# Chapter 1 General Licensing Requirements, Article 6 Continuing Requirements

## Amend Section 80061 to read:

**80061 Reporting Requirements**

(a) (Continued)

(b) Upon the occurrence, during the operation of the facility, of any of the events specified in (1) below, a report shall be made to the licensing agency within the agency's next working day during its normal business hours. In addition, a written report containing the information specified in (2) below shall be submitted to the licensing agency within seven days following the occurrence of such event.

(1) Events reported shall include the following:

(A) through (D) (Continued)

(E) Any unusual incident or client absence which threatens the physical or emotional health or safety of any client.

1. For community care facilities that serve children, a pregnancy or termination of a pregnancy does not, in and of itself, constitute an unusual incident unless it meets the criteria specified for mandated reporting in Penal Code section 11166 (a).

(F) (Continued)

1. Any suspected physical abuse of any minor.

1. For community care facilities that serve children, a pregnancy or termination of a pregnancy does not, in and of itself, constitute physical abuse of a minor unless it meets the criteria specified for mandated reporting in Penal Code section 11166 (a).

(H) through (K) (Continued)

(2) Information provided shall include the following:

(A) through (D) (Continued)

(c) (Continued)

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Welfare and Institutions Code section 15630(b)(1) provides in pertinent part:

A~~ny~~ mandated reporter who, in ~~his or her~~their professional capacity, or within the scope of ~~his or her~~their employment, has observed or has knowledge of an incident that reasonably appears to be physical abuse, as defined in Section 15610.63, abandonment, abduction, isolation, financial abuse, or neglect, or is told by an elder or dependent adult that ~~he or she has~~they have experienced behavior, including an act or omission, constituting physical abuse, as defined in Section 15610.63, abandonment, abduction, isolation, financial abuse, or neglect, or reasonably suspects that abuse, shall report the known or suspected instance of abuse by telephone or through a confidential ~~I~~internet reporting tool, as authorized by Section 15658, immediately or as soon as practicably possible. If reported by telephone, a written report shall be sent, or an Internet report shall be made through the confidential ~~I~~internet reporting tool established in Section 15658, within two working days.

(A) If the suspected or alleged abuse is physical abuse, as defined in Section 15610.63, and the abuse occurred in a long-term care facility, except a state mental health hospital or a state developmental center, the following shall occur:

(i) If the suspected abuse results in serious bodily injury, a telephone report shall be made to the local law enforcement agency immediately, but also no later than within two hours of the mandated reporter observing, obtaining knowledge of, or suspecting the physical abuse, and a written report shall be made to the local ombudsman, the corresponding licensing agency, and the local law enforcement agency within two hours of the mandated reporter observing, obtaining knowledge of, or suspecting the physical abuse.

Penal Code section 11166 provides in pertinent part:

(a) Except as provided in subdivision (d), and in Section 11166.05, a mandated reporter shall make a report to an agency specified in Section 11165.9 whenever the mandated reporter, in the mandated reporter’s professional capacity or within the scope of the mandated reporter’s employment, has knowledge of or observes a child whom the mandated reporter knows or reasonably suspects has been the victim of child abuse or neglect. The mandated reporter shall make an initial report by telephone to the agency immediately or as soon as is practicably possible, and shall prepare and send, fax, or electronically transmit a written followup report within 36 hours of receiving the information concerning the incident. The mandated reporter may include with the report any nonprivileged documentary evidence the mandated reporter possesses relating to the incident.

(1) For purposes of this article, “reasonable suspicion” means that it is objectively reasonable for a person to entertain a suspicion, based upon facts that could cause a reasonable person in a like position, drawing, when appropriate, on the person’s training and experience, to suspect child abuse or neglect. “Reasonable suspicion” does not require certainty that child abuse or neglect has occurred nor does it require a specific medical indication of child abuse or neglect; any “reasonable suspicion” is sufficient. For purposes of this article, the pregnancy of a minor does not, in and of itself, constitute a basis for a reasonable suspicion of sexual abuse.

**HANDBOOK ENDS HERE**

(d) (Continued)

**HANDBOOK BEGINS HERE**

Welfare and Institutions Code section 15630(b)(1) provides in pertinent part:

A~~ny~~ mandated reporter who, in ~~his or her~~their professional capacity, or within the scope of ~~his or her~~their employment, has observed or has knowledge of an incident that reasonably appears to be physical abuse, as defined in Section 15610.63, abandonment, abduction, isolation, financial abuse, or neglect, or is told by an elder or dependent adult that ~~he or she has~~they have experienced behavior, including an act or omission, constituting physical abuse, as defined in Section 15610.63, abandonment, abduction, isolation, financial abuse, or neglect, or reasonably suspects that abuse, shall report the known or suspected instance of abuse by telephone or through a confidential Internet reporting tool, as authorized by Section 15658, immediately or as soon as practicably possible. If reported by telephone, a written report shall be sent, or an ~~I~~internet report shall be made through the confidential ~~I~~internet reporting tool established in Section 15658, within two working days.

(A) If the suspected or alleged abuse is physical abuse, as defined in Section 15610.63, and the abuse occurred in a long-term care facility, except a state mental health hospital or a state developmental center, the following shall occur:

(i) . . .

(ii) If the suspected abuse does not result in serious bodily injury, a telephone report shall be made to the local law enforcement agency within 24 hours of the mandated reporter observing, obtaining knowledge of, or suspecting the physical abuse, and a written report shall be made to the local ombudsman, the corresponding licensing agency, and the local law enforcement agency within 24 hours of the mandated reporter observing, obtaining knowledge of, or suspecting the physical abuse.

**HANDBOOK ENDS HERE**

(e) (Continued)

(g) The items specified in (b)(1)(E) through (G) above shall also be reported to the local health officer when appropriate pursuant to title 17, California ~~Administrative~~ Code of Regulations, section~~s~~ 2500~~,~~ and 2502 ~~and 2503~~.

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(1) Title 17, California ~~Administrative~~ Code of Regulations, Section 2500 requires:

(b) It shall be the duty of every health care provider,~~physician, practitioner, dentist, coroner, every superintendent or manager of a dispensary, hospital, clinic, or any other person~~ knowing of or in attendance on a case or suspected case of any of the ~~following~~ diseases or conditions listed in subsection (j) of this section, to report to~~notify~~ the local health authority officer for the jurisdiction where the patient resides as required in subsection (h) of this section~~immediately~~. Where no health care provider is in attendance, any individual having knowledge of a person who is suspected to be suffering from one of the diseases or conditions listed in subsection (j) of this section may make such a report to the local health officer for the jurisdiction where the patient resides.~~A standard type report form has been adopted and is available for this purpose.~~

~~Amebiasis~~

~~Anthrax Botulism~~

~~Brucellosis (Undulant Fever)~~

~~Chancroid~~

~~Cholera~~

~~Coccidioidomycosis~~

~~Conjunctivitis, Acute Infectious of the Newborn (Gonorrheal Ophthalmia, Ophthalmia Neonatorum,) and Babies' Sore Eyes in first 21 days of life)~~

~~Dengue~~

~~Diarrhea of the Newborn~~

~~Diphtheria~~

~~Disorders Characterized by Lapses of Consciousness~~

~~Dysentery, Bacillary (See Shigella infections)~~

~~Encephalitis, viral Food poisoning (other than Botulism)~~

~~German Measles (Rubella)~~

~~Gonococcal Infections~~

~~Granuloma Inguinale~~

~~Hepatitis, Infectious (A)~~

~~Hepatitis, Serum (B)~~

~~Hepatitis, unspecified~~

~~Hepatitis, Non-A, Non-B~~

~~Leprosy (Hansen's Disease)~~

~~Leptospirosis (including Weil's Disease)~~

~~Lymphogranuloma Venereum (Lymphogranuloma Inguinale)~~

~~Malaria~~

~~Measles (Rubeola)~~

~~Meningitis, Viral~~

~~Meningococcal Infections~~

~~Mumps~~

~~Paratyphoid Fever, A, B and C (See Salmonella infections)~~

~~Pertussis (Whooping Cough)~~

~~Plague~~

~~Poliomyelitis, Paralytic~~

~~Psittacosis~~

~~Q Fever~~

~~Rabies, Human or Animal~~

~~Relapsing Fever~~

~~Rheumatic Fever, Acute~~

~~Rocky Mountain Spotted Fever~~

~~Salmonella, Infectious (exclusive of Typhoid Fever)~~

~~Scarlet Fever~~

~~Shigella Infections~~

~~Smallpox (Variola)~~

~~Streptococcal Infections, hemolytic (including Scarlet Fever, and Streptococcal Sore Throat)~~

~~Syphilis~~

~~Tetanus~~

~~Trachoma~~

~~Trichinosis~~

~~Tuberculosis~~

~~Tularemia~~

~~Typhoid fever, cases and carriers~~

~~Typhus Fever~~

~~Viral Exanthem in Pregnant Women~~

~~Yellow Fever~~

~~For outbreak reporting and reporting of occurrence of unusual and rare diseases see Sections 2502 and 2503.~~

~~(2) Title 17, California Administrative Code, Section 2502 requires:~~

~~Any person having knowledge of any outbreak or undue prevalence of infectious or parasitic disease or infestation whether or not listed in Section 2500, shall promptly report the facts to the local health officer, who shall investigate the circumstances and if he finds that an epidemic or undue prevalence does in fact exist, he shall report the outbreak to the Director of the State Department of Health Services. The following are examples of diseases, outbreaks of which are to be so reported:~~

~~Epidemic Gastroenteritis~~

~~(other than food poisoning)~~

~~Epidemic Keratoconjunctivitis~~

~~Fevers of unknown etiology~~

~~Infectious Mononucleosis~~

~~Influenza, Epidemic~~

~~Pneumonia, Infectious~~

~~Ringworm~~

~~Staphylococcus Infections~~

~~(3) Title 17, California Administrative Code, Section 2503 requires:~~

~~Any person having knowledge of a case of an unusual disease not listed in Section 2500 shall promptly convey the facts to the local health officer. Examples are: glanders, herpangina, histoplasmosis, toxoplasmosis, echinococcosis, listeriosis, cat scratch fever, and rickettsialpox.~~

**HANDBOOK ENDS HERE**

(h) through (i) (Continued)

**HANDBOOK BEGINS HERE**

(1) Health and Safety Code Section 1538.5 reads in part:

(a)(1) Not less than 30 days prior to the anniversary of the effective date of a residential community care facility~~the~~ license ~~of any residential community care facility license,~~ except licensed foster family homes, the department may transmit a copy to the board members of the licensed facility, parents, legal guardians, conservators, client's rights advocate, or placement agency, as designated in each resident's placement agreement, of all inspection reports given to the facility by the ~~state~~ department during the past year as a result of a substantiated complaint regarding a violation of this chapter relating to resident abuse and neglect, food, sanitation, incidental medical care, and residential supervision. During that one-year period the copy of the notices transmitted and the proof of the transmittal shall be open for public inspection.

(2) The department may transmit copies of the inspection reports referred to in paragraph (1) concerning a group home or short-term residential therapeutic program, as defined by regulations of the department, to the county in which the group home or short-term residential therapeutic program is located, if requested by that county.

