



**Georgia Department of Human Services
Office of Inspector General
Residential Child Care Licensing**

CHILD-CARING INSTITUTION (CCI)
QUALIFIED RESIDENTIAL TREATMENT PROGRAM (QRTP)
COMMERCIAL SEXUAL EXPLOITATION RECOVERY CENTER (CSERC)

RULES PROVIDER POLICY CHART

Instructions: Complete the fourth column (Page Number in Policy) and indicate the specific page number within your submitted documents (application, policies and procedures, and forms) where the corresponding rule is addressed. Failure to indicate the correct page number can delay the review and processing of the application.

Important Note: This chart is not inclusive of every CCI rule and regulation. A full copy of the Child Caring Institution Rules and Regulations is located on the RCCL website. Every applicant is encouraged to save a copy and review the full copy of rules and regulations.

TAG	TITLE / RULE	RULES	PAGE # IN POLICY
0400	Governing Body. 290-2-5-.04	<p>Each Institution shall have a clearly identified governing body as required by state law that is responsible for and has authority over the Institution. The governing body shall be empowered and responsible for determining all policies and procedures and ensuring compliance with these rules and regulations. The chairperson or chief executive officer of the governing body shall complete a statement of responsibility on behalf of the governing body acknowledging the same in connection with any application for a license on a form provided by the Department. If an Institution is individually owned, then the owner(s) will complete the statement of responsibility.</p> <p>Authority: O.C.G.A. Sections 49-5-8, 49-5-12.</p>	
0500	Criminal Hx Background Checks, Licenses and Exemptions 290-2-5-.05(1)	<p>Criminal History Background Checks for Owners Required. Prior to approving any license for a new child-caring institution and periodically as established by the Department by rule and regulation, the Department shall require an owner to submit a records check application so as to permit the Department to obtain criminal history background information on the owner.</p>	
0501	Criminal Hx Background Checks, Licenses and Exemptions 290-2-5-.05(1)(a)	<p>An owner may not be required to submit a records check application if it is determined that the owner does not do at least one of the following:</p> <ol style="list-style-type: none"> 1. Maintains an office on the premises where services are provided to children; 2. Resides on the premises where services are provided to children; 3. Has direct access to residents receiving care; or 4. Provides direct personal supervision of personnel by being immediately available to provide assistance and direction during the time services are being provided to children 	
0505	Criminal Hx Background Checks, Licenses and Exemptions 290-2-5-.05(1)(b)	<p>In lieu of a records check application, an owner may submit evidence, satisfactory to the Department, that within the immediately preceding 12 months the owner has received a satisfactory criminal history background check determination.</p>	

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0506	Criminal Hx Background Checks, Licenses and Exemptions 290-2-5-.05(2)	A child-caring institution license shall not be issued, and any license issued shall be revoked where it has been determined that the owner has a criminal record involving any of the following covered crimes, as outlined in O.C.G.A. Section 49-2-14.1 <i>et seq.</i> , and the Department's decision to deny or revoke a license has not been reversed in accordance with O.C.G.A. Section 49-2-14.1.	
0522	Criminal Hx Background Checks, Licenses and Exemptions 290-2-5-.05(3)	An owner with a valid child-caring institution license who acquires a criminal record involving any of the covered crimes identified in O.C.G.A. Section 49-2-14.1 shall disclose the criminal record to the Department.	
0523	Criminal Hx Background Checks, Licenses and Exemptions 290-2-5-.05(4)	If at any time the Department has reason to believe an owner holding a valid license has a criminal record involving any of the covered crimes identified in O.C.G.A. Section 49-2-14.1, the Department shall require the owner to submit a records check application immediately for determination of whether a revocation action is necessary. Prior to the revocation of the license becoming final, the owner is entitled to an administrative hearing unless the owner has not begun providing services under the license. Where services are not currently being provided under the license, the decision of the administrative hearing officer must precede the initiation of services.	
0524	Criminal Hx Background Checks, Licenses and Exemptions 290-2-5-.05(5)	Criminal History Background Checks for Director and Employees Required. Prior to serving as a director of a licensed Institution, a person newly hired, rehired, or transferred to the director position shall submit a records check application and receive a satisfactory determination or be eligible to serve as a director as a result of an administrative hearing.	
0525	Criminal Hx Background Checks, Licenses and Exemptions 290-2-5-.05(5)(a)	A person with an unsatisfactory criminal history background check determination may not serve as a director of a licensed child-caring institution if it is determined that such person has a criminal record as identified in O.C.G.A. Section 49-5-60 and has not had an unsatisfactory determination reversed in accordance with O.C.G.A. Sections 49-5- 60 <i>et seq.</i> , and 49-5-73.	

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0531	Criminal Hx Background Checks, Licenses and Exemptions 290-2-5-.05(5)(b)	Prior to serving as an employee other than a director of a licensed Institution, a person must submit a preliminary record check application and receive a satisfactory determination. Provided however, should there be an unsatisfactory determination, the person must submit to a fingerprint record check and get a satisfactory determination or be determined eligible to be employed by the Institution as a result of an administrative hearing.	
0532	Criminal Hx Background Checks, Licenses and Exemptions 290-2-5-.05(5)(c)	A person with an unsatisfactory background check determination may not serve as an employee of a licensed child- caring institution if it is determined that such person has a criminal record as identified in O.C.G.A. Section 49-5-60 and has not had an unsatisfactory determination reversed in accordance with O.C.G.A. Sections 49-5-60 <i>et seq.</i> , and 49-5- 73.	
0533	Criminal Hx Background Checks, Licenses and Exemptions 290-2-5-.05(5)(d)	In lieu of a records check application, a director or employee may submit evidence, satisfactory to the Department, that within the immediately preceding 12 months the above personnel have received a satisfactory records check determination or a satisfactory preliminary records check determination.	
0537	Criminal Hx Background Checks, Licenses and Exemptions 290-2-5-.05(6)	Licenses. No person, partnership, association, corporation or entity shall operate a child-caring institution in the state without first obtaining a license to operate the Institution by demonstrating compliance with the necessary requirements set forth in these rules. No child-caring institution shall provide room, board and watchful oversight to more than 16 children on its premises without approval by the Department's Residential Child Care Licensing in accordance with applicable policies and procedures.	
0800	Administration and Organization. 290-2-5-.08(1)	Program Purpose. In accordance with these rules and regulations, a licensed child-caring institution shall develop, implement and comply with written policies and procedures that specify its philosophy, purpose, and program orientation. Such policies and procedures shall identify the characteristics and ages of the children it serves, including the referral sources.	

