vehicle used to transport youth to exceed the number of available seats in the vehicle.

G. The vehicle shall be enclosed and provided with door locks.

H. The child placement agency or county of the host family home shall ascertain the nature of any need or problem of youth in the program that might cause difficulty during transportation, such as seizures or a tendency toward motion sickness. The host family home shall communicate this information to the driver of any vehicle transporting youth.

7.721.95 Records, Reports and Confidentiality

7.721.951 Confidentiality [Eff. 9/15/12]

A. The child placement agency or county shall have a policy as to the maintenance, storage and confidentiality of records.

B. Records shall be the property of the child placement agency or county and shall be protected against loss, tampering, or unauthorized use.

C. Facts learned about youth and their families shall be kept confidential, with the following exceptions:

1. In medical emergencies, and then only when the assistance and/or expertise is required of that unauthorized person; or,

2. To the youth, his/her parent(s) or guardian(s) and their respective legal counsel(s), a court having jurisdiction over the youth, or an authorized public official, or licensing representative in performance of his/her mandated duties; or,

3. If the parent(s) or guardian(s) has given voluntary, written consent facts maybe shared using confidential fax or encrypted email.

4. Mandatory reporting of child abuse as required by law; and,

5. Reporting to the appropriate authority a youth's attempt to harm his/herself or others.

6. A youth's records may only be released upon the written consent of the youth, and the legal guardian for youth under eighteen years old; facts may be shared using confidential fax or encrypted email.

7.721.952 Records [Eff. 9/15/12]

A. The child placement agency or county shall maintain complete records as required for the host family home.

B. Records for youth shall be retained for at least three years. Retention of records for a longer period may be desirable when they reflect an accident, injury or other unusual circumstance.

C. A record of admission shall be completed for each youth in the host family home at the time of admission. The admission record shall be maintained at the child placement agency or county. The host family home where the youth where the youth resides shall received an abbreviated admissions record that contains:

1. Youth's name, date and place of birth (verified by a birth certificate when possible), gender, race, religious preferences, and date of admission.

2. Psychiatric and psychological reports, when available.

3. Medical/medication summary and reports, when available.

4. Summary recording of significant contacts with parent(s), guardian(s) and other involved agencies.

D. When a youth is removed or discharged from the host family home, the child placement agency or county shall complete a summary of the youth's discharge from the home which includes at a minimum:

1. The date of the discharge of the youth from the home.

2. The plan for the youth.

3. Circumstances that led to an unplanned discharge.

E. Copies of a youth's file, including discharge information, shall be provided to parent(s) or guardian(s) upon request or to others by written consent.

F. A copy of all policies developed by the child placement agency or county for the host family home shall be maintained for at least three years.

7.721.953 Reports [Eff. 9/15/12]

A. The Child Placement Agency or County shall immediately attempt to notify the youth's parent(s), guardian(s), and/or the responsible agency of any serious illness or serious injury resulting in medical treatment away from the home, hospitalization or death involving a youth in the host family home.

B. The child placement agency or county must immediately report in writing to the Department any accidents, injuries, serious illnesses, or fatalities that occurred at the host family home and that resulted in emergency medical treatment away from the host family home, hospitalization or death. The report must be made within 48 hours after the accident, illness, or death occurred.

C. A report about a death must include:

1. The youth's name, birth date, address, and telephone number.

2. If known, the names of the youth's parent(s) or guardian(s) and their address and telephone number if different from that of the youth.

3. Date of the fatality.

4. Brief description of the incident or illness leading to the death.

5. Names and addresses of witnesses or persons who were with the youth at the time of death.

6. Name and address of police department or authority to which the report was made.

D. The child placement agency or county of the host family home must immediately report in writing to the Department any change in the status of the home that would affect care of youth.

E. The child placement agency or county must immediately report in writing to the Department any legal action brought against a home participating in the host family home regarding any youth, staff, or conduct of the home at the time of initiation of such legal action.

Editor's Notes

History

Sections 7.702; 7.707; 7.712 eff. 05/01/2007.

Sections 7.705, 7.711, 7.712, 7.719 eff. 06/01/2007.

Sections 7.701.2; 7.701.3; 7.708; 7.709; 7.710 eff. 07/30/2007.

Sections 7.701.32-33, 7.710.56.A-J.5 emer. rule eff. 08/03/2007.

Sections 7.710.33.L-M, 7.710.36.A eff. 09/01/2007.

Sections 7.701.32-33; 7.710.56 eff. 10/30/2007.

Sections 7.710.52, 7.710.56 emer. rule eff. 12/07/2007.

Sections 7.710.52; 7.710.56 eff. 01/30/2008.

Section 7.710.32 eff. 04/01/2008.

Sections B&P, 7.701.4, 7.707.42, 7.712.33, eff. 09/01/2008.

Sections 7.709, 7.710.34, 7.710.36 eff. 11/01/2008.

Section 7.707 eff. 01/01/2010.