(3) A group home or short-term residential therapeutic program shall maintain, at the facility, a copy of all licensing reports for the past three years that would be accessible to the public through the department, for inspection by placement officials, current and prospective facility clients, and these clients’ family members who visit the facility.

(b) The facility operator, at the expense of the facility, shall transmit a copy of all substantiated complaints, by certified mail, to those persons described pursuant to paragraph (1) of subdivision (a) in the following cases:

(1) In the case of a~~ny~~ substantiated complaint relating to resident physical or sexual abuse, the facility shall have three days, from the date the facility receives the licensing report from the state department to comply.

(2) In ~~any~~the case in which a facility has received three or more substantiated complaints relating to the same violation during the past 12 months, the facility shall have five days from the date the facility receives the licensing report to comply.

(c) Each residential facility shall retain a copy of the notices transmitted pursuant to subdivision (b) and proof of their transmittal by certified mail for a period of one year after their transmittal.

(d) If a~~ny~~ residential facility to which this section applies fails to comply with the provisions of this section, as determined by the ~~state~~ department, the ~~state~~ department shall initiate civil penalty action against the facility in accordance with this article ~~the provisions of Article 3 (commencing with Section 1530)~~ and the related rules and regulations.

(e) Not less than 30 days prior to the anniversary of the effective date of the license of any group home or short-term residential therapeutic program, as defined by regulations of the department, at the request of the county in which the group home or short-term residential therapeutic program is located, a group home or short-term residential therapeutic program shall transmit to the county a copy of all incident reports prepared by the group home or short-term residential therapeutic program and transmitted to a placement agency, as described in subdivision (f) of Section 1536.1, in a county other than the county in which the group home or short-term residential therapeutic program is located that involved a response by local law enforcement or emergency services personnel, including runaway incidents. The county shall designate an official for the receipt of the incident reports and shall notify the group home or short-term residential therapeutic program of the designation. Prior to transmitting copies of incident reports to the county, the group home or short-term residential therapeutic program shall redact the name of any child referenced in the incident reports, and other identifying information regarding any child referenced in the reports. The county may review the incident reports to ensure that the group home or short-term residential therapeutic program has taken appropriate action to ensure the health and safety of the residents of the facility.

(~~e~~f) The department shall notify the residential community care facility of its obligation when it is required to comply with this section.

**HANDBOOK ENDS HERE**

Authority cited: Sections 1530 and 1538.5, Health and Safety Code.

Reference: Sections 1501, 1507, 1531, 1538.5 and 1797.196, Health and Safety Code; Section 11166, Penal Code; and Section 15630, Welfare and Institutions Code.

# Chapter 4 Small Family Homes, Article 1 General Requirements and Definitions

## Amend Section 83001 to read:

**83001 DEFINITIONS**

In addition to Section 80001, the following shall apply.

(a) (1) “Age or developmentally appropriate” means as defined in Welfare and Institutions Code section 362.05(c)(2).

**HANDBOOK BEGINS HERE**

Welfare and Institutions Code section 362.05 provides in part:

(c)(2) The term “age or developmentally appropriate” means both of the following:

(A) Activities or items that are generally accepted as suitable for children of the same chronological age or level of maturity or that are determined to be developmentally appropriate for a child, based on the development of cognitive, emotional, physical, and behavioral capacities that are typical for an age or age group.

(B) In the case of a specific child, activities or items that are suitable for the child based on the developmental stages attained by the child with respect to the cognitive, emotional, physical, and behavioral capacities of the child.

**HANDBOOK ENDS HERE**

~~(a)(1)~~(2) “Assistant Caregiver” means an adult who assists the licensee of a specialized small family home caring for four or more children in the administration of specialized in-home health care.

(b) through (g) (Continued)

(h) (1) (Continued)

(2) “Health-related services” shall include, but not be limited to, medical, dental, vision, mental health, substance use disorder services, reproductive and sexual health care. This shall include abortion and contraception related services and gender affirming health care and gender affirming mental health care.

~~(2)~~(3) “Home” means a licensed small family home.

(i) through (q) (Continued)

(r) ~~(Reserved)~~ “Reasonable and prudent parent” or “reasonable and prudent parent standard” means as defined in Welfare and Institutions Code section 362.05(c)(1).

**HANDBOOK BEGINS HERE**

Welfare and Institutions Code section 362.05 provides in part:

(c)(1) “Reasonable and prudent parent” or “reasonable and prudent parent standard” means the standard characterized by careful and sensible parental decisions that maintain the health, safety, and best interests of a child while at the same time encouraging the emotional and developmental growth of the child, that a caregiver shall use when determining whether to allow a child in foster care under the responsibility of the state to participate in age or developmentally appropriate extracurricular, enrichment, cultural, and social activities.

**HANDBOOK ENDS HERE**

(s) through (z) (Continued)

Authority cited: Section 1502.8 and 1530, Health and Safety Code; and Section 17730, Welfare and Institutions Code.

Reference: Sections 1501, 1502, 1507, 1507.2, 1530 and 1531, Health and Safety Code; and Sections 362.04, 362.05, 369.5(d), 739.5(d), 11403, 16001.9(a), 17710, 17731(c), 17732(b) and 17732.1, Welfare and Institutions Code.

# Chapter 4 Small Family Homes, Article 6 Continuing Requirements

## Amend Section 83064 to read:

**83064 LICENSEE DUTIES AND RESPONSIBILITIES**

(a) through (h) (Continued)

(i) The licensee shall complete training related to the reasonable and prudent parent standard as specified in Health and Safety Code section 1522.44(c).

(j) The licensee shall complete training that includes the following topics:

(1) Children’s right to receive sexual and reproductive health care and information.

(2) Children’s right to have their sensitive health information kept confidential.

(3) The duties and responsibilities of the assigned case management worker and the licensee to ensure that children can obtain sexual and reproductive health services and information.

(4) Guidance about how to engage and talk with children about healthy sexual development and reproductive and sexual health in a manner that is medically accurate, age or developmentally appropriate, trauma informed, and strengths based.

(5) Information about current contraception methods and how to select and provide appropriate referral resources and materials for information and service delivery.

**HANDBOOK BEGINS HERE**

Health and Safety Code section 1522.44 provides in part:

(c) A licensed and certified foster parent, resource family, or facility staff member, as described in subdivision (b), shall receive training related to the reasonable and prudent parent standard that is consistent with Section 671(a)(24) of Title 42 of the United States Code. This training shall include knowledge and skills relating to the reasonable and prudent parent standard for the participation of the child in age or developmentally appropriate activities, including knowledge and skills relating to the developmental stages of the cognitive, emotional, physical, and behavioral capacities of a child, and knowledge and skills relating to applying the standard to decisions such as whether to allow the child to engage in extracurricular, enrichment, cultural, and social activities, including sports, field trips, and overnight activities lasting one or more days, and to decisions involving the signing of permission slips and arranging of transportation for the child to and from extracurricular, enrichment, and social activities.

Pursuant to Welfare and Institutions Code section 16521.5, the Department of Social Services, in collaboration with the Healthy Sexual Development (HSD) Workgroup, developed California’s Plan for the Prevention of Unintended Pregnancy for Youth and Non-Minor Dependentsto provide all categories of foster caregivers, group home providers, county social workers, probation officers, and other relevant parties with the guidelines to describe the duties and responsibilities of foster care providers, county social workers and probation officers in delivering unintended pregnancy prevention services and information. The following website was developed as a result of the HSD Workgroup and contains relevant resources for providers and youth as well as California’s Plan for the Prevention of Unintended Pregnancy for Youth and Non-Minor Dependents:

<http://www.cdss.ca.gov/inforesources/Foster-Care/Healthy-Sexual-Development-Project>

Welfare and Institutions Code section 16521.5 provides:

(a) A foster care provider, in consultation with the county case manager, shall be responsible for ensuring that adolescents, including nonminor dependents, as described in subdivision (v) of Section 11400, who remain in long-term foster care, as defined by the department, receive age-appropriate pregnancy prevention information to the extent state and county resources are provided.

(b) A foster care provider, in consultation with the county case manager, shall be responsible for ensuring that a foster youth or nonminor dependent is provided with appropriate referrals to health services when the foster youth either reaches 18 years of age or the nonminor dependent exits foster care, and to the extent county and state resources are provided.

(c) As part of the home study process, the prospective foster care provider shall notify the county if the provider objects to participating in adolescent pregnancy prevention training or the dissemination of information pursuant to subdivisions (a) and (b). A licensed foster care provider shall notify the county if the provider objects to participation. If the provider objects, the county case manager shall assume this responsibility.

(d) Subdivisions (a), (b), and (c) shall not take effect until the department, in consultation with the workgroup, develops guidelines that describe the duties and responsibilities of foster care providers and county case managers in delivering pregnancy prevention services and information.

(e) (1) The department, in consultation with the State Department of Health Care Services, shall convene a working group for the purpose of developing a pregnancy prevention plan that will effectively address the needs of adolescent male and female foster youth. The workgroup shall meet not more than three times and thereafter shall provide consultation to the department upon request.

(2) The working group shall include representatives from the California Youth Connection, the Foster Parent’s Association, group home provider associations, the County Welfare Director’s Association, providers of teen pregnancy prevention programs, a foster care caseworker, an expert in pregnancy prevention curricula, a representative of the Independent Living Program, and an adolescent health professional.

(f) The plan required pursuant to subdivision (e) shall include, but not be limited to, all of the following:

(1) Effective strategies and programs for preteen and older teen foster youth and nonminor dependents.

(2) The role of foster care and group home care providers.

(3) The role of the assigned case management worker.

(4) How to involve foster youth and nonminor peers.

(5) Selecting and providing appropriate materials to educate foster youth and nonminors in family life education.

(6) The training of foster care and group home care providers and, when necessary, county case managers in adolescent pregnancy prevention.

(g) Counties currently mandating foster care provider training shall be encouraged to include the pregnancy prevention curricula guidelines and educational materials that may be developed by the workgroup pursuant to subdivision (f).

(h) In order to train case management workers and foster care providers, the department shall develop a curriculum that is consistent with, and in addition to, the pregnancy prevention plan and the curricula guidelines and educational materials developed by the workgroup pursuant to subdivisions (e) and (f).

(i) The curriculum created pursuant to subdivision (h) shall include, but not be limited to, all of the following:

(1) The rights of youth and nonminor dependents in foster care to sexual and reproductive health care and information, to confidentiality of sensitive health information, and the reasonable and prudent parent standard.

(2) How to document sensitive health information, including, but not limited to, sexual and reproductive health issues, in a case plan.

(3) The duties and responsibilities of the assigned case management worker and the foster care provider in ensuring youth and nonminor dependents in foster care can obtain sexual and reproductive health services and information.

(4) Guidance about how to engage and talk with youth and nonminor dependents about healthy sexual development and reproductive and sexual health in a manner that is medically accurate, developmentally and age-appropriate, trauma-informed, and strengths-based.

(5) Information about current contraception methods and how to select and provide appropriate referral resources and materials for information and service delivery.

(j) (Continued)

(k) The department shall adopt regulations to implement this section.