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0801	Administration and Organization. 290-2-5-.08(2)	Program Description and Implementation. In accordance with these rules and regulations, a licensed child-caring institution shall develop, implement and comply with written policies and procedures that describe the range of services including room, board and watchful oversight and the manner in which such services will be provided by the facility. Such policies and procedures shall describe how identified services will be provided, the specific emergency safety intervention plan, including the emergency safety interventions, that will be used, and how such services will be assessed and evaluated. Such policies and procedures shall describe how reasonable and prudent parenting standards will be administered. A program description must show what services are provided directly by the facility and how it will coordinate its services with those provided by any Medicaid Rehabilitation Option Provider or other available community or contract resources.	
0802	Director. 290-2-5-.08(3)	Director. The governing body of the Institution shall designate a director who shall be authorized to manage the Institution.	
0803	Director. 290-2-5-.08(3)(a)	Any director employed by the Institution shall possess at least one of the following qualifications: <ol style="list-style-type: none"> 1. A master's degree from an accredited college or university in the area of social sciences, social work, childhood education, or business or public administration or a related field plus two years of administrative or supervisory experience in a human services delivery field; 2. A bachelor's degree from an accredited college or university in the area of social sciences, social work, childhood education, or business or public administration or a related field plus four years of administrative or supervisory experience in a human services delivery field; 3. A licensed registered nurse, nurse practitioner, physician, or physician assistant where the child-caring institution chooses to serve primarily children with special medical needs. 	

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0807	Director. 290-2-5- .08(3)(b)	Any director employed by the Institution must meet the following additional minimum qualifications. <ol style="list-style-type: none"> 1. Never have been shown by credible evidence (e.g. a court or jury, a Department investigation, or other reliable evidence) to have abused, neglected, or sexually exploited a child as those terms are defined in O.C.G.A. § 15- 11-2 or to have abused, neglected, or sexually exploited an adult or to have subjected any person to serious injury as a result of intentional or grossly negligent misconduct as evidenced by an oral or written statement to this effect obtained at the time of application and evidence of having made efforts to obtain and evaluate references from previous employers; 2. Participate in the orientation and training required by these rules; and 3. Not have made any material false statements concerning qualifications requirements either to the Department or the proposed licensee. 	
0810	Director. 290-2-5- .08(3)(c)	When the director is absent from the Institution at any time, there shall be an officially designated person to assume responsibility for the operation of the Institution.	
0811	Finances. 290-2-5- .08(4)	Finances. The facility shall have sufficient funds available to pay operating costs including compensation for a sufficient number of administrative and service staff through the current year of operation and shall provide for the preparation of an annual approved budget. Copies of the current year's budget and expenditure records shall be maintained for examination and review by the Department.	
0812	Finances. 290-2-5- .08(4)(a)	The director and all persons authorized to receive or disburse operating funds shall be bonded or insured.	
0813	Finances. 290-2-5- .08(4)(b)	A schedule of fees shall be established and implemented and made available to a parent(s) or guardian(s), or representative(s) of children considered for admission to the Institution. The schedule shall detail the basic cost of services and any additional costs for other services.	
0814	Recordkeeping. 290-2-5-.08(5)	Recordkeeping. Records shall be confidential and protected from unauthorized use, fire, damage or theft. Institutions that plan to utilize electronic records for any electronic files that are subject to regulatory review shall submit written policies and procedures for review and approval by the Department. If approved by the Department, electronic records should be reasonably secure with a data recovery system to prevent data loss and maintain data integrity and accessibility.	

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0815	Recordkeeping. Case Records. 290-2-5- .08(5)(a)1.	Case Records. An Institution shall maintain written or electronic records at the Institution for each child. Case records shall include the following: 1. Identifying information including name, sex, and birth date or age; ...	
0816	Recordkeeping. Case Records. 290-2-5- .08(5)(a)2.	Case records [written or electronic for each child] shall include the following: ... 2. Date of admission and source of referral including all documents related to the referral and admission of the child to the Institution; ...	
0817	Recordkeeping. Case Records. 290-2-5- .08(5)(a)3.	Case records [written or electronic for each child] shall include the following: ... 3. Name and contact information of the parent(s) or guardian(s) or representative(s); ...	
0818	Recordkeeping. Case Records. 290-2-5- .08(5)(a)4.	Case records [written or electronic for each child] shall include the following: ... 4. Name and contact information of placing agency and agency's representative(s), if applicable; ...	
0819	Recordkeeping. Case Records. 290-2-5- .08(5)(a)5.	Case records [written or electronic for each child] shall include the following: ... 5. Documentation of current custody if not placed by biological or adoptive parents and any court documents related to placement, if applicable; ...	
0820	Recordkeeping. Case Records. 290-2-5- .08(5)(a)6.	Case records [written or electronic for each child] shall include the following: ... 6. A copy of the child's birth certificate, or an appropriate record of birth; ...	
0821	Recordkeeping. Case Records. 290-2-5- .08(5)(a)7.	Case records [written or electronic for each child] shall include the following: ... 7. Any written assessments; ...	

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0822	Recordkeeping. Case Records. 290-2-5- .08(5)(a)8.	Case records [written or electronic for each child] shall include the following: ... 8. Service plans, treatment plans and any progress notes and collateral communications with MRO and/or other service providers; ...	
0823	Recordkeeping. Case Records. 290-2-5- .08(5)(a)9.	Case records [written or electronic for each child] shall include the following: ... 9. Records of behavior management, emergency safety interventions, and written grievances, as described in Rule .14 and Rule .15; ...	
0824	Recordkeeping. Case Records. 290-2-5- .08(5)(a)10.	Case records [written or electronic for each child] shall include the following: ... 10. Documentation of health history; as required at admission; ...	
0825	Recordkeeping. Case Records. 290-2-5- .08(5)(a)11.	Case records [written or electronic for each child] shall include the following: ... 11. Medical records, including documentation of visits to physicians and dentists, records of prescriptions and administration of medicines, immunization records, and orders for modified diets; ...	
0826	Recordkeeping. Case Records. 290-2-5- .08(5)(a)12.	Case records [written or electronic for each child] shall include the following: ... 12. Educational and vocational information such as report cards, progress reports, and related materials received during a child's residency in the Institution; and...	
0827	Recordkeeping. Case Records. 290-2-5- .08(5)(a)13.	Case records [written or electronic for each child] shall include the following: ... 13. Discharge plans required by Rule .11, if applicable.	

