CHAPTER 5310. COMMUNITY RESIDENTIAL REHABILITATION SERVICES FOR THE MENTALLY ILL

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Source

The provisions of this Chapter 5310 adopted May 7, 1982, effective May 8, 1982, 12 Pa.B. 1485, unless otherwise noted.

Cross References

This Chapter cited in 28 Pa. Code § 709.21 (relating to applicability); 55 Pa. Code § 3800.3 (relating to exemptions); 55 Pa. Code § 3800.56 (relating to exceptions for staff qualifications); 55 Pa. Code § 6000.1003 (relating to definitions); and 55 Pa. Code § 6100.81 (relating to HCBS provider requirements).

Subchapter A. GENERAL PROVISIONS

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§ 5310.1. Legal base.

The legal base for this chapter is Article IX of the Public Welfare Code (62 P. S. §§ 901—922).

§ 5310.2. Policy.

(a) Community Residential Rehabilitation Services (CRRS) are specifically designed and operated to assist persons with chronic psychiatric disability to live as independently as possible through the provision of training and assistance in the skills of community living and by serving as an integrating focus for the person’s rehabilitation. CRRS are defined, regulated and operated to implement the principle of least restrictive service alternative. An individual shall be served by CRRS only for so long as the services are consistent with his need for services.

(b) The CRRS can exist only in a system of services for their clientele and cannot function without ties to other service providers. Rehabilitation of severely psychiatrically disabled individuals requires many and diverse services: CRRS have as their part in the process the development of the clients’ skills for independent living and for community participation while more general social and vocational skills are developed and treatment occurs. CRRS’ have an obligation to work cooperatively with other service agencies and with local coordinating and

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planning groups toward the development and operation of a comprehensive service system which can meet the needs of chronically mentally ill persons in a continuous, timely and coordinated manner.

(c) The CRRS have the following essential characteristics:

1. A homelike, noninstitutional environment providing maximum opportunity to learn the skills necessary for more independent living.
2. A residential setting providing each client with maximum possible autonomy, independence and self-determination.
3. A program which constantly strives to enable clients to move to less restrictive living settings.
4. Responsible staff to support and assist the client as needed in his movement to independence.
5. Well-developed cooperative efforts with other agencies in the service delivery system to ensure coordinated, continuous and effective services for the rehabilitation of clients.

(d) This chapter prescribes standards for certification to operate Mental Health Community Residential Rehabilitation Services in this Commonwealth. Funding through the County Mental Health/Mental Retardation (MH/MR) program may be provided for the establishment and operation of CRRS. This chapter is not intended to confer eligibility for County MH/MR funding although the issuance of a certificate of compliance under this chapter and Chapter 20 (relating to licensure or approval of facilities and agencies) does constitute one condition of eligibility for the funding.

Notes of Decisions

Use of community apartment building to house chronic psychiatric patients, where clients lived independently in apartment units, would not change legal nonconforming use of building so as to make it violative of zoning ordinance. Markley v. Carlisle Zoning Hearing Board, 527 A.2d 595 (Pa. Cmwlth. 1987).

§ 5310.3. Applicability.

(a) This chapter applies to providers of full-care or partial-care community residential rehabilitation services, or both, as defined in § 5310.6 (relating to definitions).

(b) This chapter does not apply to child residential facilities which serve exclusively children, which are governed by Chapter 3800 (relating to child residential and day treatment facilities).

(c) This chapter applies to host homes serving one or more children.

Authority

The provisions of this § 5310.3 amended under Articles IX and X of the Human Services Code (62 P.S. §§ 901—922 and 1001—1080).
§ 5310.4. Certification of compliance.

Each provider of community residential rehabilitation services (CRRS) shall apply for a certificate of compliance in accordance with Chapter 20 (relating to licensure or approval of facilities and agencies). The certificate of compliance specifies the level of care for which the provider is approved.

§ 5310.5. Waiver of standards.

(a) Where the development of community residential rehabilitation services (CRRS) is severely limited by this chapter, a waiver may be granted for a particular section for a period of 6 months and may be renewed three times. Waivers will be applied only in areas where the need for the services and the attempts to meet the standards of this chapter are adequately documented. Waivers are granted by the Office of Mental Health only in exceptional circumstances.

(b) In the case of CRRS sites in operation prior to the adoption of this chapter a permanent waiver may be granted to the requirements of § 5310.73(e)(2)—(7) (relating to physical plant requirements), provided the application in writing is made within 90 days of the effective date of these standards.

(c) A waiver request must meet all three conditions:

1. The request with adequate justification is submitted as required by Chapter 20 (relating to licensure or approval of facilities and agencies).
2. The request does not represent a danger to the health, safety or well-being of the client.
3. The request complies with the intent of the provision to be waived.

§ 5310.6. Definitions.

The following words and terms, when used in this chapter, have the following meanings, unless the context clearly indicates otherwise:

CRRS—Community residential rehabilitation services—Transitional residential programs in community settings for persons with chronic psychiatric disability. CRRS’s provide housing, personal assistance and psychosocial rehabilitation to clients in nonmedical settings. There are two levels of care, full or partial, which are distinguished by the level of functioning of the clients served and the intensity of rehabilitation and training services provided by CRRS staff to the clients. In both levels of care, the provider acts as landlord to the client. Except host homes for children, every site used by a CRRS to house clients is owned, held, leased or controlled by the provider or a provider-affiliate.

Child—A person who is under 18 years of age and who is not an emancipated minor.
Full-care CRRS for adults—A program that provides living accommodations for the client with staff onsite whenever a client is there and a full range of personal assistance and psychosocial rehabilitation for psychiatrically disabled adults who display severe community adjustment problems and who require an intensive, structured living situation.

Full-care CRRS for children—A program providing living accommodations with maximum supervision, personal assistance and a full range of psychosocial rehabilitation services for psychiatrically disabled children who display severe interpersonal adjustment problems and who require an intensive, structured living situation.

Host home for children—A private residence of a family, other than the home of the child’s parents, with whom the CRRS contracts to provide a structured living arrangement for one to three children.

Mental disorder—Conditions classified as mental disorders by the International Classification of Diseases (ICD-9-CM) excluding mental retardation and drug/alcohol conditions.

Mental health professional—A person trained in a generally recognized clinical discipline, including, but not limited to, psychiatry, social work, psychology, nursing, rehabilitation, special education or activity therapies who has a graduate degree and clinical experience.

Mobile ambulatory—Able to walk without assistance.

Mobile nonambulatory—The ability to move from place to place with the use of devices such as walkers, crutches, wheelchairs, wheeled platforms, and the like, by a person who is otherwise unable to walk independently.

Parent—The mother or father by birth or adoption or the legal guardian of the child.

Partial-care CRRS—A program that provides living accommodations for the client. Staff is at the site on a regularly scheduled basis including evenings and weekends. A limited range of personal assistance and psychosocial services are provided for psychiatrically disabled adults who display community adjustment problems and require a living situation which includes rehabilitation and training services.

Authority

The provisions of this § 5310.6 amended under Articles IX and X of the Public Welfare Code (62 P. S. §§ 901—922 and 1001—1080).

Source

The provisions of this § 5310.6 amended June 25, 1999, effective October 26, 1999, 29 Pa.B. 3295. Immediately preceding text appears at serial pages (211921) to (211922).

Cross References

This section cited in 55 Pa. Code § 5310.3 (relating to applicability).
Subchapter B. ADULT SERVICES

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GENERAL PROVISIONS

§ 5310.11. Governing body.

(a) Community residential rehabilitation services (CRRS) shall be provided by corporations or governmental entities.

(b) CRRS providers shall establish a governing body which has legal responsibility for the CRRS.

(c) The governing body shall adopt written policies for its own operation which include:

(1) Qualifications and methods of selection for governing body membership.

(2) Frequency of governing body meetings.

(3) Procedures for conducting governing body business.

(4) Provisions for disclosure by governing body members of all conditions which may create a conflict of interest and procedures for dealing with conflict of interest situations.

(d) The governing body shall:

(1) Select a director who shall supervise the CRRS in accordance with the policies established by the governing body and who shall be officially responsible to the governing body.

(2) Conduct an annual review and evaluation of the CRRS program activities, policies and procedures manual, program goals and objectives, and make any adjustments that are needed.

(3) Assure insurance coverage is in effect to the extent deemed necessary by the governing body to protect the governing body, staff, clients, and property of the CRRS and to meet the requirements of State and Federal law.