**HANDBOOK ENDS HERE**

Authority cited: Section 1530, Health and Safety Code; Section 16521.5, Welfare and Institutions Code.

Reference: Section 51, Civil Code; Sections 1501, 1522.44, 1529.1, 1530.91, 1531 and 1562, Health and Safety Code; Sections 366.1, 366.21, ~~Section~~ 16001.9, ~~and~~ 16501.9(d)~~,~~ and 16521.5, Welfare and Institutions Code; 42 U.S. Code Section 671 (a)(24).

# Chapter 4 Small Family Homes, Article 6 Continuing Requirements

## Adopt Section 83067 to read:

**83067 REASONABLE AND PRUDENT PARENT STANDARD**

(a) The licensee shall be responsible for applying the reasonable and prudent parent standard, as defined in Section 83001(r)(1), in determining whether to allow a child to participate in age or developmentally-appropriate extracurricular, enrichment, cultural and social activities.

(1) Applying the reasonable and prudent parent standard shall not result in denying the rights of a child as specified in Section 16001.9 of the Welfare and Institutions Code, Section 83072 and, if applicable, Section 83072.2, or contradict court orders or the needs and services plan of the child.

**HANDBOOK BEGINS HERE**

The reasonable and prudent parent standard allows every child in placement the opportunity to participate in age or developmentally appropriate extracurricular, enrichment, cultural, and social activities. The licensee is encouraged to document the type of activity and steps taken to ensure the appropriateness of the activity. Documentation provides evidence that the licensee took the necessary precautions to make informed, reasonable, and prudent decisions that ensure the health and safety of the child.

**HANDBOOK ENDS HERE**

(b) In applying the reasonable and prudent parent standard, the licensee shall consider the following:

(1) The age, maturity, and developmental level of the child.

(2) The nature and inherent risks of harm of the activity.

(3) The best interests of the child based on information provided to or known by the licensee about the child. This information includes the history, behavioral tendencies, mental and physical health, medications, abilities and limitations, sexual orientation, gender identity, developmental level, and court orders for the child.

(A) The licensee may contact the child’s social worker, physician, counselor, or educator to obtain the information described above in paragraph (3).

**HANDBOOK BEGINS HERE**

While it may be helpful to receive information from the professionals listed in Section 83067(b)(3)(A), it is not incumbent upon them to provide the requested information. Some professionals may be restricted by the Health Insurance Portability and Accountability Act (HIPAA) and the California Confidentiality of Medical Information Act from sharing the requested information without the child’s written consent or a court order.

**HANDBOOK ENDS HERE**

(4) The importance of encouraging the child’s emotional and developmental growth.

(A) Emotional and developmental growth includes, but is not limited to, the following:

1. The child’s level of understanding about healthy relationships;

2. The child’s level of understanding about sexuality and body development;

3. The child’s feelings about spirituality; and

4. Other stages of maturity experienced during adolescence and youth.

(5) The importance of providing the child with a sense of normalcy in the most family-like living experience possible.

Authority cited: Sections 1501, 1530 and 1531, Health and Safety Code.

Reference: Section 1522.44, Health and Safety Code; Sections 362.04, 362.05, 727 and 16001.9, Welfare and Institutions Code.

# Chapter 4 Small Family Homes, Article 6 Continuing Requirements

## Amend Section 83074 to read:

**83074 TRANSPORTATION**

(a) through (b) (Continued)

(c) The ~~caregiver~~ licensee and ~~his/her~~ their staff are prohibited from smoking a tobacco product, or permitting any person from smoking a tobacco product in a motor vehicle that is regularly used to transport children, regardless of when the children are present. This prohibition applies when the motor vehicle is moving or at rest. Smoking has the same meaning as in subdivision (c) of Section 22950.5 of the Business and Professions Code, and tobacco product means a product or device as defined in subdivision (d) of Section 22950.5 of the Business and Professions Code.

(d) The licensee shall provide transportation for a child in a timely manner to and from the following:

(1) Health-related services.

(2) School.

(3) Extracurricular, enrichment, cultural, and social activities, in accordance with the reasonable and prudent parent standard specified in Section 83067.

(e) The licensee shall ensure that the transportation provided safeguards the health and safety of a child and shall not violate the personal rights of a child as required by Section 83072, including the right to have equal access to all available services and to not be subjected to discrimination on the basis of actual or perceived race, ethnic group identification, ancestry, national origin, color, religion, sex, sexual orientation, gender identity and expression, mental or physical disability, or HIV status.

(f) The licensee may satisfy the obligation to provide transportation as required by this section if the licensee has entered into a written agreement with a third party, such as an agency, entity or individual, for the regular provision of transportation. The written agreement shall be made available to the department upon request. The licensee may also satisfy the obligation to provide transportation as required by this section if the licensee uses a third party on a rare occurrence, that is not regular or routine, to provide transportation without a written agreement and the licensee meets all requirements for the reasonable prudent parent standard.

Authority cited: Section 1530, Health and Safety Code.

Reference: Sections 1501, 1530.7, 1531 and 118948, Health and Safety Code; Section 16001.9, Welfare and Institutions Code; and Section~~s~~ 22950.5~~(c) and 22950.5(d)~~, Business and Professions Code.

# Chapter 4 Small Family Homes, Article 6 Continuing Requirements

## Amend Section 83075 to read:

**83075 HEALTH-RELATED SERVICES**

(a) through (h) (Continued)

(i) The licensee shall allow access to, and assist a child in accessing age-appropriate, medically accurate information as defined in Education Code section 51931(f) about reproductive health care, and the prevention, diagnosis and treatment of pregnancy and sexually transmitted diseases and infections.

(1) The licensee shall not create or enforce policies requiring children to practice abstinence.

**HANDBOOK BEGINS HERE**

Research suggests the effects of childhood trauma may cause early development of puberty. The licensee should be prepared to assist a child with accessing age-appropriate education about healthy relationships, healthy sexual development, positive gender identity, body image and safety, education about puberty, reproductive health and sexual development information at any age. Resources for these topics can be found on the Department’s Healthy Sexual Development website:

<http://www.cdss.ca.gov/inforesources/Foster-Care/Healthy-Sexual-Development-Project>

Education Code section 51931 provides in part:

(f) “Medically accurate” means verified or supported by research conducted in compliance with scientific methods and published in peer-reviewed journals, where appropriate, and recognized as accurate and objective by professional organizations and agencies with expertise in the relevant field, such as the federal Centers for Disease Control and Prevention, the American Public Health Association, the American Academy of Pediatrics, and the American College of Obstetricians and Gynecologists.

**HANDBOOK ENDS HERE**

Authority cited: Section 1530, Health and Safety Code.

Reference: Sections 1501, 1507, 1507.6(b)(1), 1530.6 and 1531, Health and Safety Code; Section 51931, Education Code; Sections 369, 369.5(a)(1) ~~and~~ 739.5(a)(1)~~,~~ and 16001.9, Welfare and Institutions Code; and Rule 5.640, California Rule of Court.

# Chapter 4 Small Family Homes, Article 6 Continuing Requirements

## Amend Section 83076 to read:

**83076 FOOD SERVICE**

(a) through (g) (Continued)

**~~HANDBOOK BEGINS HERE~~**

~~Whenever children in placement eat at the home it is expected that they will have their meals with family members.~~

**~~HANDBOOK ENDS HERE~~**

(h) The licensee shall invite a child to participate in all household meals.

(i) The licensee may encourage a child, as age or developmentally appropriate, to learn meal preparation, but shall not require a child to prepare meals.

Authority cited: Section 1530, Health and Safety Code.

Reference: Sections 1501 and 1531, Health and Safety Code.

# Chapter 4 Small Family Homes, Article 6 Continuing Requirements

## Amend Section 83079 to read:

**83079 ACTIVITIES**

(a) The licensee shall provide opportunity for, and encourage participation in, activities, including but not limited to, the following:

(1) through (5) (Continued)

(6) Age or developmentally appropriate extracurricular, enrichment, cultural, and social activities as specified in Welfare and Institutions Code sections 362.05 and 727.

(b) The licensee shall apply the reasonable and prudent parent standard, as specified in Section 83067, in determining whether to allow a child to participate in age or developmentally appropriate extracurricular, enrichment, cultural, and social activities.

~~(b)~~(c) The child shall not be required to perform duties which interfere with school, training, treatment programs or family visits.

**HANDBOOK BEGINS HERE**

Welfare and Institutions Code section 362.05 provides in part:

(a) (1) Every child adjudged a dependent child of the juvenile court shall be entitled to participate in age-appropriate extracurricular, enrichment, and social activities, including, but not limited to, access to computer technology and the Internet. A state or local regulation or policy shall not prevent, or create barriers to, participation in those activities. Each state and local entity shall ensure that private agencies that provide foster care services to dependent children have policies consistent with this section and that those agencies promote and protect the ability of dependent children to participate in age-appropriate extracurricular, enrichment, and social activities, including, but not limited to, access to computer technology and the Internet. A short-term residential therapeutic program or a group home administrator, a facility manager, or his or her responsible designee, and a caregiver, as defined in paragraph (1) of subdivision (a) of Section 362.04, shall use a reasonable and prudent parent standard in determining whether to give permission for a child residing in foster care to participate in extracurricular, enrichment, and social activities, including, but not limited to, access to computer technology and the Internet. A short-term residential therapeutic program or a group home administrator, a facility manager, or his or her responsible designee, and a caregiver shall take reasonable steps to determine the appropriateness of the activity in consideration of the child’s age, maturity, and developmental level.

Welfare and Institutions Code section 727 provides in part:

(a)(4)(F)(i) Every minor adjudged a ward of the juvenile court shall be entitled to participate in age-appropriate extracurricular, enrichment, and social activities. A state or local regulation or policy shall not prevent, or create barriers to, participation in those activities. Each state and local entity shall ensure that private agencies that provide foster care services to wards have policies consistent with this section and that those agencies promote and protect the ability of wards to participate in age-appropriate extracurricular, enrichment, and social activities. A short-term residential therapeutic program or a group home administrator, a facility manager, or their responsible designee, and a caregiver, as defined in paragraph (1) of subdivision (a) of Section 362.04, shall use a reasonable and prudent parent standard, as defined in paragraph (2) of subdivision (a) of Section 362.04, in determining whether to give permission for a minor residing in foster care to participate in extracurricular, enrichment, and social activities. A short-term residential therapeutic program or a group home administrator, a facility manager, or his or her responsible designee, and a caregiver shall take reasonable steps to determine the appropriateness of the activity taking into consideration the minor’s age, maturity, and developmental level. For every minor placed in a setting described in subparagraphs (A) through (E), inclusive, age-appropriate extracurricular, enrichment, and social activities shall include access to computer technology and the Internet.

(ii) A short-term residential therapeutic program or a group home administrator, facility manager, or their responsible designee, is encouraged to consult with social work or treatment staff members who are most familiar with the minor at the group home or short-term residential therapeutic program in applying and using the reasonable and prudent parent standard.

**HANDBOOK ENDS HERE**

Authority cited: Section 1530, Health and Safety Code.

Reference: Sections 1501 and 1531, Health and Safety Code; Sections 362.05 and 727, Welfare and Institutions Code.