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0828	Recordkeeping. Retention. 290-2-5- .08(5)(b)	Retention of Case Records. Case records shall be retained in the Institution for at least one year following discharge of residents.	
0829	Recordkeeping. Confidentiality. 290-2-5- .08(5)(c)1.	Confidentiality of Case Records. 1. Written policies and procedures shall be established and implemented for the maintenance and security of case records specifying who shall supervise the maintenance of records, who shall have custody of records, and to whom records may be released and for what purposes. ...	
0830	Recordkeeping. Confidentiality. 290-2-5- .08(5)(c)2.	Confidentiality of Case Records. ... 2. An Institution shall maintain the confidentiality of all children's case records. Employees of the Institution shall not disclose or knowingly permit the disclosure of any information in a case record except to appropriate child care workers, the parent(s) or guardian(s), their respective legal counsel, a court of legal jurisdiction, licensing staff, other authorized public officials in the performance of their mandated duties, or the child's placing agency.	
0831	Recordkeeping. Personnel Records. 290-2-5- .08(5)(d)1.	Personnel Records. An Institution shall maintain written or electronic records at the Institution for each employee and the director. Personnel records shall include the following: 1. Identifying information such as name, address, telephone number, and emergency contact person(s); ...	
0832	Recordkeeping. Personnel Records. 290-2-5- .08(5)(d)2.	[Written or electronic] personnel records shall include the following: ... 2. A 10-year employment history or a complete employment history if the person has not worked 10 years; ...	
0833	Recordkeeping. Personnel Records. 290-2-5- .08(5)(d)3.	[Written or electronic] personnel records shall include the following: ... 3. Records of educational qualifications; ...	
0834	Recordkeeping. Personnel Records. 290-2-5- .08(5)(d)4.	[Written or electronic] personnel records shall include the following: ... 4. Documentation of at least two professional, educational, or personal references completed prior to employment that attest to the person's capabilities of performing the duties for which they are employed and to the person's suitability of working with or around children; ...	

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0835	Recordkeeping. Personnel Records. 290-2-5- .08(5)(d)5.	[Written or electronic] personnel records shall include the following: ... 5. Satisfactory preliminary criminal history background check determination and a satisfactory fingerprint records check determination as required by law for the director, and a satisfactory determination on a preliminary records check and fingerprint records check for employees as required by law; ...	
0836	Recordkeeping. Personnel Records. 290-2-5- .08(5)(d)6.	[Written or electronic] personnel records shall include the following: ... 6. Documentation of a health screening examination completed by a licensed physician or other licensed healthcare professional sufficient in scope to identify conditions that may place children at risk of infection, injury or improper care; such examination shall be completed within thirty (30) days of hiring or within one (1) year prior to hire date; ...	
0837	Recordkeeping. Personnel Records. 290-2-5- .08(5)(d)7.	[Written or electronic] personnel records shall include the following: ... 7. Date of employment; ...	
0838	Recordkeeping. Personnel Records. 290-2-5- .08(5)(d)8.	[Written or electronic] personnel records shall include the following: ... 8. The person's job description or statements of the person's duties and responsibilities; ...	
0839	Recordkeeping. Personnel Records. 290-2-5- .08(5)(d)9.	[Written or electronic] personnel records shall include the following: ... 9. Documentation of orientation and training, including dates of all such training, as required by Rule .08(6)(d) of these rules; and ...	
0840	Recordkeeping. Personnel Records. 290-2-5- .08(5)(d)10.	[Written or electronic] personnel records shall include the following: ... 10. Documentation of the individual's performance, including annual work performance evaluations and any records of employee discipline and grievance reports described in Rule .15 related to children in care and the employee.	
0841	Staffing. 290-2-5- .08(6)	Staffing. In accordance with these rules and regulations, an Institution shall have the qualified and trained staff necessary to provide the services it is authorized to provide. All staff and volunteers shall be supervised to ensure that assigned duties are performed adequately.	

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0842	Staffing. 290-2-5- .08(6)(a)1.	All staff employed by the Institution must meet the following minimum qualifications: 1. Never have been shown by credible evidence (such as a decision of a court or jury, or a Department investigation or other reliable evidence) to have abused, neglected, or sexually exploited a child as those terms are defined in O.C.G.A. Section 15-11-2 or to have abused, neglected, or sexually exploited an adult or to have subjected any person to serious injury as a result of intentional or grossly serious injury as a result of intentional or grossly negligent misconduct as evidenced by an oral or written statement to this effect obtained at the time of application; ...	
0843	Staffing. 290-2-5- .08(6)(a)2.	All staff employed by the Institution must meet the following minimum qualifications: ... 2. Participate in the orientation and training as stated in subparagraph (d) of this Rule; and ...	
0844	Staffing. 290-2-5- .08(6)(a)3.	All staff employed by the Institution must meet the following minimum qualifications: ... 3. Not have made any material false statements concerning qualifications requirements either to the Department or the proposed licensee. ...	
0845	Staffing. 290-2-5- .08(6)(b)	Human Services Professionals. The Institution shall have designated human services professionals to provide oversight of services to children and their families in the home setting. There shall be one human services professional employed for every 16 children in care or fraction thereof. The Institution's director, if qualified by education, may perform the duties of a human services professional.	
0846	Staffing. 290-2-5- .08(6)(b)1.	Any human services professional shall either: (i) Possess a bachelor's degree from an accredited college or university in social work, psychology, childhood education, education counseling and psychology, or a related field and have two years experience in a human services delivery field as it relates to child welfare; or (ii) Possess a master's degree from an accredited college or university in one of the above disciplines.	
0848	Staffing. 290-2-5- .08(6)(c)	Child Care Workers. The Institution shall have designated child care workers to supervise children and be responsible for living units where the children reside. Any child care worker shall be at least 21 years of age and possess a high school diploma or general education diploma (GED).	
0851	Staffing. 290-2-5- .08(6)(d)	Staff Training. Prior to working with children, all staff who work with children, including the director, shall be oriented in accordance with these rules and shall thereafter periodically receive additional training in accordance with these rules.	