(4) Adopt written policies for guiding the operation of the CRRS which must include:

(i) Program goals and objectives, including measurable anticipated outcomes.

(ii) Program organizational structure.

(iii) Administration of funds to meet written goals of the program.

(iv) Review and approval of the annual budget and any modifications.

(v) Personnel policies and any modifications.

(vi) Client grievance procedure, which guarantees a written response to the client by the CRRS.

(5) Review all reported instances of violations of client rights in the CRRS and report the results of the review to the County Mental Health/Mental Retardation (MH/MR) Office.

Cross References

This section cited in 55 Pa. Code § 5310.62 (relating to client rights in residence); 55 Pa. Code § 5310.101 (relating to governing body); and 55 Pa. Code § 6000.1003 (relating to definitions).
The director shall assure that a manual of community residential rehabilitation service (CRRS) policies and procedures is compiled and updated. The manual must provide an operations guide for the CRRS in implementing policies established by the governing body and this chapter.

Cross References
This section cited in 55 Pa. Code § 5310.91 (relating to special requirements for community residential rehabilitation service (CRRS) serving children).

§ 5310.13. Administrative records and reports.
The director shall assure that administrative records and reports are established, maintained, and retained to guide the operations and reflect the programs of the community residential rehabilitation service (CRRS) and to demonstrate compliance with this chapter and other applicable statutes.

Cross References
This section cited in 55 Pa. Code § 5310.91 (relating to special requirements for community residential rehabilitation service (CRRS) serving children).

(a) The community residential rehabilitation service (CRRS) must establish and implement written personnel policies and procedures which cover:
   (1) Recruitment, selection, and promotion of staff.
   (2) Utilization of volunteers and students, if applicable.
   (3) Wage and salary administration.
   (4) Employee benefits.
   (5) Working hours.
   (6) Disciplinary procedures.
   (7) Table of organization.
   (8) Performance evaluation.
   (9) Employee accidents and safety.
   (10) Agency mechanisms for staff development through in-service and out-service training and professional consultation.
   (11) Assurance of nondiscrimination in personnel practice on the basis of age, race, color, religious creed, sex, national origin, ancestry, handicap, union membership, or high school equivalency.
   (12) A civil rights complaint procedure.
(b) Personnel policies must be compiled, updated, and made available to all staff.
(c) Written job descriptions must be established and maintained for all positions and must include:
   (1) Job title.
(2) Tasks and responsibilities of the job.
(3) Qualifications.
(4) Title of the supervisor.
(5) Title of subordinates, if any.
(d) Each staff member must be provided with a copy of his job description at the time of hiring and whenever the job description is changed.
(e) Each staff member is required to have a physical examination within 6 months prior to employment and every 2 years thereafter.
   (1) The examination report must include screening for tuberculosis and other communicable diseases, a statement from the physician that the staff member has no contagious diseases, and information on any medical problems which might interfere with the health of the clients.
   (2) Written policies must ensure that employees with symptoms or signs of communicable diseases are not permitted to work without authorization from the physician.
(f) When a CRRS uses volunteers or students, or both, in its operation, written policies and procedures for volunteers or students, or both, must be developed and provided to the volunteers/students and to staff.
(g) Each volunteer/student must be assigned a staff supervisor and must have the qualifications required for the tasks/activities assigned.

Cross References
This section cited in 55 Pa. Code § 5310.91 (relating to special requirements for community residential rehabilitation service (CRRS) serving child) and in 55 Pa. Code § 5310.102 (relating to personnel management).

CLIENT CHARACTERISTICS

§ 5310.21. Client characteristics.
(a) A client placed in community residential rehabilitation service (CRRS) must:
   (1) Be 18 years or older, or be an emancipated minor, unless the CRRS is operated under Subchapter C (relating to children services).
   (2) Be psychiatrically disabled; as specified in § 5310.32(c)(1) (relating to intake).
   (3) Have demonstrated, over a period of time, social maladjustment which prevents the client from living independently in the community.
   (4) Have difficulties in social or personal adjustment associated with psychiatric disability, as demonstrated in reduced, lost or underdeveloped capacity for establishing and sustaining appropriate interpersonal relationships or for making and implementing decisions necessary for self-care and independent living.
(5) Be capable of self-preservation, according to the criteria established in § 5310.32(e).

(b) A client placed in CRRS may:

(1) Have additional handicaps provided the individual meets one of the criteria for self-preservation established in § 5310.32(e) (relating to intake).

(2) Need special diet or medication supervision, provided that the client does not need 24-hour nursing or medical care.

Cross References
This section cited in 55 Pa. Code § 5310.91 (relating to special requirements for community residential rehabilitation service (CRRS) serving children) and 55 Pa. Code §§ 5310.111 (relating to client characteristics).

SERVICES MANAGEMENT

§ 5310.31. Program description.

The community residential rehabilitation service (CRRS) must have a written program description which includes the following items:

(1) Written functional criteria for client enrollment and termination.

(2) Services to be provided in the residential program including:

(i) Housing.

(ii) Personal assistance, such as arrangements for meeting the nutritional needs of clients, assistance with medication, and developing self-care skills.

(iii) Psychosocial rehabilitation services to develop interpersonal and community living skills.

(3) Methods which will be used in delivering the services, such as individual goal planning, goal attainment scaling, classroom situations, individual instruction, counseling, group meetings, establishing social support network, task schedules, and the use of generic services.

Cross References
This section cited in 55 Pa. Code § 5310.91 (relating to special requirements for community residential rehabilitation service (CRRS) serving children); and 55 Pa. Code § 5310.121 (relating to program description).

§ 5310.32. Intake.

(a) There must be written policies and procedures for intake and all intake must be accomplished in accordance with those policies and procedures.

(b) The community residential rehabilitation service (CRRS) staff, during intake, shall review with the client the criteria for program enrollment and program termination, the services offered by the CRRS and the responsibilities of the client and the CRRS.
(c) The CRRS staff shall obtain the following information about each client prior to the client’s enrollment in the CRRS.

(1) Mental health information, including mental health history and evidence of psychiatric disability which is a certification of mental disorder dated not more than 1 year prior to client’s planned enrollment.

(2) A health appraisal signed by a licensed physician, which includes:
   (i) A review of health history.
   (ii) A complete physical examination dated not more than 6 months prior to client’s enrollment.
   (iii) Drug or alcohol history.
   (iv) Recommendations pertaining to medication and limitations of the client’s activities or diet.
   (v) Recommendations for follow-up by the CRRS in helping the client maintain ongoing health care.

(d) The intake procedures must include:

(1) Psychosocial evaluation as specified in § 5310.33(b) (relating to residential service plan).

(2) Client orientation to the program.

(3) Development of a residential services plan.

(4) Preparation of the written provider client agreement as specified in § 5310.34 (relating to service agreement).

(e) Intake procedures must also include evaluation of the client’s capability of self-preservation and client instruction in safety-emergency procedures and evacuation procedures for the site in which the client will live.

(1) A client who is mobile ambulatory is considered capable of self-preservation if he or she is able to vacate the CRRS site promptly following emergency alarms or the onset of fire or other emergency.

(2) A client who is mobile ambulatory and capable of self-preservation may be served in full-care or partial-care CRRS.

(3) A mobile nonambulatory client is considered capable of self-preservation if:
   (i) He is capable of prompt and independent transfer from bed-to-ambulation device.
   (ii) The CRRS site to which the client is assigned has no architectural barriers barring the exit path to the outside from the client’s bedroom.

(4) A client who is mobile nonambulatory and capable of self-preservation may be served in any full-care CRRS or partial-care CRRS site that meets the requirement specified in subsection (e)(3)(ii).

(5) A client is considered capable of self-preservation with minimal assistance if the client is able to vacate the CRRS site in which the client lives with no more than verbal instruction or minimal physical help. Verbal assistance means a staff member gives direction to the person in exiting the site. Minimal physical help means a staff member provides assistance in getting to one’s feet.
into a wheel chair, walker, or prosthetic device. The client must be able to effectively operate any device required for moving from one place to another, to understand and carry out instructions for exiting the site and to negotiate the exit path independently. A client who because of physical or mental disability or condition is unable to vacate the CRRS site in case of emergency without the continual verbal or physical assistance of staff is not considered capable of self-preservation with minimal assistance.