# Chapter 5 Group Homes, Article 1 General Requirements and Definitions

## Amend Section 84001 to read:

**84001 DEFINITIONS**

In addition to Section 80001, the following shall apply:

(a) (1) ~~“Approved schools, colleges, or universities, including correspondence courses offered by the same,” means those approved/authorized by the U.S. Department of Education, Office of Postsecondary Education or by the California Department of Consumer Affairs, Bureau for Private Postsecondary and Vocational Education, pursuant to Education Code Sections 94900 or 94915.~~

~~(~~~~2)~~ “Accredited schools, colleges or universities, including correspondence courses offered by the same," means those educational institutions or programs granted public recognition as meeting established standards and requirements of an accrediting agency authorized by the U.S. Secretary of Education.

~~(3)~~(2) "Affiliated with licensee" means members of board of directors, executive director, officers and individuals paid by the group home licensee as staff, consultant or contractor used to fulfill the plan of operation.

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Authorized accrediting agencies include the Accrediting Commission for Colleges and Schools (ACCSC), National Home Study, the Accrediting Bureau of Health Education Schools, the Association of Independent Colleges and Schools, the National Association of Trade and Technical Schools, the Western Association of Schools and Colleges, and others approved by the U.S. Department of Education.

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(3) “Age or developmentally appropriate” means as defined in Welfare and Institutions Code section 362.05(c)(2).

**HANDBOOK BEGINS HERE**

Welfare and Institutions Code section 362.05 provides in part:

(c)(2) The term “age or developmentally appropriate” means both of the following:

(A) Activities or items that are generally accepted as suitable for children of the same chronological age or level of maturity or that are determined to be developmentally appropriate for a child, based on the development of cognitive, emotional, physical, and behavioral capacities that are typical for an age or age group.

(B) In the case of a specific child, activities or items that are suitable for the child based on the developmental stages attained by the child with respect to the cognitive, emotional, physical, and behavioral capacities of the child.

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(4) "Approved schools, colleges or universities, including correspondence courses offered by the same," means those approved/authorized by the U.S. Department of Education, Office of Postsecondary Education or by the California Department of Consumer Affairs, Bureau for Private Postsecondary and Vocational Education, pursuant to Education Code Sections 94900 or 94915.

~~(4)~~(5) "Assaultive Behavior" means violent, physical actions which are likely to cause immediate physical harm or danger to an individual or others.

(A) (Continued)

(b) through (g) (Continued)

(h) (1) (Continued)

(2) “Health-related services” shall include, but not be limited to, medical, dental, vision, mental health, substance use disorder services, reproductive and sexual health care. This shall include abortion and contraception related services and gender affirming health care and gender affirming mental health care.

(i) through (q) (Continued)

(r) (1) “Reasonable and prudent parent” or "~~R~~reasonable and ~~P~~prudent ~~P~~parent ~~S~~standard" means as defined in Welfare and Institutions Code section 362.05 (c)(1). ~~the standard characterized by careful and sensible parental decisions that maintain the child's health, safety, and best interest, that an administrator or facility manager, or his or her responsible designee, shall use when determining whether to allow a child in care to participate in extracurricular, enrichment and social activities.~~

(2) through (3) (Continued)

**HANDBOOK BEGINS HERE**

Welfare and Institutions Code section 362.05 provides in part:

(c)(1) “Reasonable and prudent parent” or “reasonable and prudent parent standard” means the standard characterized by careful and sensible parental decisions that maintain the health, safety, and best interests of a child while at the same time encouraging the emotional and developmental growth of the child, that a caregiver shall use when determining whether to allow a child in foster care under the responsibility of the state to participate in age or developmentally appropriate extracurricular, enrichment, cultural, and social activities.

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(s) through (z) (Continued)

Authority cited: Section 17730, Welfare and Institutions Code; and Sections 1522.41(j), 1530, 1530.8 and 1530.9, Health and Safety Code.

Reference: Sections 1501, 1502, 1503, 1507, 1507.2, 1522.4, 1522.41, ~~1522.41(j),~~ 1530.8, and 1531, Health and Safety Code; Sections 362.04(a)(2), 362.05~~(a)~~, 369.5, 727~~(a)(4)(A)~~, 739.5, 11331.5(d), 11403, 17710~~(a)~~, ~~17710(d), 17710(g), 17710(h),~~ 17731, 17732.1 and 17736~~(a) and 17736(b)~~, Welfare and Institutions Code; and 45 CFR Section 1351.1(k).

# Chapter 5 Group Homes, Article 6 Continuing Requirements

## Amend Section 84065 to read:

**84065 PERSONNEL REQUIREMENTS**

(a) (Continued)

(b) The licensee shall employ those administrative, child care, social work and support staff necessary to perform the assigned duties specified in applicable law and regulation.

(1) The licensee shall designate at least one staff member to be onsite at all times to apply the reasonable and prudent parent standard to decisions involving the participation of a child in age or developmentally appropriate activities pursuant to Section 84067.

1. The licensee shall ensure that the designated staff member receives training related to the reasonable and prudent parent standard as specified in Health and Safety Code section 1522.44(c).

**HANDBOOK BEGINS HERE**

Health and Safety Code section 1522.44 provides in part:

(b) Except for licensed foster family homes, certified family homes, and resource families approved by a foster family agency, each licensed community care facility that provides care and supervision to children and operates with staff shall designate at least one onsite staff member to apply the reasonable and prudent parent standard to decisions involving the participation of a child who is placed in the facility in age or developmentally appropriate activities in accordance with the requirements of Section 362.05 of the Welfare and Institutions Code, Section 671(a)(10) of Title 42 of the United States Code, and the regulations adopted by the department pursuant to this chapter.

(c) A licensed and certified foster parent, resource family, or facility staff member, as described in subdivision (b), shall receive training related to the reasonable and prudent parent standard that is consistent with Section 671(a)(24) of Title 42 of the United States Code. This training shall include knowledge and skills relating to the reasonable and prudent parent standard for the participation of the child in age or developmentally appropriate activities, including knowledge and skills relating to the developmental stages of the cognitive, emotional, physical, and behavioral capacities of a child, and knowledge and skills relating to applying the standard to decisions such as whether to allow the child to engage in extracurricular, enrichment, cultural, and social activities, including sports, field trips, and overnight activities lasting one or more days, and to decisions involving the signing of permission slips and arranging of transportation for the child to and from extracurricular, enrichment, and social activities.

**HANDBOOK ENDS HERE**

(c) through (h) (Continued)

(i) Notwithstanding Sections 80065(f)(1) through (6), new child care staff hired on or after July 1, 1999, shall complete a minimum of 24 hours of initial training comprised of the 8 and 16-hour training as specified in (1) and (2) below:

(1) through (2) (Continued)

(3) Training shall include, at a minimum, all of the following topics. The licensee shall determine how much time is spent on each topic and shall ensure that child care staff have appropriate skills necessary to supervise the children in care.

(A) through (E) (Continued)

(F) Role of other facility personnel in service delivery, including case staffing, and the role and responsibilities of the onsite staff member designated to apply the reasonable and prudent parent standard as specified in Section 84065 (b)(1);

(G) through (R) (Continued)

(S) A child’s rights as specified in Welfare and Institutions Code section 16001.9 and Section 84072, including ~~The~~ a child's right to have fair and equal access to all available services, placement, care, treatment, and benefits, and to not be subjected to discrimination or harassment on the basis of actual or perceived race, ethnic group identification, ancestry, national origin, color, religion, sex, sexual orientation, gender identity, mental or physical disability, or HIV status.

(T) through (U) (Continued)

(V) A child’s right to receive sexual and reproductive health care and information.

(W) A child’s right to have their sensitive health information kept confidential.

(X) The duties and responsibilities of the assigned case management worker and the licensee to ensure that children can obtain sexual and reproductive health services and information.

(Y) Guidance about how to engage and talk with children about healthy sexual development and reproductive and sexual health in a manner that is medically accurate, age or developmentally appropriate, trauma informed, and strengths based.

(Z) Information about current contraception methods and how to select and provide appropriate referral resources and materials for information and service delivery.

**HANDBOOK BEGINS HERE**

Pursuant to Welfare and Institutions Code section 16521.5, the Department of Social Services, in collaboration with the Healthy Sexual Development (HSD) Workgroup, developed California’s Plan for the Prevention of Unintended Pregnancy for Youth and Non-Minor Dependentsto provide all categories of foster caregivers, group home providers, county social workers, probation officers, and other relevant parties with the guidelines to describe the duties and responsibilities of foster care providers, county social workers and probation officers in delivering unintended pregnancy prevention services and information. The following website was developed as a result of the HSD Workgroup and contains relevant resources for providers and youth as well as California’s Plan for the Prevention of Unintended Pregnancy for Youth and Non-Minor Dependents:

<http://www.cdss.ca.gov/inforesources/Foster-Care/Healthy-Sexual-Development-Project>

Welfare and Institutions Code section 16521.5 provides:

(a) A foster care provider, in consultation with the county case manager, shall be responsible for ensuring that adolescents, including nonminor dependents, as described in subdivision (v) of Section 11400, who remain in long-term foster care, as defined by the department, receive age-appropriate pregnancy prevention information to the extent state and county resources are provided.

(b) A foster care provider, in consultation with the county case manager, shall be responsible for ensuring that a foster youth or nonminor dependent is provided with appropriate referrals to health services when the foster youth either reaches 18 years of age or the nonminor dependent exits foster care, and to the extent county and state resources are provided.

(c) As part of the home study process, the prospective foster care provider shall notify the county if he or she objects to participating in adolescent pregnancy prevention training or the dissemination of information pursuant to subdivisions (a) and (b). A licensed foster care provider shall notify the county if he or she objects to participation. If the provider objects, the county case manager shall assume this responsibility.

(d) Subdivisions (a), (b), and (c) shall not take effect until the department, in consultation with the workgroup, develops guidelines that describe the duties and responsibilities of foster care providers and county case managers in delivering pregnancy prevention services and information.

(e) (1) The department, in consultation with the State Department of Health Care Services, shall convene a working group for the purpose of developing a pregnancy prevention plan that will effectively address the needs of adolescent male and female foster youth. The workgroup shall meet not more than three times and thereafter shall provide consultation to the department upon request.

(2) The working group shall include representatives from the California Youth Connection, the Foster Parent’s Association, group home provider associations, the County Welfare Director’s Association, providers of teen pregnancy prevention programs, a foster care caseworker, an expert in pregnancy prevention curricula, a representative of the Independent Living Program, and an adolescent health professional.

(f) The plan required pursuant to subdivision (e) shall include, but not be limited to, all of the following:

(1) Effective strategies and programs for preteen and older teen foster youth and nonminor dependents.

(2) The role of foster care and group home care providers.

(3) The role of the assigned case management worker.

(4) How to involve foster youth and nonminor peers.

(5) Selecting and providing appropriate materials to educate foster youth and nonminors in family life education.

(6) The training of foster care and group home care providers and, when necessary, county case managers in adolescent pregnancy prevention.

(g) Counties currently mandating foster care provider training shall be encouraged to include the pregnancy prevention curricula guidelines and educational materials that may be developed by the workgroup pursuant to subdivision (f).