Sections 7.702.52-7.702.54, 7.702.55.D-7.702.56.A(5), 7.710.1-7.710.25, 7.710.33.A, J, L(6), M, 7.710.34-7.710.42, 7.710.45-7.710.98, 7.716.4-7.716.6.B eff. 05/01/2010.

Section 7.701.33.A emer. rule eff. 09/10/2010.

Section 7.701.33.A eff. 12/01/2010.

Sections 7.716.1, 7.716.2.A.7, 7.716.3 eff. 01/01/2011.

Section 7.710.12 eff. 03/02/2011.

Sections 7.700, 7.701.11, 7.701.2, 7.701.33.A, 7.701.4, 7.720 eff. 04/01/2011.

Section 7.701.33.A-D.1, 7.701.33.H-I emer. rule eff. 08/10/2011.

Sections 7.701.33.A-D.1, 7.701.33.H-I eff. 11/01/2011.

Sections 7.705.9-7.705.96 repealed eff. 01/01/2012; Sections 7.701.2, 7.705.1, 7.705.33, 7.705.42, 7.705.43, 7.714, 7.714.4, 7.714.932 eff. 01/01/2012.

Section 7.17 repealed eff. 02/01/2012.

Section 7.708 eff. 04/01/2012.

Sections 7.701.2, 7.701.31, 7.701.33, 7.701.4, 7.701.9, 7.702.2, 7.702.43, 7.702.91, 7.705, 7.705.22, 7.705.33, 7.705.55, 7.705.6, 7.705.82, 7.705.84, 7.705.100, 7.706, 7.706.1, 7.706.15 - 17, 7.706.19, 7.707.1, 7.707.22, 7.707.31, 7.707.71, 7.707.923, 7.708.11, 7.708.31, 7.708.34-35, 7.708.36, 7.708.61, 7.708.65, 7.709.2, 7.709.21, 7.709.24, 7.710, 7.710.11, 7.710.2, 7.710.21-22, 7.710.24-25, 7.710.33-34, 7.710.36, 7.710.41-42, 7.710.44-45, 7.710.52-53, 7.710.55-56, 7.710.92-93, 7.711.1, 7.712.41-42, 7.712.74, 7.713, 7.713.1, 7.713.21, 7.713.23-25, 7.713.31, 7.713.41, 7.713.56, 7.713.65, 7.714, 7.714.1-2, 7.714.4-5, 7.714.52-53, 7.714.92, 7.714.933, 7.715.11, 7.715.46, 7.715.82, 7.715.84.H, 7.720.41, 7.720.73 eff. 06/01/2012. Sections 7.702.1, 7.705.7, 7.707.32.B.7, 7.710.26, 7.711.75.W, 7.712.1, 7.712.33, 7.718 repealed eff. 06/01/2012.

Sections 7.702.44, 7.708.39.A, 7.709.29.E eff. 07/01/2012.

Section 7.708.11 emer. rule eff. 09/07/2012.

Sections 7.701.21, 7.705.81-82, 7.708.1.B, 7.710.1, 7.710.33.A-J, 7.715.1, 7.715.33, 7.715.43.F-K, 7.715.71.A, 7.721 eff. 09/15/2012.

Sections 7.708.11, 7.708.7 eff. 12/01/2012.

Sections 7.701.2.D, 7.711.1 eff. 04/01/2013.

Sections 7.701.13, 7.701.33 eff. 02/01/2014.

Sections 7.708.21, 7.708.21.I, 7.721.3, 7.721.3.G eff. 07/01/2014.

Section 7.701.35 eff. 08/01/2014.

Sections 7.701.100, 7.702.42, 7.702.64, 7.702.73, 7.706.19, 7.707.6, 7.707.75, 7.711.76, 7.712.32, 7.712.74 eff. 04/01/2015. Section 7.702.93 repealed eff. 04/01/2015.

Sections 7.701.2, 7.701.4, 7.706.1 eff. 10/01/2015.

Sections 7.701.200, 7.705.22.A, 7.705.83, 7.708.39, 7.708.39, 7.708.61, 7.708.61.K, 7.708.65, 7.709.22, 7.709.22.I, 7.709.25, 7.709.25.E, 7.710.43, 7.710.43.H-.I eff. 11/01/2015.

Sections 7.701.2, 7.701.32, 7.701.33, 7.701.34, 7.701.56, 7.708, 7.708.1, 7.708.11, 7.708.2-7.708.21-7.708.26, 7.708.3-7.708.31, 7.708.33, 7.708.34, 7.708.35, 7.708.36, 7.708.37, 7.708.38, 7.708.39, 7.708.41, 7.708.42, 7.708.43,-7.708.46, 7.708.51, 7.708.52, 7.708.61, 7.708.62, 7.708.63, 7.708.64, 7.708.65, 7.708.67, 7.708.7, 7.708.71, 7.708.72, 7.708.74, 7.710, 7.710.1, 7.710.3-7.710.31, 7.710.33, 7.710.34, 7.710.36, 7.710.52 eff. 01/01/2016.

Sections 7.702-7.702.94 eff. 02/01/2016.