(6) A client who is capable of self-preservation with minimal assistance must be served only in full-care CRRS.

(f) Any client whose care is funded by the County Mental Health/Mental Retardation (MH/MR) Program may enter the CRRS program only after authorization from the county administrator or appropriate base service unit.

Cross References
This section cited in 55 Pa. Code § 5310.21 (relating to client characteristics); 55 Pa. Code § 5310.91 (relating to special requirements for community residential rehabilitation services (CRRS) serving children); and 55 Pa. Code § 5310.122 (relating to intake).

§ 5310.33. Residential service plan.
(a) The community residential rehabilitation service (CRRS) staff shall develop with each client an individualized written client residential service plan upon the client’s enrollment in the CRRS.

(b) The individual residential service plan must be based on the client’s psychosocial evaluation which is a functional assessment of the client’s strengths and needs in the major areas related to independence in residential and community functioning and addresses the client’s:

1. Self-care skills.
2. Health care, including medication management.
3. Housekeeping skills.
4. Ability to meet nutritional needs.
5. Mobility.
6. Money management skills.
7. Interpersonal skills.
8. Vocational/educational pursuits.
9. Use of leisure time.
10. Time structuring.
11. Community participation such as social networking and utilization of services and resources.

(c) The residential service plan must include the following items:
1. Short and long-term goals for service formulated jointly by the staff and client.
2. Behaviors to be modified and skills to be developed.
3. Type and frequency of rehabilitation services to be provided.
(4) Techniques and methods of service to be used.
(5) A list of persons involved in the implementation of the plan.

(d) The CRRS staff shall evaluate the client’s adjustment to the program within 30 days of enrollment and modify the service plan as needed. The residential service plan must be reviewed and updated every 60 days thereafter.

(e) Each client in a CRRS must spend a major portion of his time out of the residence. The goal of such involvement outside the residence is to increase the client’s use of community resources and participation in community activities which the client can continue to use upon program termination. The method for achieving this goal must be reflected in each client’s residential services plan.

(f) The client shall participate in the goal-setting, service planning, decision-making and progress assessment associated with the service plan.

(g) The original residential service plan, subsequent plan revisions, written plan reviews and documentation of client participation must be included in the client record.

(h) At the time of enrollment into CRRS and throughout the service period, each client shall be assigned to a CRRS staff person who is responsible for assuring:

(1) In-residence services are provided according to the client’s residential service plan.
(2) Referrals to and arrangements for service provision by other agencies specified in the client’s residential service plan occur and are coordinated with the agency or agencies responsible for treatment/case management of the client, such as the Mental Health/Mental Retardation Base Service Unit, Veterans’ Administration, Domiciliary Care, and therapist.
(3) Case recording of intake information, service plan, progress notes, service plan reviews, annual reassessment, referrals, and termination summary.

(i) A complete reassessment of the client’s strengths and needs as determined by the psychosocial evaluation and a review of the services provided to the client must be performed annually, or more frequently if a significant change in the client’s level of functioning occurs. The reassessment must take place at a conference which includes the persons involved in the individual service plan development and implementation. The results of this meeting must be documented in the case record and submitted in writing to the agency or agencies responsible for treatment and/or case management of the client.

Notes of Decisions

Confidentiality

In prosecution for alleged sexual abuse of a minor who was referred to the care of a mental health care provider and assigned to live in the defendant’s home pursuant to a mentor program, the minor’s records, such as reports of alleged sexual and physical abuse of minor, individual service plans, psychiatric evaluations, visitation plans, clinical evaluations of the minor, medications prescribed, and notes of the mentor, are not protected by the psychotherapist-patient privilege even though the infor-
mation is sensitive and may be confidential and protected from disclosure under 55 Pa. Code §§ 5310.52 and 5310.142 and perhaps other provisions of the Mental Health Procedures Act, where there is no reference to confidential communications made or information given specifically by the minor. Commonwealth v. Simmons, 719 A.2d 336 (Pa. Super. 1998).

Cross References
This section cited in 55 Pa. Code § 5310.32 (relating to intake); 55 Pa. Code § 5310.91 (relating to special requirements for community residential rehabilitation services (CRRS) serving children); and 55 Pa. Code § 5310.123 (relating to residential service plan).
§ 5310.34. Service agreement.
(a) There must be a written agreement between the CRRS provider and the client, which:

1. Is negotiated during the intake process.
2. Is signed by both parties.
3. Specifies the arrangements and charges for housing and food.
4. Specifies the goals to be achieved and services to be provided.
5. Specifies the rights and responsibilities of the client.
6. Includes a copy of the CRRS house rules, client rights, client grievance procedures, and termination policy.
7. Specifies any liability for the cost of services other than room and board.
8. Is updated and signed again whenever any of the terms change.

Cross References
This section cited in 55 Pa. Code § 5310.32 (relating to intake); 55 Pa. Code § 5310.91 (relating to special requirements for community residential rehabilitation services (CRRS) serving children); and 55 Pa. Code § 5310.124 (relating to service agreement).

§ 5310.35. Termination from program.
(a) The community residential rehabilitation service (CRRS) must establish written termination criteria and procedures which must address the following two types of termination:

1. Planned termination of services. The client, CRRS staff and, if appropriate, others responsible for the client’s welfare agree that the client should leave the program and have planned and prepared for the move.
2. Unplanned termination of services. The client drops out, requires hospital or nursing care, or demonstrates behavior that requires immediate removal.

(b) If the planned termination is a result of the client not living up to the terms of the service agreement, the CRRS must notify the client in writing of the decision, give an exit date, the reason for termination and indicate any recourse the client has under the client grievance procedures. A copy of the notice must be sent to each case management or treatment agency, specified in the individual’s service plan.

(c) Within 2 weeks after the exit date, the CRRS must prepare a termination summary for each client terminated which must be included in the client’s record and sent to the case management or treatment agency specified in the individual’s service plan.

Cross References
This section cited in 55 Pa. Code § 5310.91 (relating to special requirements for community residential rehabilitation service (CRRS) serving children); and 55 Pa. Code § 5310.126 (relating to termination from program).
§ 5310.36. Provider review of services management.

The community residential rehabilitation services (CRRS) procedures for an internal program monitoring process must be established and implemented. The procedures must include regular review of program activities and client service plans. The procedures must be designed to assess:

1. The quality and timeliness of the individualized residential service plan process.
2. The adequacy of program activities in meeting the anticipated outcomes expressed in the program goals and objectives.
3. Whether coordination of the residential program with the comprehensive program needs of the clients served occurs.

Cross References

This section cited in 55 Pa. Code § 5310.91 (relating to special requirements for community residential rehabilitation service (CRRS) serving children).

§ 5310.37. Program closure.

When the community residential rehabilitation service (CRRS) intends to cease operation, the governing body shall provide at least 30 days written notice to each client, to all case management/treatment agencies, to the County Mental Health/Mental Retardation (MH/MR) Office, and to the Office of Mental Health. The notice must contain the projected closing date. The Director shall ensure that CRRS staff actively participate in the establishment and implementation of relocation plans for the clients.

Cross References

This section cited in 55 Pa. Code § 5310.91 (relating to special requirements for community residential rehabilitation service (CRRS) serving children); and 55 Pa. Code § 5310.127 (relating to program closure).

§ 5310.38. Notification in case of client emergency.

(a) In case of an emergency, serious illness or injury, the unplanned termination, or the death or impending death of a client, the Director or the Director’s designee shall notify as soon as possible but within 24 hours:

1. The person or persons designated by the client to be notified in such a case.
2. Any case management/treatment agency responsible for the client.

(b) These notifications are subject to § 5310.52 (relating to confidentiality).

Cross References

This section cited in 55 Pa. Code §§ 5310.91 (relating to special requirements for community residential rehabilitation services (CRRS) serving children).
§ 5310.39. Service linkages.  
(a) The community residential rehabilitation service (CRRS) must establish:
   (1) Arrangements for emergency psychiatric care for clients, confirmed by a letter of agreement.
   (2) Arrangements with the persons or agencies responsible for the client’s mental health treatment to ensure ongoing care and coordination between the treatment service and the CRRS.
   (3) Arrangements for emergency medical care for clients.
(b) The CRRS must make arrangements with individual practitioners or health care services to ensure ongoing medical and dental care for each client.
(c) All CRRS’s must participate in the overall system of mental health care as defined in the County Mental Health/Mental Retardation (MH/MR) Plan. The CRRS must have a written agreement with the County MH/MR program which:
   (1) Specifies the relationship of the CRRS with the county program case management system.
   (2) Provides the continuity of care and information exchange.
   (3) Indicates the procedure for reporting by the CRRS to the County program of the following:
      (i) Client deaths.
      (ii) Fire or other disaster rendering a CRRS site uninhabitable.
      (iii) Program closure.
      (iv) Reported instances of violations of clients’ rights in the CRRS.