(h) In order to train case management workers and foster care providers, the department shall develop a curriculum that is consistent with, and in addition to, the pregnancy prevention plan and the curricula guidelines and educational materials developed by the workgroup pursuant to subdivisions (e) and (f).

(i) The curriculum created pursuant to subdivision (h) shall include, but not be limited to, all of the following:

(1) The rights of youth and nonminor dependents in foster care to sexual and reproductive health care and information, to confidentiality of sensitive health information, and the reasonable and prudent parent standard.

(2) How to document sensitive health information, including, but not limited to, sexual and reproductive health issues, in a case plan.

(3) The duties and responsibilities of the assigned case management worker and the foster care provider in ensuring youth and nonminor dependents in foster care can obtain sexual and reproductive health services and information.

(4) Guidance about how to engage and talk with youth and nonminor dependents about healthy sexual development and reproductive and sexual health in a manner that is medically accurate, developmentally and age appropriate, trauma informed, and strengths based.

(5) Information about current contraception methods and how to select and provide appropriate referral resources and materials for information and service delivery.

(j) (Continued)

(k) The department shall adopt regulations to implement this section.

**HANDBOOK ENDS HERE**

(j) Annual Training

(1) through (2) (Continued)

(3) Training may include, but is not limited to, the following topics:

(A) through (N) (Continued)

(O) Topics listed in Sections 84065(i)(3)(A) through ~~(U)~~(Z).

(4) through (7) (Continued)

(k) through (p) (Continued)

Authority cited: Sections 1522.41(j), and 1530, Health and Safety Code; Section 16521.5(k), Welfare and Institutions Code.

Reference: Section 51, Civil Code; Sections 1501, 1522.4, 1522.44, 1531 and 1562, Health and Safety Code; Sections 362.05, 16001.9, 16501.4(d) and 16521.5, Welfare and Institutions Code.

# Chapter 5 Group Homes, Article 6 Continuing Requirements

## Amend Section 84067 to read:

**84067 REASONABLE AND PRUDENT PARENT STANDARD**

(a) The administrator or facility manager, or ~~his or her~~ their responsible designee, shall be responsible for applying the ~~“Reasonable and Prudent Parent Standard,”~~ reasonable and prudent parent standard, as defined in Section 84001(r)(1) ~~and specified in Welfare and Institutions Code sections 362.05 and 727~~, in determining whether to allow a child to participate in age-appropriate, or developmentally-appropriate extracurricular, enrichment, cultural, and social activities.

(1) Applying the reasonable and prudent parent standard shall not result in denying the rights of a child as specified in Section 84072 and Welfare and Institutions Code section 16001.9, or contradict court orders or the needs and services plan of the child.

(b) ~~When~~ In applying the reasonable and prudent parent standard ~~“Reasonable and Prudent Parent Standard”~~, the administrator or facility manager, or ~~his or her~~ their responsible designee, shall consider the following:

(1) The ~~child’s~~ age, maturity, and developmental level of the child ~~to ensure the overall health and safety of the child is maintained~~.

(2) The nature and inherent ~~potential~~ risks of harm ~~factors and the appropriateness~~ of the ~~extracurricular, enrichment, and social~~ activity.

(3) The best interests of the child based on information provided to or known by the administrator or facility manager, or ~~his or her~~ their responsible designee, about the child. This information includes the history, behavioral tendencies, mental and physical health, medications, abilities and limitations, sexual orientation, gender identity, developmental level, and court orders for the child.

(A) The administrator or facility manager, or their responsible designee, may consult with staff members who are most familiar with the child, or contact the child’s social worker, physician, counselor, or educator to obtain the information described above in paragraph (3).

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While it may be helpful to receive information from the professionals listed in Section 84067(b)(3)(A), it is not incumbent upon them to provide the requested information. Some professionals may be restricted by the Health Insurance Portability and Accountability Act (HIPAA) and the California Confidentiality of Medical Information Act from sharing the requested information without the child’s written consent or a court order.

**HANDBOOK ENDS HERE**

(4) The importance of encouraging the child’s emotional and developmental growth.

(A) Emotional and developmental growth includes, but is not limited to, the following:

1. The child’s level of understanding about healthy relationships;

2. The child’s level of understanding about sexuality and body development;

3. The child’s feelings about spirituality; and

4. Other stages of maturity experienced during adolescence and youth.

(5) The importance of providing the child with a sense of normalcy in the most family-like living experience possible.

**HANDBOOK BEGINS HERE**

The ~~"Reasonable and Prudent Parent Standard"~~ reasonable and prudent parent standard allows every child in placement the opportunity to participate in ~~age-appropriate, developmentally-appropriate~~ age or developmentally-appropriate extracurricular, enrichment, cultural and social activities. ~~The administrator or facility manager, or his or her responsible designee, is encouraged to consult with social work or treatment staff members who are most familiar with the child.~~

The administrator or facility manager, or ~~his or her~~ their responsible designee, is encouraged to document the type of activity and steps taken to ensure the appropriateness of the activity. Documentation provides evidence that staff took the necessary precautions to make informed, reasonable, and prudent decisions that ensures the health and safety of the child.

~~Welfare and Institutions Code section 362.05 provides in part:~~

~~(a) Every child adjudged a dependent child of the juvenile court shall be entitled to participate in age-appropriate extracurricular, enrichment, and social activities. No state or local regulation or policy may prevent or create barriers to participation in those activities. Each state and local entity shall ensure that private agencies that provide foster care services to dependent children have policies consistent with this section and that those agencies promote and protect the ability of dependent children to participate in age-appropriate extracurricular, enrichment, and social activities. A group home administrator, a facility manager, or his or her responsible designee, and a caregiver, as defined in paragraph (1) of subdivision (a) of Section 362.04, shall use a reasonable and prudent parent standard, as defined in paragraph (2) of subdivision (a) of Section 362.04, in determining whether to give permission for a child residing in foster care to participate in extracurricular, enrichment, and social activities. A group home administrator, a facility manager, or his or her responsible designee, and a caregiver shall take reasonable steps to determine the appropriateness of the activity in consideration of the child's age, maturity, and developmental level.~~

~~(b) (Continued)~~

~~Welfare and Institutions Code section 727 provides in part:~~

~~(a)(4) (A) Every child adjudged a ward of the juvenile court who is residing in a placement as defined in paragraphs (1) to (3), inclusive, shall be entitled to participate in age-appropriate extracurricular, enrichment, and social activities. No state or local regulation or policy may prevent, or create barriers to, participation in those activities...~~

~~(B) A group home administrator, or a facility manager, or his or her responsible designee, is encouraged to consult with social work or treatment staff members who are most familiar with the child at the group home in applying and using the reasonable and prudent parent standard."~~

~~"Reasonable and Prudent Parent Standard" is referenced in the following:~~

~~(1) Section 84001, Definitions.~~

~~(2) Section 84067, Reasonable and Prudent Parent Standard.~~

~~(3) Section 84076, Food Service.~~

~~(4) Section 84079, Planned Activities.~~

~~(5) Section 84087.2, Outdoor Activity Space.~~

~~(6) Section 84088, Fixtures, Furniture, Equipment, and Supplies.~~

**HANDBOOK ENDS HERE**

~~(c) Application of the "Reasonable and Prudent Parent Standard" shall not result in the denial of the rights of a child as specified in Welfare and Institutions Code section 16001.9, or contradict court orders or the needs and services plan of the child.~~

Authority cited: Sections 1501, 1530 and 1531, Health and Safety Code.

Reference: Section 1522.44, Health and Safety Code; Sections 362.04, 362.05 and 16001.9, Welfare and Institutions Code; and Assembly Bill 2096 (Chapter 483 Statutes of 2008).

# Chapter 5 Group Homes, Article 6 Continuing Requirements

## Amend Section 84074 to read:

**84074 TRANSPORTATION**

(a) In addition to Section 80074, the following shall apply:

(b) The licensee and ~~his/her~~ their staff are prohibited from smoking a tobacco product, or permitting any person from smoking a tobacco product in a motor vehicle that is regularly used to transport children, regardless of when the children are present. This prohibition applies when the motor vehicle is moving or at rest. Smoking has the same meaning as in subdivision (c) of Section 22950.5 of the Business and Professions Code, and tobacco product means a product or device as defined in subdivision (d) of Section 22950.5 of the Business and Professions Code.

(c) The licensee shall provide transportation for a child in a timely manner to and from the following:

(1) Health-related services.

(2) School.

(3) Extracurricular, enrichment, cultural, and social activities in accordance with the reasonable and prudent parent standard specified in Section 84067.

(d) The licensee shall ensure that the transportation provided safeguards the health and safety of a child and shall not violate the personal rights of a child as required by Section 84072, including the right to have equal access to all available services and to not be subjected to discrimination on the basis of actual or perceived race, ethnic group identification, ancestry, national origin, color, religion, sex, sexual orientation, gender identity and expression, mental or physical disability, or HIV status.

(e) The licensee may satisfy the obligation to provide transportation as required by this section if the licensee has entered into a written agreement with a third party, such as an agency, entity or individual, for the regular provision of transportation. The written agreement shall be made available to the department upon request. The licensee may also satisfy the obligation to provide transportation as required by this section if the licensee uses a third party on a rare occurrence, that is not regular or routine, to provide transportation without a written agreement and the licensee meets all requirements for the reasonable prudent parent standard.

Authority cited: Section 1530, Health and Safety Code.

Reference: Sections 1501, 1530.7, 1531 and 118948, Health and Safety Code; Section 16001.9, Welfare and Institutions Code; and Sections 22950.5(c) and 22950.5(d), Business and Professions Code.

# Chapter 5 Group Homes, Article 6 Continuing Requirements

## Amend Section 84075 to read:

**84075 HEALTH-RELATED SERVICES**

(a) (Continued)

(b) The licensee shall ensure that all prescribed medications are centrally stored, as provided in Section 80075~~(h)(3)~~(j), with the exception of contraceptives and medications used to treat or prevent pregnancy or sexually transmitted disease or infection.

(c) The licensee shall allow access to, and assist a child in accessing age-appropriate, medically accurate information as defined in Education Code section 51931(f) about reproductive health care, and the prevention, diagnosis and treatment of pregnancy and sexually transmitted diseases and infections.

(1) The licensee shall not create or enforce policies requiring children to practice abstinence.

**HANDBOOK BEGINS HERE**

Research suggests the effects of childhood trauma may cause early development of puberty. The licensee should be prepared to assist a child with accessing age-appropriate education about healthy relationships, healthy sexual development, positive gender identity, body image and safety, education about puberty, reproductive health and sexual development information at any age. Resources for these topics can be found on the Department’s Healthy Sexual Development website:

<http://www.cdss.ca.gov/inforesources/Foster-Care/Healthy-Sexual-Development-Project>

Education Code section 51931 provides:

(f) “Medically accurate” means verified or supported by research conducted in compliance with scientific methods and published in peer-reviewed journals, where appropriate, and recognized as accurate and objective by professional organizations and agencies with expertise in the relevant field, such as the federal Centers for Disease Control and Prevention, the American Public Health Association, the American Academy of Pediatrics, and the American College of Obstetricians and Gynecologists.