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0852	Staffing. 290-2-5- .08(6)(d)1.	<p>[Staff] orientation shall include instruction in:</p> <ul style="list-style-type: none"> (i) The Institution's purpose and description of services and its policies and procedures; (ii) The employee's assigned duties and responsibilities; (iii) Grievance policies and procedures; (iv) Child abuse policies and procedures; (v) Reporting requirements for suspected cases of child abuse and sexual exploitation and notifiable diseases and serious injuries; (vi) The Institution's policies and procedures for handling medical emergencies (life-threatening, limb-threatening, or function-threatening conditions), and managing use of medications by children in care; and (vii) The Institution's policies and procedures regarding appropriate behavior management and emergency safety interventions. 	
0859	Staffing. 290-2-5- .08(6)(d)2.(i)	<p>Additional training shall include:</p> <ul style="list-style-type: none"> (i) Evidence of current certification in first aid and in cardiopulmonary resuscitation (CPR) that includes an in-person skill session; such certifications shall be obtained from a certified or licensed health care professional; the initial certifications shall occur within the first 60 days of employment, if the employee is not currently certified; and ... 	
0860	Staffing. 290-2-5- .08(6)(d)2.(ii)	<p>Additional training shall include: ...</p> <ul style="list-style-type: none"> (ii) Twenty-four (24) clock hours of formal, annual training or instruction in child care issues related to the employee's job assignment and to the types of services provided by the Institution; such trainings shall not include first aid, cardiopulmonary resuscitation (CPR), or emergency safety intervention (ESI) training. 	
0861	Staffing. 290-2-5- .08(6)(e)	<p>All child care workers shall have at least one full day (24 hours) off each week and shall have at least two consecutive days off each month.</p>	

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0862	Reporting. 290-2-5- .08(7)	<p>Reporting. Detailed written summary reports shall be made to the Department's Residential Child Care Licensing unit electronically within 24 hours of a serious occurrence involving children in care, including but not limited to:</p> <ul style="list-style-type: none"> (a) Accidents or injuries requiring medical treatment and/or hospitalization; (b) Death; (c) Suicide attempts; (d) Closure of the living unit due to disaster or emergency situations such as fires or severe weather; (e) Emergency safety interventions resulting in any injury; (f) Any incident which results in any federal, state or private legal action by or against the Institution which affects any child or the conduct of the Institution; however, legal action involving the juvenile justice system is not required to be reported; and (g) Any illness of children or illness of facility staff having personal contact with children in care known to have resulted from an identified pandemic or infectious disease outbreak. 	
0870	Child Abuse Reports. 290-2-5- .08(8)	<p>Child Abuse Reports. Whenever the child-caring institution has reason to believe that a child in care has been subjected to child abuse it shall cause a report of such abuse to be made to the Department of Human Services (Division of Family and Children Services, Child Protective Services) or in the absence of such to an appropriate police authority or district attorney in accordance with the requirements of O.C.G.A. Sec. 19-7-5. A copy of such report shall also be filed with the Department of Human Services Residential Child Care Licensing.</p> <p>Authority: O.C.G.A. Sections 49-5-8, 49-5-12.</p>	
0900	Referral and Admission. 290-2-5- .09(1)	<p>Referrals. An Institution shall only accept referrals for children whose known needs can be met by the Institution in accordance with its program purpose and program description.</p>	
0901	Referral and Admission. 290-2-5- .09(1)(a)	<p>Referral agreements with any public or private agencies that place children in the Institution shall be in writing and shall include the following provisions and requirements.</p> <ol style="list-style-type: none"> 1. Preplacement assessment and planning with the placing agency regarding the Institution's abilities to meet the needs of the child shall be done. To the degree possible, all relevant information required for admission to the facility shall be reviewed in preplacement assessment and planning. 2. To the degree possible, there shall be a preplacement visit by the child, and the parent(s) or guardian(s), or placing agency representative if there is a reasonable likelihood that the child will be admitted. 	

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0904	Referral and Admission. 290-2-5-.09(1)(b)	Referrals from any persons other than placing agencies (such as a parent or guardian) shall be handled in the same manner as described above for referrals from placing agencies.	
0905	Referral and Admission. 290-2-5-.09(2)	Admissions. An Institution shall only admit children whose known needs can be met by the Institution based on preplacement assessment, planning and room, board and watchful oversight capacity.	
0906	Referral and Admission. 290-2-5-.09(2)(a)	A child under the age of six (6) shall not be admitted to an Institution, unless the child is a member of a sibling group with at least one of the siblings being 6 years of age or older who will reside in the Institution, or the mother who is under the age of 19 and her child are placed in the home together. Where a child under the age of six (6) is admitted, the child- caring institution shall provide developmentally-appropriate sleeping facilities, diapering facilities and daily child-care arrangements.	
0907	Referral and Admission. 290-2-5-.09(2)(b)	Prior to admission, the facility shall: <ol style="list-style-type: none"> 1. Provide information to the custodian about the services, environment, age ranges and behavioral characteristics of the other children in placement. 2. Maintain signed documentation from the custodian that they have received and considered the information provided in Rule .09(1)(a)1 above and have determined that the placement environment is appropriate and does not represent an undue risk to the health and safety of the child or children being placed. 	
0909	Referral and Admission. 290-2-5-.09(2)(c)	The facility shall comply with the Interstate Compact on Placement when admitting children from another state.	
0910	Referral and Admission. 290-2-5-.09(2)(d)	Written admission policies and procedures shall be established and implemented and shall include the following provisions or requirements. ...	
0911	Referral and Admission. 290-2-5-.09(2)(d)1.	[Admission policies and procedures] shall include the following provisions or requirements. ... <ol style="list-style-type: none"> 1. An intake referral form that includes a social, health, educational, family, behavioral and personal developmental history, shall be done to determine the placement and room, board and watchful oversight needs (services, supports, setting, etc.) of each child and whether that placement is appropriate.... 	