Cross References
This section cited in 55 Pa. Code § 5310.91 (relating to special requirements for community residential rehabilitation service (CRRS) serving children); and 55 Pa. Code § 5310.128 (relating to service linkage).

STAFFING

§ 5310.41. Staffing and training.  
(a) The community residential rehabilitation service (CRRS) must have staff sufficient in number and qualifications to carry out the functions of CRRS which include supervision, personal assistance, and psychosocial rehabilitation services as indicated in the CRRS program description.
(b) Full-care CRRS must have staff onsite whenever a client is in the residence. Clients designated capable of self-preservation with minimal assistance, shall be served only in a Full-care CRRS.
(c) Partial-care CRRS must have staff onsite in a regularly scheduled staffing pattern including evenings and weekends. All CRRS where staff are on-call but not onsite for a portion of the time clients are in the residence are Partial-care CRRS.
(d) CRRS staff must have work experience or training relevant to performing the tasks and carrying out the responsibilities specified in their job descriptions.

(e) Clerical and other nonprogram staff must be employed as required to provide efficient program operations and to carry out the requirements of this chapter.

(f) A mental health professional shall supervise the client service plan process and shall sign each individual residential service plan and service plan review.

Cross References
This section cited in 55 Pa. Code § 5310.91 (relating to special requirements for community residential rehabilitation service (CRRS) serving children); and 55 Pa. Code § 5310.131 (relating to staffing).

CLIENT RECORDS

§ 5310.51. Case record.

(a) A case record must be initiated at intake for each client, be maintained through the service period, and retained at least 5 years after the client leaves the program.

(b) Each case record must include the following information:

(1) The following client identifying information must be in the case record:
   (i) Name.
   (ii) Date of birth.
   (iii) Sex.
   (iv) Social security number.
   (v) Religious affiliation, if client chooses to state the affiliation.
   (vi) Date of entry into the CRRS.

(2) The following emergency and contact information must be in the case record:
   (i) Name, address, telephone number, and contact person for the case management/treatment agency, if any.
   (ii) Name, address, and telephone numbers of client family members of significant others.
   (iii) Name and telephone number of the person designated by the client to be called in case of emergency.
   (iv) Name and telephone number of client’s personal physician or therapist, if applicable.

(3) The following medical/special information must be in the case record:
   (i) Any dietary restrictions.
   (ii) Medication regimen.
   (iii) Medical problems, such as diabetes, heart disease and epilepsy.

(4) The following program information must be in the case record:
§ 5310.52. Confidentiality.

(a) All client records and information are confidential and may not be disclosed directly or indirectly without the written consent of the client except:

1. To those persons actively engaged in implementing the client’s residential or overall treatment plan.

2. To persons using material from client records for teaching, training or research purposes, provided the use and dissemination of such data does not identify individual clients and a specific, written request stating the purpose for the disclosure is approved by the Director.

3. To any governmental or third party payor which funds in whole or in part the cost of the client’s care.

4. To reviewers and inspectors when necessary to obtain certification as an eligible provider of services.

5. Under court order.

6. In accordance with other applicable Federal and State regulations.

Cross References

This section cited in 55 Pa. Code § 5310.91 (relating to special requirements for community residential rehabilitation service (CRRS) serving children); and 55 Pa. Code § 5310.141 (relating to case record).

§ 5310.52. Confidentiality.

(i) Intake information.

(ii) Individual’s residential service plan, dated and signed.

(iii) Name of the designated staff person for the client.

(iv) Service plan reviews and other reports of performance and progress which must be dated and signed.

(v) Referral activity, correspondence, reports of emergencies, accidents, and illness.

(vi) Dated and signed annual reassessments.

(vii) Dated and signed termination summary.

(viii) A copy of written agreement between the CRRS and the client.

(ix) Written consent for disclosure of information.

(c) Client case records must be:

1. Legible and in ink or typewritten.

2. Organized and maintained according to a uniform format so that information is readily located.

(d) The Director or his designee shall annually:

1. Review client case records to monitor the nature and quality of the recording.

2. Prepare a written summary of the review, including date, methods used and findings.

3. Make adjustments in recording procedures as needed.

Cross References

This section cited in 55 Pa. Code § 5310.91 (relating to special requirements for community residential rehabilitation service (CRRS) serving children); and 55 Pa. Code § 5310.141 (relating to case record).
(b) Information made available under this section must be limited to that information necessary for the purpose for which the information is sought.

(c) Annually, these confidentiality requirements must be reviewed with all staff, volunteers, students, and others, as applicable, and as they enter their position or are assigned to the CRRS.

(d) The community residential rehabilitation service (CRRS) must keep client records within locked storage containers at all times when not in active use by program staff.

(e) Client written consent is required to disclose information from the client’s record. The consent form must include the:

(1) Date and nature of request for information.

(2) Name of the person, agency or organization to whom disclosure is made.

(3) Type of information disclosed.

(4) Dated signature of the client.

(5) Dated signature of a witness.

(6) Expiration date of consent form.

(7) Statement of the client’s right to revoke consent.

(f) One copy of each signed consent form must be given to the client and one copy included in the client’s case record.

Cross References
This section cited in 55 Pa. Code § 5310.38 (relating to notification in case of client emergency); 55 Pa. Code § 5310.91 (relating to community residential rehabilitation service (CRRS) serving children) and 55 Pa. Code § 5310.142 (relating to confidentiality).

CLIENT RIGHTS

§ 5310.61. Nondiscrimination.

The community residential rehabilitation service (CRRS) must have written policies and procedures to assure non-discrimination in the provision of services on the basis of age, race, color, religious creed, sex, national origin, ancestry or handicap.

Cross References
This section cited in 55 Pa. Code § 5310.91 (relating to community residential rehabilitation service (CRRS) serving children) and 55 Pa. Code § 5310.151 (relating to client rights).

§ 5310.62. Client rights in residence.

The community residential rehabilitation service (CRRS) must insure that each client:

(1) Is free to communicate, associate, and meet privately with persons of the client’s choice.
(2) Has access in reasonable privacy to a telephone in the building in which the client resides. A standard pay telephone may be used. Arrangements must be made by the CRRS with the clients for payment of long-distance calls.  
(3) Has access to the United States mails, may write and send uncensored mail at the client's own expense and may receive, unopened, mail addressed to the client.  
(4) Has the right to privacy of self and possessions.  
(5) Has the right to confidentiality concerning information about the client.  
(6) Is able to keep in the client's room personal possessions and items of furniture.  
(7) Is encouraged to exercise the client's rights as a citizen, for example, voting.  
(8) Is free to voice grievances and recommend changes in the policies and services of the CRRS in accordance with the client grievance procedure specified in § 5310.11(d)(4) (relating to governing body).  
(9) Is not required to participate in research projects.  
(10) Has the right to manage personal financial affairs.  
(11) Has the right to practice the religion or faith of the client's choice.  

Cross References  
This section cited in 55 Pa. Code § 5310.91 (relating to special requirements for community residential rehabilitation service (CRRS) serving children).  

§ 5310.63 Violation of client rights.  
No client may be subject to neglect, abuse, exploitation, or maltreatment by employes or other clients. The community residential rehabilitation service (CRRS) must have a written policy which prohibits such practices and which provides procedures for investigating, reporting and taking action on alleged violations of client rights. This procedure shall include review by the governing body of all reported instances of violations of client rights in the CRRS and reporting the results of the review to the County Mental Health/Mental Retardation (MH/MR) Office.  

Cross References  
This section cited in 55 Pa. Code § 5310.91 (relating to special requirements for community residential rehabilitation service (CRRS) serving children).  