**HANDBOOK ENDS HERE**

Authority cited: Section 1530, Health and Safety Code.

Reference: Sections 1501, 1507, 1507.6 and 1531, Health and Safety Code; Section 51931, Education Code; Sections 369, 369.5(a)(1), 16001.9, ~~and~~ 739.5(a)(1) and 16501.1, Welfare and Institutions Code; and Rule 5.640, California Rule of Court**.**

# Chapter 5 Group Homes, Article 6 Continuing Requirements

## Amend Section 84076 to read:

**84076 FOOD SERVICE**

(a) through (b) (Continued)

(c) The licensee shall meet the following food supply and storage requirements:

(1) through (4) (Continued)

(5) Kitchen appliances and utensils shall be made accessible to a child when ~~he or she is~~ they are participating in age-~~appropriate, and~~ or developmentally-appropriate activities related to food preparation, cooking, and other related kitchen and dining activities. The administrator or facility manager, or ~~his or her~~ their responsible designee, shall:

(A) Apply the ~~“Reasonable and Prudent Parent Standard,”~~ reasonable and prudent parent standard, as specified in Section 84067, when allowing a child to use kitchen appliances and utensils for food preparation and cooking.

(B) through (C) (Continued)

Authority cited: Section 1530, Health and Safety Code.

Reference: Sections 1501 and 1531, Health and Safety Code; Sections 361.2~~(j)(2)~~, 362.05, 727 and 16001.9, Welfare and Institutions Code.

# Chapter 5 Group Homes, Article 6 Continuing Requirements

## Amend Section 84079 to read:

**84079 PLANNED ACTIVITIES**

(a) (Continued)

(b) (Continued)

(c) The administrator or facility manager, or ~~his or her~~ their designee, shall:

(1) ~~Allow~~ Provide opportunity for and encourage a child to participate in ~~age-appropriate and developmentally-appropriate~~ age or developmentally appropriate extracurricular, enrichment, cultural, and social activities as specified in Welfare and Institutions Code sections 362.05 and 727.

(2) Apply the ~~"Reasonable and Prudent Parent Standard"~~ reasonable and prudent parent standard, as specified in Section 84067, ~~when~~ in determining whether to allow a child to participate in ~~age-appropriate and developmentally-appropriate~~ age or developmentally appropriate extracurricular, enrichment, cultural, and social activities.

**HANDBOOK BEGINS HERE**

~~Activities~~ Extracurricular, enrichment, cultural, and social activities may include, but are not limited to, the following:

(1) Worship services and activities of the child's choice.

(2) Community events, including but not limited to, concerts, tours, dances, plays, and celebrations of special events.

(3) ~~The YMCA, YWCA, Boy Scouts, and Girl Scouts~~ Leadership and outdoor adventure training.

(4) Sports.

(5) School or after-school activities such as band, dances, and field trips.

(6) Leisure time such as bike riding, socializing with friends, shopping, and going to the movies.

(7) ~~4-H activities~~ Farm and garden activities.

(8) Overnight activities lasting one or more days, such as ~~Sleepover~~ sleepovers with friends.

(9) Having visitors in the home.

(10) Use of computer equipment.

(A) Computer equipment made available to other children in the ~~household~~ facility should also be available to a ~~"child"~~ child of similar age and maturity.

(B) The ~~caregiver~~ facility is not required to incur a cost to provide computer availability.

(11) Babysitting.

(12) Dating.

(13) Access to information regarding obtaining a California driver license.

Welfare and Institutions Code section 362.05 provides in part:

(a) (1) Every child adjudged a dependent child of the juvenile court shall be entitled to participate in age-appropriate extracurricular, enrichment, and social activities, including, but not limited to, access to computer technology and the Internet. A state or local regulation or policy shall not prevent, or create barriers to, participation in those activities. Each state and local entity shall ensure that private agencies that provide foster care services to dependent children have policies consistent with this section and that those agencies promote and protect the ability of dependent children to participate in age-appropriate extracurricular, enrichment, and social activities, including, but not limited to, access to computer technology and the Internet. A short-term residential therapeutic program or a group home administrator, a facility manager, or his or her responsible designee, and a caregiver, as defined in paragraph (1) of subdivision (a) of Section 362.04, shall use a reasonable and prudent parent standard in determining whether to give permission for a child residing in foster care to participate in extracurricular, enrichment, and social activities, including, but not limited to, access to computer technology and the Internet. A short-term residential therapeutic program or a group home administrator, a facility manager, or his or her responsible designee, and a caregiver shall take reasonable steps to determine the appropriateness of the activity in consideration of the child’s age, maturity, and developmental level.

Welfare and Institutions Code section 727 provides in part:

(a)(4)(F)(i) Every minor adjudged a ward of the juvenile court shall be entitled to participate in age-appropriate extracurricular, enrichment, and social activities. A state or local regulation or policy shall not prevent, or create barriers to, participation in those activities. Each state and local entity shall ensure that private agencies that provide foster care services to wards have policies consistent with this section and that those agencies promote and protect the ability of wards to participate in age-appropriate extracurricular, enrichment, and social activities. A short-term residential therapeutic program or a group home administrator, a facility manager, or his or her responsible designee, and a caregiver, as defined in paragraph (1) of subdivision (a) of Section 362.04, shall use a reasonable and prudent parent standard, as defined in paragraph (2) of subdivision (a) of Section 362.04, in determining whether to give permission for a minor residing in foster care to participate in extracurricular, enrichment, and social activities. A short-term residential therapeutic program or a group home administrator, a facility manager, or their responsible designee, and a caregiver shall take reasonable steps to determine the appropriateness of the activity taking into consideration the minor’s age, maturity, and developmental level. For every minor placed in a setting described in subparagraphs (A) through (E), inclusive, age-appropriate extracurricular, enrichment, and social activities shall include access to computer technology and the internet.

(ii) A short-term residential therapeutic program or a group home administrator, facility manager, or his or her responsible designee, is encouraged to consult with social work or treatment staff members who are most familiar with the minor at the group home or short-term residential therapeutic program in applying and using the reasonable and prudent parent standard.

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(d) through (e) (Continued)

Authority cited: Section 1530, Health and Safety Code.

Reference: Sections 1501 and 1531, Health and Safety Code; Sections 361.2(j)(2), 362.04, 362.05, 727 and 16001.9, Welfare and Institutions Code; and Assembly Bill 2096, (Chapter 483, Statutes of 2008).

# Chapter 9.5 Foster Family Homes, Article 1 General Requirements, Definitions, and Forms

## Amend Section 89201 to read:

**89201 DEFINITIONS**

The following definitions shall apply whenever the terms are used throughout this chapter.

(a) (1) (Continued)

(2) “Age or Developmentally Appropriate” means as defined in Welfare and Institutions Code section 362.05(c)(2). ~~“Age- Appropriate” means activities or items that are generally accepted as suitable for children of the same chronological age or level of maturity. Age appropriateness is based on the development of cognitive, emotional, physical, and behavioral capacity that is typical for an age or age group.~~

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Welfare and Institutions Code section 362.05 provides in part:

(c)(2) The term “age or developmentally appropriate” means both of the following:

(A) Activities or items that are generally accepted as suitable for children of the same chronological age or level of maturity or that are determined to be developmentally appropriate for a child, based on the development of cognitive, emotional, physical, and behavioral capacities that are typical for an age or age group.

(B) In the case of a specific child, activities or items that are suitable for the child based on the developmental stages attained by the child with respect to the cognitive, emotional, physical, and behavioral capacities of the child.

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(3) through (7) (Continued)

(b) through (g) (Continued)

(h) (1) through (2) (Continued)

(3) “Health-related services” shall include, but not be limited to, medical, dental, vision, mental health, substance use disorder services, reproductive and sexual health care. This shall include abortion and contraception related services and gender affirming health care and gender affirming mental health care.

~~(3)~~(4) “Home” means a Foster Family Home.

(i) through (o) (Continued)

(p) (1) through (7) (Continued)

~~(8) “Prudent Parent” or “Reasonable and Prudent Parent Standard” is defined in Welfare and Institutions Code section 362.04, subsection (a)(2) and specified in Section 89377, Reasonable and Prudent Parent Standard.~~

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~~Welfare and Institutions Code section 362.04, subsection (a)(2) provides:~~

~~"'Reasonable and prudent parent' or 'reasonable and prudent parent standard' means the standard characterized by careful and sensible parental decisions that maintain the child's health, safety, and best interest."~~

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(q) (Continued)

(r) (1) “Reasonable and prudent parent” or “reasonable and prudent parent standard” means as defined in Welfare and Institutions Code section 362.05(c)(1).

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Welfare and Institutions Code section 362.05 provides in part:

(c)(1) “Reasonable and prudent parent” or “reasonable and prudent parent standard” means the standard characterized by careful and sensible parental decisions that maintain the health, safety, and best interests of a child while at the same time encouraging the emotional and developmental growth of the child, that a caregiver shall use when determining whether to allow a child in foster care under the responsibility of the state to participate in age or developmentally appropriate extracurricular, enrichment, cultural, and social activities.

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~~(1)~~(2) “Rehabilitation” means that period of time, together with any education, counseling or therapy, training, stable employment, restitution, remorse, changes in lifestyle, or community service, which assist a person in reestablishing good character.

~~(2)~~(3) “Relative” means:

(A) through (C) (continued)

~~(3)~~(4) “Restraining Device” means any physical or mechanical item that is attached or next to the body of a “child” that a “child” cannot remove easily and keeps the “child” from moving freely as specified in Section 89475.2, Postural Supports and Protective Devices.

(s) through (z) (Continued)

Authority cited: Sections 1502.8, 1530 and 1530.5, Health and Safety Code; and Section 21 of Assembly Bill 1695 (Chapter 653, Statutes of 2001).

Reference: California Fair Employment and Housing Act, Sections 12921, 12926 and 12926.1(c), Government Code; Section 51931(a), Education Code; Sections 1337, 1500, 1501, 1502, 1503, 1503.5, 1505, 1505.2, 1507, 1507.5, 1520, 1522, 1522.1, 1524, 1526, 1526.5, 1527, 1530, 1530.5, 1530.6, 1531, 1531.5, 1533, 1534, 1536.1, 1537, 1550, 1551, 1558, 1558.1, 1559.110, 1727(c), 11834.02 and 13131, Health and Safety Code; Unruh Civil Rights Act, Section 51, Civil Code; Sections 309, 319(d), 361.2, 362.04, 362.05, 362.7, 366.26, 369.5, 739.5, 11400(t), 11403, 11460, 11461, 16501.25, 16522, 17710, 17710(a), 17710(g), 17710(h), 17710(i), 17731, 17731(c) and 17736(a), Welfare and Institutions Code; and 42 U.S.C.A. Section 1305.

# Chapter 9.5 Foster Family Homes Article 3 Core Requirements for Caregivers, Relatives, and Nonrelative Extended Family Members

## Amend Section 89374 to read:

**89374 TRANSPORTATION**

(a) The caregiver shall ensure that persons who transport a “child” use vehicles that are in safe operating condition.