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0912	Referral and Admission. 290-2-5-.09(2)(d)2.	[Admission policies and procedures] shall include the following provisions or requirements. ... 2. A completed written placement agreement shall be developed with the involvement of the child, and the parent(s) or guardian(s), or placing agency representative and signed by all parties; such agreement shall include the following: (i) Written authorization to care for the child; (ii) Written authorization to obtain medical care for the child; (iii) Written summary of discussions among the child and the parent(s) or guardian(s), or placing agency, and the Institution's human services professional regarding basic care, any specialized services to be provided, room, board and watchful oversight, the description of the Institution as outlined in Rule .09(2)(b); and involvement of the parent(s) or guardian(s), or the placing agency in service planning.	
0916	Referral and Admission. 290-2-5-.09(2)(e)	A written description of the Institution shall be provided to the child, the parent(s) or guardian(s), or placing agency and shall include: 1. The Institution's program purpose and program description; 2. The description of service planning and normal daily routines of children; 3. The description of health services including how the Institution handles illnesses, injuries, and medical emergencies (life-threatening, limb-threatening, and function-threatening conditions); 4. The Institution's policies and procedures for behavior management and grievances; 5. Policies and procedures for visiting hours and communications with persons outside the Institutions; 6. The names and telephone numbers of the child's designated human services professional and primary child care worker; and 7. Schedule of fees if placement is not done under a Purchase of Service Agreement.	
0923	Referral and Admission. 290-2-5-.09(2)(f)	Emergency Admissions. In situations that require emergency admission to an Institution and when completion of the intake referral form, as described in Rule .09(1)(a)1, and intake evaluation and placement agreements, as described in Rules .09(2)(d) are not possible, the Institution shall obtain as much information as possible about the child to be admitted, and as much information as possible about the circumstances requiring admission. Such information shall be obtained from the referring person(s) or entity(ies) within 72 hours. When all the information to complete the intake referral form is not available, a health assessment shall be scheduled within 24 hours of emergency admission. Authority: O.C.G.A. Sections 49-5-8, 49-5-12.	

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1000	Assessment and Planning. 290-2-5-.10	An Institution shall complete a full written assessment of each child admitted for care and of each child's family within thirty days of admission and develop an individual written service plan for each child based on the assessments within thirty days of admission. If an assessment is not completed within thirty days, the reasons for the delay shall be documented in the child's case record and such documentation shall include statements indicating when the assessment is expected to be completed.	
1001	Assessment and Planning. 290-2-5-.10(a)	The facility's admission evaluation shall be coordinated by the child's designated human services professional. The facility shall assess the needs of the child in the areas of health care, room, board and watchful oversight, education, family relationships, personal, social and vocational development, and any behavioral issues that require monitoring. <ol style="list-style-type: none"> 1. This assessment is intended to expand upon the initial intake evaluation required by Rule .09(1)(a)1; 2. The Institution shall obtain the child's school records from the last school attended in order to complete the education needs component of the assessment. 	
1003	Assessment and Planning. 290-2-5-.10(b)	A service and room, board and watchful oversight plan shall be developed by the child's human services professional in concert with the child's primary child care worker, meaning the worker who has responsibility for supervision of the child in the living unit where the child resides. The plan shall contain the following information: <ol style="list-style-type: none"> 1. The results of the assessment and identified needs; 2. Statements of time-limited goals and objectives for the child and family and methods of achieving them and evaluating them; 3. Statements of activities to be followed by the child and staff members in pursuit of the stated goals and objectives; 4. Statements of any special care and services that will be arranged for or provided directly; 5. Statements of goals and preliminary plans for discharge; 6. Statements about the types of discipline that should be employed when necessary; and 7. Statements of any visitation plans of the child with the biological family, including siblings, and fictive kin; any restrictions of communication or visitation with any persons shall clearly show that the health, safety, and welfare of the child would be adversely affected by such communications or visits. 	
1010	Assessment and Planning. 290-2-5-.10(c)	The child, and the parent(s) or guardian(s), or child-placing agency representative shall be involved in the development of the service and room, board and watchful oversight plans, and its periodic updates as described below.	

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1011	Assessment and Planning. 290-2-5-.10(d)	<p>The service and room, board and watchful oversight plan shall be updated by the human services professional at a minimum of every six months and pertinent progress notes and data shall be incorporated in the plan to measure attainment of stated goals and objectives.</p> <ol style="list-style-type: none"> 1. The child's primary child care worker shall participate in updating the service and room, board and watchful oversight plan. 2. The facility shall be responsible for implementing the service and room, board and watchful oversight plan. <p>Authority: O.C.G.A. Sections 49-5-8, 49-5-12.</p>	
1100	Discharge and Aftercare. 290-2-5-.11(1)	<p>During a child's placement in an Institution, the preliminary plans for discharge required by Rule .10(b)5 shall be adjusted according to the child's circumstances. At least three months prior to planned discharge, except in cases of emergency discharges, an Institution shall formulate an aftercare plan that identifies the supports, room, board and watchful oversight summary and resources that the child and child's family are expected to need following discharge. When a child is being discharged for placement in another Institution or similar program, the receiving Institution or program, except in cases of emergency discharges, shall be given at least thirty days notice of the proposed date of placement.</p>	
1101	Discharge and Aftercare. 290-2-5-.11(2)	<p>Emergency discharges are authorized when the health, safety and room, board and watchful oversight needs of a child or other children in residence might be endangered by the child's further placement in the Institution. At least 72 hours of prior notice of discharge shall be provided to the parent(s) or guardian(s), or placement agency. If such notice is not possible, the reason for the inability to provide the required notice shall be documented in the child's case record.</p>	
1102	Discharge and Aftercare. 290-2-5-.11(3)	<p>When a child is discharged, an Institution shall compile a complete written discharge summary within thirty days of the discharge. Such summary shall include:</p> <ol style="list-style-type: none"> (a) The name, address, telephone number and relationship of the person or entity to whom the child was discharged, or the name of the placing agency if discharged to a placement agency; (b) A summary of all the services and room, board and watchful oversight activities provided for the child to meet assessed needs while the child was in the Institution; (c) A summary of the child's and the family's goals and objectives and accomplishments during care; (d) A summary of any problems encountered by the child and the family during care; and (e) A summary of assessed needs which were not met during care, and a summary of the reasons why they were not met. 	

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1107	Discharge and Aftercare. 290-2-5-.11(4)	A copy of the completed discharge summary shall be made available to the child's parent(s) or guardian(s), or placement agency representative when it is completed. Authority: O.C.G.A. Sections 49-5-3, 49-5-8	
1200	Child Care Services. 290-2-5-.12(1)	The Institution shall have sufficient numbers of qualified and trained staff to provide for the room, board and watchful oversight of children in accordance with Rule .08(6). Staff and volunteers shall adequately provide for the needs, protection, well-being and supervision of residents.	
1201	Child Care Services. 290-2-5-.12(2)	Casework Services. All children in care and families of children in care shall receive case work services as provided in their service plan from their assigned human services professional or other appropriate professionals (internal and external of facility) who shall meet with and counsel with the children. The results of such counseling shall be recorded in the children's case records. The purpose of such services is to identify and monitor the children's and families' progress relative to the needs, goals and objectives identified in child care assessments and service plans and to discuss any problems being encountered by or with the children in care.	
1202	Child Care Services. 290-2-5-.12(3)	Educational and Vocational Services. An Institution shall not admit a child unless an educational program commensurate with the specific educational and vocational needs of the child can be provided.	
1203	Child Care Services. 290-2-5-.12(3)(a)	Provisions shall be made for mandatory education of all children in care in accordance with O.C.G.A. 20-2-690 <i>et seq.</i> , or its successor statute. For purpose of these rules, an on-campus school is defined as a private school, and must be in compliance with the above law.	
1204	Child Care Services. 290-2-5-.12(3)(b)	A child's assigned human services professional shall monitor the child's educational or vocational progress in the course of providing case work services and planning. Progress reports, such as report cards, and other records or documentation of a child's educational or vocational performance while residing in the Institution shall be maintained in the child's case record.	
1205	Child Care Services. 290-2-5-.12(3)(c)	Children attending public schools who wish to participate in extracurricular activities shall be provided such reasonable opportunities by the Institution in accordance with the child's service plan.	