§ 5310.64 Client right to inspect client record.  
The community residential rehabilitation service (CRRS) must have written policy and procedures to assure that clients have the right to inspect their records. Clients must be informed of this right at program enrollment and provided information on the procedure for requesting to inspect their own record. Clients may be denied access to inspect portions of the record under the following conditions:  
(1) The Director shall determine that:  

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(i) Disclosure of specific information would be a substantial detriment to the client; or
(ii) Disclosure of specific information would identify and breach the confidentiality of other persons.
(2) The denial of access must be recorded with justification in the client’s record, and be dated and signed by the Director.

Cross References
This section cited in 55 Pa. Code § 5310.91 (relating to special requirements for community residential rehabilitation service (CRRS) serving children); and 55 Pa. Code § 5310.151 (relating to client rights).

§ 5310.65. Client right to compensation for work.
The governing body shall assure that clients are paid in accordance with CFR Part 529 of the Federal Wage and Hours Regulations for all work performed that is of consequential economic benefit to the community residential rehabilitation service (CRRS) except:
(1) Personal housekeeping tasks related directly to the client’s personal space or possessions.
(2) Shared responsibilities for regular household chores among a small group of residents.

Cross References
This section cited in 55 Pa. Code § 5310.91 (relating to special requirements for community residential rehabilitation service (CRRS) serving children); and 55 Pa. Code § 5310.151 (relating to client rights).

PHYSICAL FACILITIES STANDARDS

§ 5310.71. Site control.
Each site used by a community residential rehabilitation service (CRRS) to house clients must be owned, held, leased, or otherwise controlled by the provider or a provider-affiliate.

Cross References
This section cited in 55 Pa. Code § 5310.91 (relating to special requirements for community residential rehabilitation service (CRRS) serving children); and 55 Pa. Code § 5310.162 (relating to host homes).

§ 5310.72. Safety procedures.
(a) The community residential rehabilitation service (CRRS) staff shall arrange for the local fire department or another outside safety consultant to inspect and approve each physical site for fire safety and to determine the number, location and type of fire extinguishers and smoke detectors. This fire safety
inspection shall be done for initial occupancy and then at least every 2 years thereafter. All inspections must be documented.

(b) At each CRRS site, emergency telephone numbers for the fire department, local police and on-call staff must be posted by the telephone.

(c) The CRRS staff providing onsite client supervision must be instructed in the operation of the fire extinguishers.

(d) Fire drills at each CRRS site must be:
   (1) Held every 2 months.
   (2) Held during the night at least semiannually.
   (3) Recorded, including date, time, time required for evacuation, and number of persons taking part.

(e) Proper safeguards must be taken at all times against the fire hazards of smoking.

(f) Fireplaces must be securely screened when in use.

(g) The CRRS sites must be made safe by the elimination of or protection from such domestic hazards as slipping rugs and frayed or overloaded electrical cords. Stairways must have securely fastened handrails and adequate lighting for safe descent and ascent.

(h) The CRRS must have a written plan and procedures for meeting emergencies, such as missing residents, fire, flood, strike, and internal or external disaster. These procedures must be reviewed with each new staff person and annually with all staff.

(i) Each CRRS site with four or more clients must have an evacuation plan which contains a diagram of each floor showing exit paths, exit doors and location of fire extinguishers. A copy of this plan must be provided to each client and reviewed with the client upon entry to the site.

Cross References
This section cited in 55 Pa. Code § 5310.91 (relating to special requirements for community residential rehabilitation service (CRRS) serving children).

§ 5310.73. Physical plant requirements.

(a) Each community residential rehabilitation service (CRRS) must have at least one furnished room available for the purpose of counseling and meetings. The room must assure privacy for participants in the counseling sessions or meetings, but may be a room generally used for other purposes. The room may not be a client or staff bedroom.

(b) Each CRRS site must be in compliance with the requirements of the Department of Labor and Industry under act of April 27, 1927 (P. L. 465) (35 P. S. §§ 1221—1235), and The Fire & Panic Act, except in first class, second class and second class A cities in which case the CRRS site shall be in compliance with the local fire codes.

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(c) The sewage from each CRRS site must be disposed of in a manner that is in accordance with The Clean Streams Law (35 P. S. §§ 691.1—691.1001), the Pennsylvania Sewage Facilities Act (35 P. S. §§ 750.1—750.20), and the regulations of the Department of Environmental Resources.

(d) Each CRRS site shall meet the following physical requirements:

1. There shall be an adequate supply of piped hot and cold water to each lavatory, bathtub, shower, kitchen sink and to dishwasher and laundry equipment.

2. Heating in rooms used by client must be maintained at a temperature not less than 65°F or, where there are clients 65 years of age and older, not less than 70°F.

3. Portable space heaters may not be used. Space heaters may be used if they are adequately vented, mounted in an exterior wall, installed with permanent connections and protectors and have been inspected and approved by the local fire department.

4. Woodburning and coal burning stoves must meet all applicable local enforcement codes and shall be inspected and approved by the local fire department.

5. In facilities where interior temperatures exceed 85°F a fan shall be provided in rooms where temperatures are over 85°F. Fans shall be contained within a protective housing.

(e) Each CRRS site shall meet the following requirements for client residential living areas or spaces:

1. A living room or recreational area shall be available to clients.

2. Bedrooms shall be either single or double occupancy. A single occupancy room shall have 80 square feet or more of floor space. A double occupancy room shall have 60 square feet or more of floor space for each client. If a bedroom has a closet, up to 9 square feet may be counted in calculating the square footage of floor space provided there is sufficient floor space to accommodate all items required in paragraph (8).

3. Each bedroom shall have proper ventilation by means of either one window which can be opened without the use of tools from the inside or by other adequate means.

4. Space for personal property such as trunks, suitcases and seasonal clothing shall be provided in a dry, protected area which is accessible to clients.

5. There shall be at least one toilet and lavatory for every six clients.

6. There shall be at least one tub or shower for every six residents.

7. The bathroom, kitchen and main exit shall be directly accessible without going through client bedrooms.

8. Each client shall have available in the room the client occupies the items listed which shall be clean and maintained in good repair.
(i) A bed with mattress and firm foundation, which are both at least 72 inches by 36 inches.
(ii) Bed pillow.
(iii) Mirror.
(iv) Dresser.
(v) Clothes closet or wardrobe.
(vi) A secure place for client valuables such as a locked drawer or locked metal box.
(vii) Chair.
(viii) Bed linens and blankets, appropriate to climate, weather conditions and the client’s individual needs.
(ix) Towels and washcloths.
(x) Towel bar, if not provided in the bathroom.
(9) In a double occupancy room, the items listed below may be shared:
(i) Mirror.
(ii) Dresser, provided at least three drawers are available to each client.
(iii) Clothes closet or wardrobe.
(iv) Chair.
(v) Towel bar.
(10) Beds that require clients to climb steps or ladders to get into or out of bed are prohibited for client use.
(f) Each CRRS site shall meet the following housekeeping and maintenance requirements:
(1) The CRRS sites shall be equipped, arranged and maintained to provide for the health, safety and well-being of clients.
(2) The CRRS sites and furnishings shall be comfortable and clean. Housekeeping chores shall be regularly scheduled and performed.
(3) Floors, walls, vents, equipment and fans shall be clean and maintained in good repair.
(4) The CRRS sites shall be maintained in good repair and free of hazards, such as loose or broken window glass, loose or cracked floor coverings or ceilings and holes in walls.
(5) The site shall be kept free from insects by either screens on all functional outside windows and doors, or other effective means.
(g) Each CRRS shall insure that arrangements are made to enable the clients to launder personal items and linens weekly. If the laundry is done on the premises, proper equipment in good repair shall be available.
(h) Kitchen and dining area shall include the following:
(1) Each CRRS site shall have a kitchen with sufficient floor space and equipment for the preparation and storage of food and which is convenient to the dining area.
(2) Each CRRS site shall have a dining room or dining area that is equipped with sufficient tables and chairs to accommodate all resident clients at one time.

(3) Each CRRS site shall be equipped with utensils for eating, drinking, preparing, serving and storing food, which are in good condition and sufficient in number to meet the needs of resident clients.

Notes of Decisions

Staff apartment, used for social and meeting area, as well as record and medication storage, would be required to qualify as use accessory to primary use of apartment building as residential, in order to allow community mental health center to use apartment building in compliance with zoning ordinance. Markley v. Carlisle Zoning Hearing Board, 527 A.2d 595 (Pa. Cmwlth. 1987).

Cross References

This section cited in 55 Pa. Code § 5310.5 (relating to waiver of standards).