(1) The caregiver and ~~his/her~~ their staff are prohibited from smoking a tobacco product, or permitting any person from smoking a tobacco product in a motor vehicle that is regularly used to transport children, regardless of when the children are present. This prohibition applies when the motor vehicle is moving or at rest. Smoking has the same meaning as in subdivision (c) of Section 22950.5 of the Business and Professions Code, and tobacco product means a product or device as defined in subdivision (d) of Section 22950.5 of the Business and Professions Code.

(b) (Continued)

(c) ~~Unless other arrangements are specified in the written plan identifying the specific needs and services of a “child” or included in the written placement agreement between the caregiver and the placing agency, the caregiver shall ensure transportation is provided for the following situations:~~The caregiver shall provide transportation for a child in a timely manner to and from the following:

(1) ~~Medical appointments,~~ Health-related services.

(2) School~~, and~~.

(3) Extracurricular, enrichment, cultural, and social activities, ~~provided the transportation to these activities is reasonable~~ in accordance with the reasonable and prudent parent standard specified in Section 89377.

(d) The caregiver shall ensure that the transportation provided safeguards the health and safety of a "child" and shall not violate the personal rights of a "child" as required by Section 89372, including the right to have equal access to all available services and to not be subjected to discrimination on the basis of actual or perceived race, ethnic group identification, ancestry, national origin, color, religion, sex, sexual orientation, gender identity and expression, mental or physical disability, or HIV status.

(e) The caregiver may satisfy their obligation to provide transportation as required by this section if the caregiver has entered into a written agreement with a third party, such as an agency, entity or individual, for the regular provision of transportation. The written agreement shall be made available to the department upon request. The caregiver may also satisfy their obligation to provide transportation as required by this section if the caregiver uses a third party on a rare occurrence, that is not regular or routine, to provide transportation without a written agreement and the caregiver meets all requirements for the reasonable prudent parent standard.

Authority cited: Sections 1530 and 1530.5, Health and Safety Code; and Section 21 of Assembly Bill (AB) 1695 (Chapter 653, Statutes of 2001).

Reference: Sections 1501, 1530.7, 1531 and 118948, Health and Safety Code; Section 362.05 and 16001.9, Welfare and Institutions Code; and Section~~s~~ and 22950.5~~(c) and 22950.5(d)~~, Business and Professions Code.

# Chapter 9.5 Foster Family Homes Article 3 Core Requirements for Caregivers, Relatives, and Nonrelative Extended Family Members

## Amend Section 89376 to read:

**89376 FOOD SERVICE**

(a) through (c) (Continued)

(d) The caregiver may encourage a "child," as age ~~and~~ or developmentally appropriate, to learn meal preparation, but shall not require a "child" to prepare meals.

(1) (Continued)

Authority cited: Sections 1530 and 1530.5, Health and Safety Code; and Section 21 of Assembly Bill (AB) 1695 (Chapter 653, Statutes of 2001).

Reference: Sections 1501, 1530 and 1531, Health and Safety Code; Sections 361.2~~(j)-(j)(2)~~, ~~and~~ 362.05, 727 and 16001.9, Welfare and Institutions Code.

# Chapter 9.5 Foster Family Homes Article 3 Core Requirements for Caregivers, Relatives, and Nonrelative Extended Family Members

## Amend Section 89377 to read:

**89377 REASONABLE AND PRUDENT PARENT STANDARD**

(a) The caregiver shall be responsible for applying the reasonable and prudent parent standard ~~Reasonable and Prudent Parent Standard~~ as defined in Section 89201(p)(8), in determining whether to allow a “child” to participate in age or developmentally-appropriate extracurricular, enrichment, cultural, and social activities. ~~Welfare and Institutions Code section 362.04 and specified in sections 362.05 and 727.~~

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~~The Reasonable and Prudent Parent Standard is intended to assist caregivers in normalizing the life of a "child."~~

~~Welfare and Institutions Code section 362.04 provides in part:~~

~~(a) For purposes of this section:~~

~~(1)~~ **~~'~~**~~Caregiver~~**~~'~~** ~~means any licensed or certified foster parent, approved relative caregiver, or approved nonrelative extended family member.~~

~~(2)~~ **~~'~~**~~Reasonable and prudent parent~~**~~'~~** ~~or~~ **~~'~~**~~reasonable and prudent parent standard~~**~~'~~** ~~means the standard characterized by careful and sensible parental decisions that maintain the child's health, safety, and best interest.…"~~

~~Welfare and Institutions Code section 362.05 provides in part:~~

~~(a) Every child adjudged a dependent child of the juvenile court shall be entitled to participate in age-appropriate extracurricular, enrichment, and social activities. No state or local regulation or policy may prevent or create barriers to participation in those activities. Each state and local entity shall ensure that private agencies that provide foster care services to dependent children have policies consistent with this section and that those agencies promote and protect the ability of dependent children to participate in age-appropriate extracurricular, enrichment, and social activities. A group home administrator, a facility manager, or his or her responsible designee, and a caregiver, as defined in paragraph (1) of subdivision (a) of Section 362.04, shall use a reasonable and prudent parent standard, as defined in paragraph (2) of subdivision (a) of Section 362.04, in determining whether to give permission for a child residing in foster care to participate in extracurricular, enrichment, and social activities. A group home administrator, a facility manager, or his or her responsible designee, and a caregiver shall take reasonable steps to determine the appropriateness of the activity in consideration of the child's age, maturity, and developmental level."~~

~~Welfare and Institutions Code section 727 provides in part:~~

~~"(4)(A) Every child adjudged a ward of the juvenile court who is residing in a placement as defined in paragraphs (1) to (3), inclusive, shall be entitled to participate in age-appropriate extracurricular, enrichment, and social activities. No state or local regulation or policy may prevent, or create barriers to, participation in those activities. Each state and local entity shall ensure that private agencies that provide foster care services to wards have policies consistent with this section and that those agencies promote and protect the ability of wards to participate in age-appropriate extracurricular, enrichment, and social activities. A group home administrator, a facility manager, or his or her responsible designee, and a caregiver, as defined in paragraph (1) of subdivision (a) of Section 362.04, shall use a reasonable and prudent parent standard, as defined in paragraph (2) of subdivision (a) of Section 362.04, in determining whether to give permission for a child residing in foster care to participate in extracurricular, enrichment, and social activities. A group home administrator, a facility manager, or his or her responsible designee, and a caregiver shall take reasonable steps to determine the appropriateness of the activity taking into consideration the child's age, maturity, and developmental level."~~

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(b) ~~Application of~~ Applying the reasonable and prudent parent standard shall not result in ~~the denial of~~ denying the rights of a “child” as specified in Welfare and Institutions Code section 16001.9 and Section 89372 or, if applicable, Section 89572.2, or contradict court orders or the written plan identifying the specific needs and services of the “child.”

(c) In applying the reasonable and prudent parent standard, the caregiver shall consider:

(1) The age, maturity, and developmental level of a “child;”

(2) The nature and inherent risks of harm of the activity;~~,~~ and

(3) The best interests of a “child” based on information provided to, or known by, the caregiver about the “child”. This information includes the history, behavioral tendencies, mental and physical health, medications, abilities and limitations, sexual orientation, gender identify, developmental level, and court orders for the “child”.

(A) The caregiver may contact the “child’s” social worker, physician, counselor, or educator to obtain information described above in paragraph (3).

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While it may be helpful to receive information from the professionals listed in Section 89377(c)(3)(A), it is not incumbent upon them to provide the requested information. Some professionals may be restricted by the Health Insurance Portability and Accountability Act (HIPAA) and the California Confidentiality of Medical Information Act from sharing the requested information without the “child’s” written consent or a court order.

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(4) The importance of encouraging a “child’s” emotional and developmental growth.

(A) Emotional and developmental growth includes, but is not limited to, the following:

1. The “child’s” level of understanding about healthy relationships;

2. The “child’s” level of understanding about sexuality and body development;

3. The “child’s” feelings about spirituality; and

4. Other stages of maturity experienced during adolescence and youth.

(5) The importance of providing the “child” with a sense of normalcy in the most family-like living experience possible.

(d) (Continued)

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~~A Reasonable and Prudent Parent Standard decision is referenced in the following sections:~~

~~(1) Applicant Qualifications, Section 89318, subsection (a)(4).~~

~~(2) Responsibility for Providing Care and Supervision, Section 89378, subsections (a)(1)(A), (a)(1)(A)3.a., (a)(1)(B), (a)(1)(D), (a)(1)(F), and (b).~~

~~(3) Activities, Section 89379, subsection (b).~~

~~(4) Buildings and Grounds, Section 89387, subsection (d)(1).~~

~~(5) Storage Space, Section 89387.2, subsections (b)(1) through (3).~~

~~(6) Admission Procedures, Section 89468, subsection (b) handbook.~~

The reasonable and prudent parent standard allows every child in placement the opportunity to participate in age or developmentally~~-~~appropriate extracurricular, enrichment, and social activities. The caregiver is encouraged to document the type of activity and steps taken to ensure the appropriateness of the activity. Documentation provides evidence that the caregiver took the necessary precautions to make informed, reasonable, and prudent decisions that ensure the health and safety of the child.

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Authority cited: Sections 1530 and 1530.5, Health and Safety Code; and Section 21 of Assembly Bill (AB) 1695 (Chapter 653, Statutes of 2001).

Reference: Section 1531, Health and Safety Code; and Sections 362.04, 362.05 and 727, Welfare and Institutions Code.

# Chapter 9.5 Foster Family Homes Article 3 Core Requirements for Caregivers, Relatives, and Nonrelative Extended Family Members

## Amend Section 89379 to read:

**89379 ACTIVITIES**

(a) A “child” shall be entitled to participate in age ~~and~~ or developmentally appropriate extracurricular, enrichment, cultural, and social activities.

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Extracurricular, enrichment, cultural, and social activities may include, but are not limited to, the following:

(1) Sports.

(2) School or after-school activities such as band, dances, and field trips.

(3) Leisure time such as bike riding, socializing with friends, shopping and going to the movies.

(4) Farm and ~~G~~garden activities.

(5) Leadership and outdoor adventure training.

(6) Overnight activities lasting one or more days such as ~~Sleepover~~ sleepovers with friends.

(7) Babysitting.

(8) Having visitors in the home.

(9) Use of computer equipment.

1. Computer equipment made available to other children in the household should also be available to a "child" of similar age and maturity.
2. The caregiver is not required to incur a cost to provide computer availability.

(10) Use of a cell phone.

(A) Unless prohibited by court order or the person or agency responsible for placing the "child," a "child" may possess a cell phone.

(B) The caregiver may place reasonable limitations on a “child’s” cell phone use, after considering the history, behavioral tendencies, mental and physical health, medications, abilities and limitations, developmental level of, and court orders for the "child” as well as any other factors as specified in Section 89377, Reasonable and Prudent Parent Standard.

(C) The caregiver is not required to purchase a cell phone for a "child" or to pay for cell phone service.

(11) Access to information regarding obtaining a California Driver's License.