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1206	Child Care Services. 290-2-5-.12(3)(d)	Children's daily activities as stated in their service plans shall provide for study time during the periods the children are attending school.	
1207	Health Services. 290-2-5-.12(4)	Health Services. The facility shall provide for a comprehensive program of preventive, routine, and emergency medical and dental care for all children. Arrangements shall be made with at least one physician and one dentist or a health care agency that provides medical and dental care for children.	
1208	Health Services. 290-2-5-.12(4)(a)	Within thirty days of admission, the human services professional shall ensure an assessment of the children's medical and dental health has been completed.	
1209	Health Services. 290-2-5-.12(4)(a)1.	A comprehensive physical examination of a child shall be provided within 10 calendar days of admission unless such an examination has been completed within one year prior to admission.	
1210	Health Services. 290-2-5-.12(4)(a)1.(i)	Such examination shall be completed by a medical doctor, physician assistant, nurse practitioner or public health department and shall include immunization status, vision and hearing screenings, in addition to, basic diagnostic laboratory testing, when recommended by a physician.	
1211	Health Services. 290-2-5-.12(4)(a)1.(ii)	Required Immunization. All children shall have current immunizations as outlined in Rules and Regulations of the Department of Public Health, Immunization of School Children, Chapter 511-2-2 <i>et seq.</i> , or its successor rule.	
1212	Health Services. 290-2-5-.12(4)(a)2.	A general dental examination of a child over the age of 12 months shall be provided within 30 days of admission unless such an examination has been completed within six months prior to admission. Such examinations shall be completed by either a dentist or a licensed dental hygienist.	
1213	Health Services. 290-2-5-.12(4)(b)	An Institution shall ensure that children continue to receive timely, qualified medical, dental, and follow-up care as recommended by a licensed medical professional when they are ill or injured or when there is a reasonable likelihood that qualified medical and dental care is needed. The Institution shall take appropriate safety precautions to ensure that underlying medical conditions are not exacerbated or infections not transmitted to others when indicated by the medical condition of the child. Children shall receive annual medical check-ups at least every 12 months and semiannual dental check-ups at least every 6 months.	

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1214	Health Services. 290-2-5-.12(4)(c)	An Institution shall ensure that children receive timely, qualified medical care in cases of medical emergencies (life- threatening, limb-threatening, or function-threatening conditions). Policies shall be in place for the emergency medical care of children with a local hospital or other health care facility that provides emergency services or with a local physician.	
1215	Health Services. 290-2-5-.12(4)(d)	Medications. The Institution shall develop and implement policies and procedures for the use and management of all types of medications. All child care workers shall receive orientation on the policies and procedures. Such policies and procedures shall include the following:	
1216	Health Services. 290-2-5-.12(4)(d)1.	[Medication use and management] policies and procedures shall include the following: ... 1. Non-prescription medications. No child shall be given a non-prescription medication by staff members of the Institution unless the child exhibits symptoms that the medication is designed to relieve....	
1217	Health Services. 290-2-5-.12(4)(d)2.	[Medication use and management] policies and procedures shall include the following: ... 2. Prescription medications. No child shall be given a prescription medication unless the medication is prescribed for the child by an authorized health care professional. ...	
1218	Health Services. 290-2-5-.12(4)(d)2.i.	[Medication use and management] policies and procedures shall include the following: ... 2. (i) Prescription medications shall only be given to a child as ordered in the child's prescription. An Institution shall not permit such medications prescribed for one child to be given to any other child. ...	
1219	Health Services. 290-2-5-.12(4)(d)2.ii.	[Medication use and management] policies and procedures shall include the following: ... 2. (ii) A child's attending physician shall be notified in cases of dosage errors, drug reactions, or if the prescription medication does not appear to be effective....	
1220	Health Services. 290-2-5-.12(4)(d)3.	[Medication use and management] policies and procedures shall include the following: ... 3. Psychotropic medications. No child shall be given psychotropic medications unless use is in accordance with the goals and objectives of the child's service plan developed by an external physician and/or MRO provider. ...	
1221	Health Services. 290-2-5-.12(4)(d)3.i.	[Medication use and management] policies and procedures shall include the following: ... 3. (i) Psychotropic medications must be prescribed by an external physician or MRO provider who has responsibility for the diagnosis and treatment of the child's conditions that necessitate such medication. Continued use of psychotropic medications shall be reviewed by the external prescribing Physician and/or MRO provider every sixty days. ...	