DIET AND MEDICATION

§ 5310.81. Medication.

(a) Self-medication shall be a goal for community residential rehabilitation service (CRRS) clients.

(b) CRRS programs shall establish and implement written policies and procedures regarding medications which meet legal restrictions regarding administration of medication. Medication policies and procedures shall include:

(1) How the goal of self-medication for clients is to be achieved.

(2) How clients who need assistance with medication prescribed for self-administration will receive it. For CRRS clients who need assistance, the least assistance necessary should be provided within the context of a planned program toward self-medication.

(3) The circumstances under which the CRRS stores medications for clients. Storing medications is subject to the following limitations:

(i) Only medications which are prescribed for self-administration may be stored by the CRRS on site.

(ii) Medications stored by the CRRS must be kept in a locked container or a container in a locked room.

(iii) Medications shall be kept in their original prescription containers.

(4) Training of direct service staff about medications used by their clients, their purposes and function, major side effects and contraindications and recognition of signs that medication is not being taken or is being misused.

Cross References

This section cited in 55 Pa. Code § 5310.91 (relating to community residential rehabilitation service (CRRS) serving children); and 55 Pa. Code § 5310.171 (relating to medication).
§ 5310.82. Nutrition.

(a) Self-sufficiency in meal planning, shopping and food preparation must be a goal for community residential rehabilitation service (CRRS) clients.

(b) The CRRS shall assure that arrangements are made to enable the client to have three well-balanced nutritious meals or their equivalent daily. The psychological evaluation at intake includes an assessment of the client’s ability to meet his nutritional needs. The client’s residential services plan must include goals and training in the nutritional area as needed.

(c) In the unusual circumstance where CRRS staff rather than clients purchase and prepare the food, the following additional requirements apply:

(1) Each client shall be involved in the meal planning, shopping, food preparation, service and kitchen chores as evidenced in task schedules and in the client’s individual service plan.

(2) Meals may be no more than 5 hours nor less than 4 hours apart in each day. There may be no more than 15 hours between evening meal and first meal of the next day.

(3) When a client misses a meal, food adequate to meet daily nutritional requirements shall be available to the client.

(4) Dietary restrictions prescribed by the client’s physician shall be followed. Religious and philosophical dietary preferences must be followed.

(5) Menus shall be prepared for 1 week in advance and must be retained on file for at least 8 weeks.

(6) Food stored, prepared or served shall be clean and safe for human consumption.

(7) Food returned from individual plates may not be used in the preparation of other food dishes or served again.

(8) Unpasteurized milk may not be served or used in food preparation.

Cross References
This section cited in 55 Pa. Code § 5310.91 (relating to special requirements for community residential rehabilitation services (CRRS) serving children); and 55 Pa. Code § 5310.172 (relating to nutrition).

Subchapter C. CHILDREN SERVICES

GENERAL PROVISIONS

Sec. 5310.91. Special requirements for community residential rehabilitation services (CRRS) serving children.

5310.92. Applicability.

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ORGANIZATION AND ADMINISTRATION

5310.101. Governing body.
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CLIENT CHARACTERISTICS

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SERVICES MANAGEMENT

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CLIENT RECORDS

5310.141. Case record.
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CLIENT RIGHTS

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PHYSICAL STANDARDS

5310.161. [Reserved].
5310.162. Host homes.
5310.171. Medication

Cross References
This subchapter cited in 55 Pa. Code § 5310.21 (relating to client characteristics).

GENERAL PROVISIONS

§ 5310.91. Special requirements for community residential rehabilitation service (CRRS) serving children.
This subchapter contains the requirements for community residential rehabilitation services (CRRS) for children and is supplemental to, or if in conflict with, supersedes §§ 5310.12—5310.14, 5310.21, 5310.31—5310.39, 5310.51—5310.52, 5310.71—5310.72 and 5310.81—5310.82.

§ 5310.92. Applicability.
(a) This subchapter applies to all CRRS that provide full-care for children in host home settings. Persons under 18 years of age, with the exception of emancipated minors, may not be cared for in a partial-care CRRS nor in a CRRS site in which adults are served.
(b) When a CRRS accepts a child who is in the legal custody of the county children and youth agency or a public or private social service agency for placement in CRRS group home or host home, the requirements of Chapter 3800 (relating to child residential and day treatment facilities) apply. These requirements are additional to the requirements in this chapter.

Authority
The provisions of this § 5310.92 amended under Articles IX and X of the Public Welfare Code (62 P.S. §§ 901—922 and 1001—1080).

Source

ORGANIZATION AND ADMINISTRATION

§ 5310.101. Governing body.
(a) Insurance coverage must be in effect to the extent deemed necessary by the governing body to protect the governing body, staff, surrogate parents, clients, and property of the community residential rehabilitation service (CRRS) and to meet the requirements of State and Federal statutes.
(b) This section supersedes § 5310.11(d)(3) (relating to governing body).
§ 5310.102. Personnel management.
(a) The community residential rehabilitation service (CRRS) must establish and implement written personnel policies and procedures which cover:
   (1) Recruitment, selection, and promotion of staff and surrogate parents.
   (2) Agency method of staff and surrogate parent development through in-service and out-service training and professional consultation.
(b) Personnel policies shall be compiled, updated, and made available to all staff and surrogate parents.
(c) Each staff member and surrogate parent must be provided with a copy of his job description at the time of hiring and whenever the job description is changed.
(d) This section supersedes § 5310.14(a)(1), (10), (b) and (d) (relating to personnel management).

CLIENT CHARACTERISTICS

§ 5310.111. Client characteristics.
A child placed in a community residential rehabilitation service (CRRS) must:
(1) Be under the age of 18 years and not an emancipated minor.
(2) Have demonstrated, over a period of time, maladaptive interpersonal behavior which significantly impairs the child’s functioning within the family and among the child’s peers.
(3) This section supersedes § 5310.21(a)(1) and (3) (relating to client characteristics).

SERVICES MANAGEMENT

§ 5310.121. Program description.
(a) Psycho-social rehabilitation services to develop interpersonal, and when appropriate, community living skills must be provided. This subsection supersedes § 5310.31(2)(iii) (relating to program description).
(b) Services required in addition to those specified in § 5310.31(2), are:
   (1) Assistance with schoolwork assignments and school related activities as needed.
   (2) Age appropriate recreational activities.
   (3) Family support and training services which, for example, assist the parents of the child to identify social-emotional needs of the child, use appropriate strategies in meeting the child’s needs, and develop family interpersonal relationships which will allow the child to return to the child’s family if this has been identified as a goal of the rehabilitative program.
§ 5310.122. Intake.

(a) During intake, the community residential rehabilitation service (CRRS) staff shall review the criteria for program enrollment and program termination, the services offered by the CRRS and the programmatic, legal and financial responsibilities of the child, his parent, the agency having legal custody of the child and the CRRS with parent and, if applicable, with the agency having legal custody of the child. A child under 14 years of age should be included, whenever possible, in the review. A child who is 14 years of age or older must be included in the intake process. This subsection supersedes § 5310.32(b) (relating to intake).
(b) In addition to the intake information required in § 5310.32(c), intake for children shall include:

1. Requests are made to the education agency for any school evaluation and records, as well as teacher observations, which might assist in understanding the child’s behavior and in identifying socio-personal needs.
2. Family social history.

(c) Children who are 14 years of age or older must voluntarily consent to enrollment into the CRRS or enrollment into the CRRS must be denied.

(d) This subsection (a) supersedes § 5310.32(b) (relating to intake).

§ 5310.123. Residential service plan.

(a) Upon the child’s enrollment, an individualized written client residential service plan shall be developed by the community residential rehabilitation service (CRRS) staff with the child’s parent, the agency having custody of the child, if applicable, and the child when the child is 14 years of age or older. When the child is under 14 years of age, the child may be included in the development of the individual residential service plan, as appropriate.

(b) The service plan shall be based on an evaluation of the child’s social and emotional development relative to age-appropriate expectations for functioning in interpersonal relationships within the family, peer groups and the community. The service plan includes as needed:

1. Self care skills.
2. Health care, including medication management.
3. Housekeeping skills.
4. Ability to meet nutritional needs.
5. Mobility.
6. Money management skills.
7. Interpersonal skills.
9. Use of leisure time.
10. Time structuring.
11. Community participation.