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(b) The caregiver shall permit and promote participation by a "child" in age or developmentally appropriate extracurricular, enrichment, cultural, and social activities as specified in Welfare and Institutions Code sections 362.05 and 727. ~~and apply the reasonable and prudent parent standard as specified in Section 89377, Reasonable and Prudent Parent Standard.~~

(c) The caregiver shall apply the reasonable and prudent parent standard, as specified in Section 89377, in determining whether to permit a “child” to participate in age or developmentally appropriate extracurricular, enrichment, cultural, and social activities.

~~(c)~~(d) (Continued)

**HANDBOOK BEGINS HERE**

Welfare and Institutions Code section 362.05 provides in part:

(a)(1) Every child adjudged a dependent child of the juvenile court shall be entitled to participate in age-appropriate extracurricular, enrichment, and social activities, including, but not limited to, access to computer technology and the Internet. ~~No~~ A state or local regulation or policy ~~may~~ shall not prevent, or create barriers to, participation in those activities. Each state and local entity shall ensure that private agencies that provide foster care services to dependent children have policies consistent with this section and that those agencies promote and protect the ability of dependent children to participate in age-appropriate extracurricular, enrichment, and social activities, including, but not limited to, access to computer technology and the Internet. A short-term residential therapeutic program or a group home administrator, a facility manager, or his or her responsible designee, and a caregiver, as defined in paragraph (1) of subdivision (a) of Section 362.04, shall use a reasonable and prudent parent standard~~, as defined in paragraph (2) of subdivision (a) of Section 362.04,~~ in determining whether to give permission for a child residing in foster care to participate in extracurricular, enrichment, and social activities, including, but not limited to, access to computer technology and the Internet. A short-term residential therapeutic program or a group home administrator, a facility manager, or his or her responsible designee, and a caregiver shall take reasonable steps to determine the appropriateness of the activity in consideration of the child's age, maturity, and developmental level.

Welfare and Institutions Code section 727 provides in part:

(a)(4)~~(A)~~ (F)(i) A~~Every child~~ minor adjudged a ward of the juvenile court ~~who is residing in a placement as defined in paragraphs (1) to (3), inclusive,~~ shall be entitled to participate in age-appropriate extracurricular, enrichment, and social activities. ~~No~~ A state or local regulation or policy ~~may~~ shall not prevent, or create barriers to, participation in those activities...

**HANDBOOK ENDS HERE**

Authority cited: Sections 1530 and 1530.5, Health and Safety Code; and Section 21 of Assembly Bill (AB) 1695 (Chapter 653, Statutes of 2001).

Reference: Sections 1501, 1501.1, 1530.6, 1531 and 1559.110~~(c)-(e)~~, Health and Safety Code; and Sections 362.04, 362.05, 727, 11403.2(a)(2), 16001.9, 16522~~(b) and 16522(d)~~, Welfare and Institutions Code.

# Chapter 9.5 Foster Family Homes Article 4 Placement

## Amend Section 89405 to read:

**89405** **TRAINING REQUIREMENTS**

(a) The caregiver is required to complete training as specified in Health and Safety Code section ~~1529.2, subsection (b)~~1522.44.

(1) The following courses, seminars, conferences, or training accepted by the licensing agency to meet the training requirements ~~in Health and Safety Code section 1529.2,~~ ~~subsections (b)(3) and (4)~~ include, but are not limited to:

(A) through (K) (Continued)

(L) A child’s right to receive sexual and reproductive health care and information.

(M) A child’s right to have their sensitive health information kept confidential.

(N) The duties and responsibilities of the assigned case management worker and the caregiver to ensure that children can obtain sexual and reproductive health services and information.

(O) Guidance about how to engage and talk with children about healthy sexual development and reproductive and sexual health in a manner that is medically accurate, age or developmentally appropriate, trauma informed, and strengths based.

(P) Information about current contraception methods and how to select and provide appropriate referral resources and materials for information and service delivery.

(b) (Continued)

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Pursuant to Welfare and Institutions Code section 16521.5, the Department of Social Services, in collaboration with the Healthy Sexual Development (HSD) Workgroup, developed California’s Plan for the Prevention of Unintended Pregnancy for Youth and Non-Minor Dependentsto provide all categories of foster caregivers, group home providers, county social workers, probation officers, and other relevant parties with the guidelines to describe the duties and responsibilities of foster care providers, county social workers and probation officers in delivering unintended pregnancy prevention services and information. The following website was developed as a result of the HSD Workgroup and contains relevant resources for providers and youth as well as California’s Plan for the Prevention of Unintended Pregnancy for Youth and Non-Minor Dependents:

<http://www.cdss.ca.gov/inforesources/Foster-Care/Healthy-Sexual-Development-Project>

Welfare and Institutions Code section 16521.5 provides:

(a) A foster care provider, in consultation with the county case manager, shall be responsible for ensuring that adolescents, including nonminor dependents, as described in subdivision (v) of Section 11400, who remain in long-term foster care, as defined by the department, receive age-appropriate pregnancy prevention information to the extent state and county resources are provided.

(b) A foster care provider, in consultation with the county case manager, shall be responsible for ensuring that a foster youth or nonminor dependent is provided with appropriate referrals to health services when the foster youth either reaches 18 years of age or the nonminor dependent exits foster care, and to the extent county and state resources are provided.

(c) As part of the home study process, the prospective foster care provider shall notify the county if he or she objects to participating in adolescent pregnancy prevention training or the dissemination of information pursuant to subdivisions (a) and (b). A licensed foster care provider shall notify the county if he or she objects to participation. If the provider objects, the county case manager shall assume this responsibility.

(d) Subdivisions (a), (b), and (c) shall not take effect until the department, in consultation with the workgroup, develops guidelines that describe the duties and responsibilities of foster care providers and county case managers in delivering pregnancy prevention services and information.

(e) (1) The department, in consultation with the State Department of Health Services, shall convene a working group for the purpose of developing a pregnancy prevention plan that will effectively address the needs of adolescent male and female foster youth. The workgroup shall meet not more than three times and thereafter shall provide consultation to the department upon request.

(2) The working group shall include representatives from the California Youth Connection, the Foster Parent’s Association, group home provider associations, the County Welfare Director’s Association, providers of teen pregnancy prevention programs, a foster care caseworker, an expert in pregnancy prevention curricula, a representative of the Independent Living Program, and an adolescent health professional.

(f) The plan required pursuant to subdivision (e) shall include, but not be limited to, all of the following:

(1) Effective strategies and programs for preteen and older teen foster youth and nonminor dependents.

(2) The role of foster care and group home care providers.

(3) The role of the assigned case management worker.

(4) How to involve foster youth and nonminor peers.

(5) Selecting and providing appropriate materials to educate foster youth and nonminors in family life education.

(6) The training of foster care and group home care providers and, when necessary, county case managers in adolescent pregnancy prevention.

(g) Counties currently mandating foster care provider training shall be encouraged to include the pregnancy prevention curricula guidelines and educational materials that may be developed by the workgroup pursuant to subdivision (f).

(h) In order to train case management workers and foster care providers, the department shall develop a curriculum that is consistent with, and in addition to, the pregnancy prevention plan and the curricula guidelines and educational materials developed by the workgroup pursuant to subdivisions (e) and (f).

(i) The curriculum created pursuant to subdivision (h) shall include, but not be limited to, all of the following:

(1) The rights of youth and nonminor dependents in foster care to sexual and reproductive health care and information, to confidentiality of sensitive health information, and the reasonable and prudent parent standard.

(2) How to document sensitive health information, including, but not limited to, sexual and reproductive health issues, in a case plan.

(3) The duties and responsibilities of the assigned case management worker and the foster care provider in ensuring youth and nonminor dependents in foster care can obtain sexual and reproductive health services and information.

(4) Guidance about how to engage and talk with youth and nonminor dependents about healthy sexual development and reproductive and sexual health in a manner that is medically accurate, developmentally and age-appropriate, trauma-informed, and strengths-based.

(5) Information about current contraception methods and how to select and provide appropriate referral resources and materials for information and service delivery.

(j) (Continued)

(k) The department shall adopt regulations to implement this section.

Health and Safety Code section 1522.44 provides in part:

(c) A licensed and certified foster parent, resource family, or facility staff member, as described in subdivision (b), shall receive training related to the reasonable and prudent parent standard that is consistent with Section 671(a)(24) of Title 42 of the United States Code. This training shall include knowledge and skills relating to the reasonable and prudent parent standard for the participation of the child in age or developmentally appropriate activities, including knowledge and skills relating to the developmental stages of the cognitive, emotional, physical, and behavioral capacities of a child, and knowledge and skills relating to applying the standard to decisions such as whether to allow the child to engage in extracurricular, enrichment, cultural, and social activities, including sports, field trips, and overnight activities lasting one or more days, and to decisions involving the signing of permission slips and arranging of transportation for the child to and from extracurricular, enrichment, and social activities.

**HANDBOOK ENDS HERE**

Authority cited: Sections 1530 and 1530.5, Health and Safety Code; and Section 21 of Assembly Bill (AB) 1695 (Chapter 653, Statutes of 2001).

Reference: Sections 1501, 1506, 1506.7, 1522.44, 1529.1, ~~1529.2,~~ 1531 and 1562, Health and Safety Code; Sections 16001.9~~,~~ and 16521.5, Welfare and Institutions Code; and Article 3.6 (commencing with Section 32228) of Chapter 2 of Part 19 of Division 1 of Title 1 of the Education Code.

# Chapter 9.5 Foster Family Homes Article 4 Placement

## Amend Section 89475 to read:

**89475** **HEALTH-RELATED SERVICES**

(a) through (e) (Continued)

(f) The caregiver shall allow access to, and assist a “child” in accessing, age-appropriate, medically accurate information as defined in Education Code section 51931(f) about reproductive health care, and the prevention, diagnosis, and treatment of pregnancy and sexually transmitted diseases and infections.

(1) The caregiver shall not create or enforce policies requiring children to practice abstinence.

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Research suggests the effects of childhood trauma may cause early development of puberty. The caregiver should be prepared to assist a “child” with accessing age-appropriate education about healthy relationships, healthy sexual development, positive gender identity, body image and safety, education about puberty, reproductive health and sexual development information at any age. Resources for these topics can be found on the Department’s Healthy Sexual Development website:

<http://www.cdss.ca.gov/inforesources/Foster-Care/Healthy-Sexual-Development-Project>

Education Code section 51931 provides in part:

(f) “Medically accurate” means verified or supported by research conducted in compliance with scientific methods and published in peer-reviewed journals, where appropriate, and recognized as accurate and objective by professional organizations and agencies with expertise in the relevant field, such as the federal Centers for Disease Control and Prevention, the American Public Health Association, the American Academy of Pediatrics, and the American College of Obstetricians and Gynecologists.

**HANDBOOK ENDS HERE**

Authority cited: Sections 1530 and 1530.5 Health and Safety Code; and Section 21 of Assembly Bill (AB) 1695 (Chapter 653, Statutes of 2001).

Reference: Sections 1501, 1501.1, 1507, 1507.2, 1507.25, 1507.5, 1530.6 and 1531, Health and Safety Code; Sections 361.2, 369.5(a)(1), ~~and~~ 739.5(a)(1)~~,~~ and 16001.9, Welfare and Institutions Code; Section 2727(a), Business and Professions Code; Section 51931(f), Education Code; and Rule 5.640, California Rule of Court**.**