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1222	Health Services. 290-2-5-.12(4)(d)3.ii.	[Medication use and management] policies and procedures shall include the following: ... 3. (ii) Psychotropic medication shall only be given to a child as ordered in the child's prescription. An Institution shall not permit such medications prescribed for one child to be given to another child. ...	
1223	Health Services. 290-2-5-.12(4)(d)3.iii.	[Medication use and management] policies and procedures shall include the following: ... 3. (iii) The external prescribing physician and/or MRO provider shall be notified in cases of dosage errors, drug reactions, or if the psychotropic medication does not appear to be effective. ...	
1224	Health Services. 290-2-5-.12(4)(d)4.	[Medication use and management] policies and procedures shall include the following: ... 4. An Institution shall designate and authorize classes of staff, such as child care workers, to hand out medications and supervise the taking of medications. Only designated and authorized staff shall hand out and supervise the taking of medication. ...	
1225	Health Services. 290-2-5-.12(4)(d)5.	[Medication use and management] policies and procedures shall include the following: ... 5. An Institution shall maintain a record of all medications administered by staff to include: name of child taking medication; name of prescribing physician and date of prescription (if the medication is prescription or psychotropic); required dosage; date and time taken, refused, or missed; dosage taken; and name and signature of staff member responsible for administering the medication. ...	
1226	Health Services. 290-2-5-.12(4)(d)6.	[Medication use and management] policies and procedures shall include the following: ... 6. All prescription and non-prescription medications shall be kept in a locked storage cabinet or container which is not accessible to residents and stored separate from cleaning chemicals and supplies or poisons. The keys to the locked cabinets or containers shall not be accessible to residents. ...	
1227	Health Services. 290-2-5-.12(4)(d)7.	[Medication use and management] policies and procedures shall include the following: ... 7. All expired medications shall be discarded and not handed out for use.	
1228	Recreation and Leisure. 290-2-5-.12(5)	Recreation and Leisure. The Institution shall provide for a program of indoor and outdoor recreational and leisure activities. When providing these activities, the Institution shall utilize the community's cultural, social, and recreational resources whenever possible and appropriate. Children's activities as stated in their service plans shall provide for leisure and recreational time. An Institution shall procure and maintain a variety of recreational and leisure equipment and supplies such as games, sporting equipment, reading materials, and art supplies.	
1229	Other Services. 290-2-5-.12(6)(a)	Other Services. The Institution shall ensure that all children have adequate, properly fitting, seasonable clothing as required for health, comfort and physical well-being. Clothes shall be appropriate to age, gender, and individual needs.	

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1230	Other Services. 290-2-5-.12(6)(b)	Daily routines of children shall provide for appropriate personal care, hygiene, and grooming commensurate with age, gender, and cultural heritage. All necessary toiletry items and supplies, such as soap, shampoo, hair brushes, tooth brushes and paste, deodorant, and bath towels, shall be provided.	
1231	Other Services. 290-2-5-.12(6)(c)	Children shall not be held solely responsible for performing work duties such as food preparation, laundering, housekeeping, or facility maintenance. Children shall not be considered substitutes for employed staff.	
1232	Other Services. 290-2-5-.12(6)(d)	Children shall not be used for the purpose of soliciting funds for the Institution, nor shall children be used in connection with any advertisement or publicity without the consent of the child and the parent(s) or guardian(s).	
1233	Other Services. 290-2-5-.12(6)(e)	Children shall be permitted to participate in religious and cultural activities in accordance with their cultural and ethnic heritage.	
1234	Other Services. 290-2-5-.12(6)(f)	No resident shall be responsible for the care of another resident. In accordance with his or her service plan, a parenting youth can assume responsibility for his or her child(ren). Authority: O.C.G.A. Sections 20-2-690 <i>et seq.</i> , 49-5-8, 49-5-12.	
1300	Qualified Residential Tx Program. 290-2-5-.13(1)	Qualified Residential Treatment Programs. Qualified residential treatment programs must meet all rule requirements for licensing as a child-caring institution in addition to all requirements in Rule .13.	
1301	Qualified Residential Tx Program. 290-2-5-.13(2)(a)	A qualified residential treatment program shall meet the requirements set forth below: (a) Designation Requirements. The Institution shall be designated as a child-caring institution licensed by the Department of Human Services Residential Child Care Licensing. ...	

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1302	Qualified Residential Tx Program. 290-2-5-.13(2)(b)1.	<p>A qualified residential treatment program shall meet the requirements set forth below: ...</p> <p>(b) The Institution shall be accredited by any of the following independent, not-for-profit organizations and maintain such accreditation:</p> <ol style="list-style-type: none"> 1. The Commission on Accreditation of Rehabilitation Facilities (CARF); 2. The Joint Commission on Accreditation of Healthcare Organizations (JCAHO); 3. The Council on Accreditation (COA); or 4. Any other independent, not-for-profit accrediting organization approved by the Secretary of Health and Human Services. ... 	
1303	Qualified Residential Tx Program. 290-2-5-.13(2)(c)	<p>A qualified residential treatment program shall meet the requirements set forth below: ...</p> <p>(c) The Institution shall have a trauma-informed treatment model designed to address the needs of children in the program. The treatment model shall be approved by the Department's Division of Family and Children Services. ...</p>	
1304	Qualified Residential Tx Program. 290-2-5-.13(2)(d)	<p>A qualified residential treatment program shall meet the requirements set forth below: ...</p> <p>(d) The Institution shall be equipped to meet the clinical needs, as appropriate, of children with serious emotional or behavioral disorders or disturbances, as appropriate for the Institution's residential treatment license. ...</p>	
1305	Qualified Residential Tx Program. 290-2-5-.13(2)(e)	<p>A qualified residential treatment program shall meet the requirements set forth below: ...</p> <p>(e) The Institution shall be equipped to implement the necessary treatment for a child that is identified by an assessment to determine appropriateness of placement in the program. ...</p>	
1306	Qualified Residential Tx Program. 290-2-5-.13(2)(f)	<p>A qualified residential treatment program shall meet the requirements set forth below: ...</p> <p>(f) The Institution shall have registered or licensed nursing staff and other licensed clinical staff who:</p> <ol style="list-style-type: none"> 1. Provide care within the scope of their practice as allowed by applicable law or a professional certification or license; 2. Are onsite according to the qualified residential treatment program treatment model; and 3. Are available twenty-four (24) hours a day and seven (7) days a week. 	
1307	Qualified Residential Tx Program. 290-2-5-.13(3)	<p>Admissions. An Institution shall document an initial qualified residential treatment program assessment made by a qualified individual that determines the appropriateness of placement of a child in a qualified residential treatment program. The initial qualified residential treatment program assessment shall be completed prior to the child's placement in a qualified residential treatment program, but no later than 30 days following the start of such placement.</p>	

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1308	Qualified Residential Tx Program. 290-2-5-.13(4)	<p>Family Engagement Plan. An Institution shall:</p> <ul style="list-style-type: none"> (a) To the extent appropriate, and in accordance with the child’s best interests, facilitate participation of family members in the child’s treatment program; (b) Facilitate outreach to the family members of the child, including siblings; document how the outreach is made, including contact information, and maintain contact information for any known biological family and fictive kin of the child; and (c) Document how family members are integrated into the treatment process for the child, including post-discharge, and how sibling connections are maintained. 	
1309	Qualified Residential Tx Program. 290-2-5-.13(5)	An Institution shall provide discharge planning and family-based aftercare support for at least six months post-discharge.	
1310	Qualified Residential Tx Program. 290-2-5-.13(6)	<p>Application. An application for the issuance of an initial license to operate a qualified residential treatment program shall be made in writing on forms provided by the Department, signed by the person seeking authority to operate the Institution and include at least the following information:</p> <ul style="list-style-type: none"> (a) Verification of accreditation, in accordance with Rule .13(2)b; (b) Documentation of policies and procedures regarding the approved trauma informed care model; (c) A written statement that the Institution has access to nursing staff and clinical staff, in accordance with Rule.13(2)f; (d) Documentation of policies and procedures regarding family engagement; and (e) Documentation of policies and procedures regarding the discharge plan and family-based aftercare support. 	
1311	Qualified Residential Tx Program. 290-2-5-.13(7)	The Department may conduct site visits, a review of records, and interviews with staff and residents as part of a review and assessment of application materials and compliance with applicable licensing rules and regulations.	
1312	Qualified Residential Tx Program. 290-2-5-.13(8)	Upon receipt of all application documents and information, the Department shall review and determine if all requirements are met for designation as a qualified residential treatment program.	