(c) The service plan must specify short and long-term goals for service formulated by staff and parent of the child, the agency having legal custody of the child, if applicable, and the child when the child is 14 years of age or older. When the child is under 14 years of age, the child may be included in specifying goals whenever possible.

(d) The child’s parent, the agency having custody of the child, if applicable, and the child shall participate in the goal-setting, service planning, decision-making and progress assessment associated with the service plan.

(e) At the time of enrollment into CRRS and through the service period, each client must be assigned a primary staff person who is responsible for assuring that the residential service plan is coordinated with the service plans of other agencies.
having responsibility for specific facets of the child’s life, for example, education
agencies, children and youth agencies, base service units, juvenile justice system,
and mental health service agencies.

(f) Subsections (a)-(d) supersedes § 5310.33(a), (b), (c)(1), and (f) (relating
to residential service plan). Subsection (e) supersedes § 5310.33(h). The require-
ment of § 5310.33(e) does not apply to CRRS programs serving children.

§ 5310.124. Service agreement.

(a) There must be a written service agreement negotiated at intake and signed
by the community residential rehabilitation service (CRRS) and the child’s par-
et, the agency having custody of the child, if applicable, and when possible and
appropriate, the child except that in cases wherein the client is 14 years of age or
older, the child must be included.

(b) This agreement shall specify the services to be provided and the rights
and responsibilities of parent, the agency having custody of the child, if appli-
cable, and the child.

(c) The agreement must include a copy of the CRRS house rules, client
rights, client grievance procedures, and termination policy.

(d) The agreement must specify the arrangements and charges for housing
and food and any liability for the cost of services other than room and board.

(e) The agreement must be updated and signed again whenever any of the
terms change.

(f) This subsection supersedes § 5310.34 (relating to service agreement).

§ 5310.125. Health care services.

(a) The community residential rehabilitation service (CRRS) must develop
health care policies and procedures to insure the availability of age-appropriate
health services for children. Prior to or upon the child’s enrollment to the CRRS,
a health appraisal signed by a licensed physician shall be obtained for each child.
The health appraisal shall include the following information recommended by the
American Academy of Pediatrics.

(1) A review of previous health history.

(2) A complete physical examination unless a record is available of a
physical examination which was completed within 6 months prior to place-
ment.

(3) Growth assessments.

(4) A review and update of the child’s immunization status to conform with
the United States Public Health Service requirements.

(5) Provision of age-appropriate screening tests according to the standards
of the American Academy of Pediatrics.

(6) Recommendations pertaining to medication required or limitations of
the child’s activities and diet, and further medical tests or examinations that
may be required.
(7) Medical information pertinent to diagnosis and treatment in case of emergency.

(8) A statement of recommendation for follow-up treatment or special care, if required.

(b) The CRRS must encourage participation by parent or, if applicable, the agency having legal custody in the health care services being provided for the child, and if appropriate, transporting the child to and from medical appointments.

§ 5310.126. Termination from program.

(a) The community residential rehabilitation service (CRRS) must establish written criteria and procedures to cover the following two types of terminations:

(1) Planned termination of services. The parent, the agency having legal custody of the child, if applicable, the child, CRRS staff and others responsible for the child’s welfare agree that the child should leave the program and have planned and prepared for the move.

(2) Unplanned termination of services. The child runs away, requires hospital care, or demonstrates behavior that requires immediate removal. In all cases of unplanned termination, the CRRS must immediately notify the child’s parent and the agency having custody of the child, if applicable.

(b) If the planned termination is a result of a failure on the part of the child’s parent or the agency having legal custody of the child, if applicable, or the child to abide by the terms of the service agreement, the CRRS must notify all parties in writing of the termination decision, including a termination date which shall be no sooner than three weeks from the date of notification. The notification must explain the reason for termination and indicate any recourse available under the client grievance procedure.

(c) When surrogate parents request the removal of a CRRS child from their home, at least 10 working days notice must be given for the CRRS to establish an alternate placement for the child. The CRRS must notify the child’s parent or the agency having custody of the child, if applicable, and the child if the child is 14 years of age or older within two days after such a request is made. Emergency removal must be arranged in situations where serious harm could come to the child or surrogate family.

(d) Within two weeks of the termination date, the CRRS must prepare a termination summary for each client terminated which must be included in the child’s record and provided to the placement and case management agency, if any.

(e) This section supersedes § 5310.35 (relating to termination from program).

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§ 5310.127. Program closure.

(a) If the community residential rehabilitation service (CRRS) intends to cease operation, the governing body shall provide at least 30 days written notice of the intent to cease operation and the projected closing date to the child’s parent, the agency having custody of the child if applicable, the child, all treatment/case management agencies, the County Mental Health/Mental Retardation (MH/MR) Office and to the Department.

(b) This section supersedes § 5310.37 (relating to program closure).

§ 5310.128. Service linkages.

(a) When the community residential rehabilitation service (CRRS) provides care for a child who is in the legal custody of the county children and youth agency or a public or private social service agency, the CRRS must have a written letter of agreement with the responsible agency which specifies:

1. The respective roles of each agency in the development and implementation of the placement plan and the procedures for follow-up.
2. The respective roles of each agency in the recruitment and study evaluation process for surrogate parents.
3. An agreement on the role of each agency in communicating with the parent and in providing family services.
4. The respective role of each agency in arranging for health care services.

(b) When the CRRS provides care for a child of school age, the CRRS must develop arrangements with the appropriate education agencies having responsibility for the child’s education which specify:

1. The role of the school in the planning and implementation of the service plan.
2. The role of the CRRS in the planning and implementation of the child’s education plan.
3. The scheduling of treatment services and how such services are to be coordinated with the education program particularly during those hours in which the child would normally be expected to participate in the education program.
4. The procedures developed for the exchange of verbal and written information between the CRRS and the school.

(c) This section supplements § 5310.39 (relating to service linkages).
§ 5310.131. Staffing.

(a) An adult must be on the site whenever a child is present. In group homes, the adult must be a staff member. In host homes, the adult must be a surrogate parent having responsibility for the daily care of the child, except where the CRRS makes arrangements for or approves the use of other adults to provide relief time for surrogate parents for a reasonable number of hours per week.

(b) The requirements of § 5310.41 (relating to staff and training) apply to all CRRS group homes serving children.

(c) The following requirements apply to all CRRS host homes serving children:

(1) All couples or individuals interested in being surrogate parent shall file a written application with the CRRS provider or the agency designated by the CRRS provider to screen surrogate parent applicants. The CRRS Provider shall maintain responsibility to make the final determination regarding the applicant’s approval as a surrogate parent.

(2) The study-evaluation process must be used to determine the suitability of the applicant for surrogate parent and the type of children the prospective surrogate parent can best serve. The study-evaluation process shall assure that sufficient information is provided to the applicant to allow them to make an initial decision as to their suitability as surrogate parent.

(3) The study-evaluation process must include interviews with the applicant surrogate parent and their children. The process also must include one visit to the applicant’s home. All family members who will live in the same residence as the child shall be present during at least one home based interview.

(4) The study-evaluation process must include references. References stating the applicant’s ability to care for children must be provided by three persons not related to the applicant.

(5) The content of the study-evaluation of the applicant for surrogate parent shall include:

(i) Age, as it affects functioning.

(ii) Health, including a written statement from a physician, assuring the applicant freedom from contagious disease and ability to handle increased stress.

(iii) Income, sufficient to meet regular family expenses.

(iv) A dwelling that presents no hazards to the safety of a child and is in keeping with the community in which it is located.

(v) Family composition as it affects the number and type of children for whom care can be given.

(6) Surrogate parent capabilities must be assessed by giving consideration to the following factors.
(i) Existing family relationships, attitudes, and expectations regarding their own children and parent-child relationships especially where they might affect a CRRS child.

(ii) The family ideas and practice in regards to child discipline.

(iii) Attitudes of significant members of the extended family regarding placement of a CRRS child.

(iv) Ability to accept and respect a child as the child is.

(v) Capacity to absorb a child into family life without undue disruption.

(vi) Capacity to meet the needs of both a CRRS child and their own child or children.

(vii) The attitudes of the surrogate parent’s child or children to accepting a CRRS child.

(viii) Realistic appraisal of positive and negative aspects of surrogate parenthood.

(ix) Ability to provide continuity of care throughout a child’s placement.

(x) Ability to meet changing needs over the course of a child’s placement.

(xi) Ability to accept a CRRS child’s relationship with the child’s own parent.

(xii) Ability to care for children with special needs.

(xiii) Areas in which ongoing supportive services may be needed.

(xiv) Number and characteristics of CRRS children best suited to the surrogate parent family.

(xv) Ability to work in partnership with the CRRS and other agencies as required.

(7) The decision to approve or disapprove an application to be a surrogate parent must be communicated in a conference between the CRRS or its designated agency and the applicant and confirmed in writing. Reasons for approval or disapproval must be clearly stated.

(8) The CRRS must provide in writing the following information to surrogate parents:

(i) Policies setting forth the respective responsibilities of the CRRS and surrogate parent in identifying and meeting a child’s basic needs which include the physical environment, nutrition, privacy, involvement with schools or other community resources.

(ii) Policies regarding disciplinary methods for CRRS children which must exclude any form of abusive, degrading, or vindictive punishment.

(viii) A description of consultation and training which the CRRS will furnish to assist surrogate parent in further improving their parenting skills.

(iv) A procedure for reporting to the CRRS any emergency, serious injury or illness, or death or impending death of a child placed with a surrogate parent.
A statement regarding the reimbursement rate which will be paid to surrogate parent.

A telephone number by which the CRRS may be contacted on a 24-hour basis.

A statement as to the role of the surrogate parent in the development and implementation of the service plan.

(9) The CRRS must also furnish the surrogate parent the following information to assist them in making a decision regarding the acceptance of a specific child.

(i) The child’s medical history.

(ii) The child’s general behavior.

(iii) The child’s likes and dislikes, including special interests.

(iv) The child’s religious affiliation, if any.

(v) The child’s school adjustment and academic performance.

(vi) The circumstances which led to CRRS placement.

(vii) Important life experience which may effect the child’s adjustment, including information about prior placements.

(viii) The child’s relationship with the child’s parent.

(10) Surrogate parent shall be informed that information provided on CRRS children and their families must be kept confidential and shall sign an agreement to this effect.

(11) All surrogate parents shall be under the direct supervision of a mental health professional.

CLIENT RECORDS

§ 5310.141. Case record.

(a) The requirement in § 5310.51(b)(2)(iii) (relating to case record) is not required for community residential rehabilitation service (CRRS) children.

(b) Each case record must include a copy of written agreement between the CRRS, the child’s parent, the agency having custody of the child, if applicable, and the child if the child is 14 years of age or older.

(c) Subsection (b) supersedes § 5310.51(b)(4)(viii).

§ 5310.142. Confidentiality.

(a) All client records and information are confidential and may not be disclosed directly or indirectly without the written consent of the child’s parent or the agency having custody of the child, if applicable, and the child if the child is 14 years of age or older.

(b) Exceptions stated in § 5310.52(a)(1)—(6) apply to client records and information in community residential rehabilitation service (CRRS) for children.
Written consent is required by the child’s parent or the agency having custody of the child, if applicable, and the child if the child is 14 years of age or older to disclose information from the child’s record and must include:

1. Date and nature of request for information.
2. Name of the person, agency or organization to whom disclosure is made.
3. Type of information disclosed.
4. Dated signature of the child’s parent, or the agency having legal custody of the child and the child if the child is 14 years of age or older.
5. Dated signature of a witness.
6. Expiration date of consent form.
7. Statement of the rights of the parent or agency having custody of the child and the child to revoke the consent each has given.

A copy of each disclosure consent form must be given to the parent or agency having legal custody and the child if the child is 14 years of age or older. A copy must also be placed in the child’s case record.

Subsections (a) and (b) supersede § 5310.51(a) (relating to confidentiality); subsection (c) supersedes § 5310.52(e); and subsection (d) supersedes § 5310.52(f).

CLIENT RIGHTS

§ 5310.151. Client rights.

(a) The community residential rehabilitation service (CRRS) must have written policy and procedures to assure that the child’s parent, the agency having custody of the child, or the child, if the child is 14 years of age or older, have the right to inspect the child’s records provided that access can be denied to portions of the record under the following conditions.

1. The Director determines that:
   (i) Disclosure of specific information would be a substantial detriment to the child or to the involvement of the child’s family in family therapy.
   (ii) Disclosure of specific information would identify and breach any confidentiality of other persons.
2. The denial of access must be recorded, with justification, in the child’s record, dated and signed by the Director.
3. This subsection supersedes § 5310.64 (relating to client right to inspect client record).

(b) In addition to the requirements of §§ 5310.61—5310.65 (relating to client rights), CRRS must report all cases of alleged child abuse suspected in the child’s home, the group home or the host home under Chapter 3490 (relating to protective services).
PHYSICAL FACILITY STANDARDS

§ 5310.161. [Reserved].

Source

§ 5310.162. Host homes.
The following requirements apply to host homes:

(1) Host homes are not subject to the site control requirement specified in § 5310.71 (relating to site control).

(2) The dwelling of surrogate parent must be evaluated to insure that it presents no hazard to the safety of a community residential rehabilitation service (CRRS) child and is in keeping with the community in which it is located.

(3) The age of the child is considered in determining the safety of the home of a surrogate parent. In the case of very young children, special consideration must be given to the following requirements:

(i) Safe, easily accessible, outdoor play areas.

(ii) Fencing or natural barriers for unsafe areas such as drainage ditches, wells, or swimming pools in or around the outdoor play areas.

(iii) Decks or balconies above the ground level of a home.

(iv) Adequate lighting and handrails in staircases.

(v) Protective guards or insulation for hot water pipes and other sources of heat which are accessible to children and which exceed 110°F.

(vi) Use of space heaters, fireplaces and wood-burning stoves.

(vii) Condition and anchoring of outdoor play equipment like climbing apparatus, slides, and swings.

(viii) Storage of all medicines, cleaning materials, detergents, aerosol cans, and other poisonous and toxic materials.

(4) All electrical equipment must be in good repair. Equipment such as washers and garbage disposals must have protective safety devices which prevent use when open. All electrical power tools must be locked in a cabinet, closet or storage room when not in use and must be used only by staff. Electrical kitchen equipment may be operated by children only when under direct supervision of staff.

(5) Each host home must have a telephone. Those homes which have an unlisted number must make this number available to the child’s parent, the CRRS and the agency having custody of the child, if applicable.

(6) The CRRS must provide fire extinguishers and smoke detectors for use in host homes and ensure that the surrogate parent receives instruction in the proper use of this equipment.
§ 5310.171. Medication.

(a) The community residential rehabilitation service (CRRS) programs must establish and implement written policies and procedures regarding medications which meet legal restrictions regarding administration of medications and which shall cover the following requirements:

(1) Staff and surrogate parents may administer medication to a child only with the written consent of the child’s parent and the agency having custody of the child, if applicable, and under the written instructions of the physician who prescribes the medication.

(2) The attending physician shall provide the staff or surrogate parent with written instructions which must contain the following information:

(i) Name of child.

(ii) Name of medication—brand name and/or generic name.

(iii) Type of medication, for example, liquid or tablets.

(iv) Dosage to be given per administration.

(v) Number and time of administrations per day.

(vi) Ending date of medication administration, if applicable.

(vii) Possible side effects of the medication.

(viii) Instructions in the event of serious reactions.

(ix) Emergency phone numbers.

(x) Special instructions, for example, take with meal, take on an empty stomach, do not take with citrus juice.

(xi) Signature of the physician.

(3) The written consent of the parent and the agency having custody of the child, if applicable, must specify all information contained in the physician’s written instruction form and may consist of signing the same form.

(4) All medications must be kept in their original prescription containers.

(5) All medication must be stored in a locked container or a container in a locked room. When medication must be refrigerated, it must be kept in a locked box in the refrigerator.

(6) A permanent log must be maintained for each child indicating:

(i) Name of medication given.

(ii) Dosage level given.

(iii) Time given.
(iv) Date given.
(v) Person administering the medication.
(vi) Number of tablets with dosage of each specified.
(7) When a child is receiving psychotropic drugs, the prescribing physician shall review the drug plan once a month.
(b) This section supersedes § 5310.81 (relating to medication).

(a) Section 5310.82(a) and (b) (relating to nutrition) do not apply to community residential rehabilitation services (CRRS) serving children.
(b) The requirements of § 5310.82(c)(2)—(4) and (6)—(8) do apply to all CRRS’s serving children.