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1313	Qualified Residential Tx Program. 290-2-5-.13(9)	The Department may request additional supporting documentation or information to demonstrate compliance with licensing requirements for child-caring institutions along with requirements for designation as a qualified residential treatment program. Authority: O.C.G.A. Sections 49-5-8, 49-5-12, 15-11-2, 15-11-201, 15-11-219, 15-11-220, 15-11-231.	
1400	Behavior Management. 290-2-5-.14(1)(a)	Behavior Management. Every Institution shall develop and implement policies and procedures on behavior management. Such policies and procedures shall set forth the anticipated behavioral problems of the children and acceptable methods of managing such problems.	
1401	Behavior Management. 290-2-5-.14(1)(b)1.	Such behavior management policies and procedures shall incorporate the following minimum requirements: 1. Behavior management principles and techniques shall be used in accordance with the individual service plan and written policies and procedures governing service expectations, service plan goals, safety, security, and these rules and regulations. ...	
1402	Behavior Management. 290-2-5-.14(1)(b)2.	Behavior management policies and procedures shall incorporate the following minimum requirements: ... 2. Behavior management shall be limited to the least restrictive appropriate method, as described in the child's service plan pursuant to Rule .10(b)6 and in accordance with the prohibitions as specified in these rules and regulations.	
1403	Behavior Management. 290-2-5-.14(1)(c)1.	The following forms of behavior management shall not be used: 1. Assignment of excessive or unreasonable work tasks; ...	
1404	Behavior Management. 290-2-5-.14(1)(c)2.	The following forms of behavior management shall not be used: ... 2. Denial of meals and hydration; ...	
1405	Behavior Management. 290-2-5-.14(1)(c)3.	The following forms of behavior management shall not be used: ... 3. Denial of sleep; ...	

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1406	Behavior Management. 290-2-5-.14(1)(c)4.	The following forms of behavior management shall not be used: ... 4. Denial of shelter, clothing, or essential personal needs; ...	
1407	Behavior Management. 290-2-5-.14(1)(c)5.	The following forms of behavior management shall not be used: ... 5. Denial of essential program services; ...	
1408	Behavior Management. 290-2-5-.14(1)(c)6.	The following forms of behavior management shall not be used: ... 6. Verbal abuse, ridicule, or humiliation; ...	
1409	Behavior Management. 290-2-5-.14(1)(c)7.	The following forms of behavior management shall not be used: ... 7. Chemical restraint, manual holds, and seclusion used as a means of coercion, discipline, convenience, or retaliation; ...	
1410	Behavior Management. 290-2-5-.14(1)(c)8.	The following forms of behavior management shall not be used: ... 8. Denial of communication and visits unless restricted in accordance with Rule .10(b)7; ...	
1411	Behavior Management. 290-2-5-.14(1)(c)9.	The following forms of behavior management shall not be used: ... 9. Corporal punishment; and ...	
1412	Behavior Management. 290-2-5-.14(1)(c)10.	The following forms of behavior management shall not be used: ... 10. Seclusion not used appropriately as an emergency safety intervention.	
1413	Behavior Management. 290-2-5-.14(1)(d)	Residents shall not be permitted to participate in the behavior management of other residents or to discipline other residents. A parenting resident may participate in the behavior management of his or her own child under staff supervision and in accordance with the parenting resident's individual service plan.	
1414	Behavior Management. 290-2-5-.14(1)(e)	Institutions shall submit to the Department electronically a report within 24 hours whenever an unusual incident occurs regarding behavior management, including any injury that is received by a child as a result of any behavior management.	

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1415	Behavior Management. 290-2-5-.14(1)(f)	All forms of behavior management used by an employee or director shall also be documented in case records in order to ensure that such records reflect behavior management problems.	
1416	Emergency Safety Interventions. 290-2-5-.14(2)(a)	Emergency Safety Interventions. Emergency safety interventions may be used only by staff trained in the proper use of such interventions when a child exhibits a dangerous behavior reasonably expected to lead to immediate physical harm to the child or others and less restrictive means of dealing with the injurious behavior have not proven successful or may subject the child or others to greater risk of injury.	
1417	Emergency Safety Interventions. 290-2-5-.14(2)(b)	Emergency safety interventions shall not include the use of any physical or chemical restraint or manual hold that would potentially impair the child's ability to breathe or has been determined to be inappropriate for use on a particular child due to a medical or behavioral condition. Emergency safety interventions shall not be used on residents who are pregnant or who are younger than six (6) years old.	
1418	Emergency Safety Interventions. 290-2-5-.14(2)(c)	The Institution shall have and comply with written policies and procedures for the use of emergency safety interventions, a copy of which shall be provided to and discussed with each child and the child's parents and/or legal guardians prior to or at the time of admission. Emergency safety interventions policies and procedures shall include: ...	
1419	Emergency Safety Interventions. 290-2-5-.14(2)(c)1.	Emergency safety interventions policies and procedures shall include: ... 1. Provisions for the documentation of assessments (which will include social, emotional, behavioral and room, board and watchful oversight needs) at admission and at each annual exam by the child's physician, a physician assistant, a nurse practitioner or a registered nurse with advanced training working under the direction of a physician, or a public health clinic that states there are no medical issues that would be incompatible with the appropriate use of emergency safety interventions on that child. Such assessments and documentation must be re-evaluated following any significant change in the child's medical condition; and ...	

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1420	Emergency Safety Interventions. 290-2-5-.14(2)(c)2.	Emergency safety interventions policies and procedures shall include: ... 2. Provisions for the documentation of each use of an emergency safety intervention including: (i) Date and description of the precipitating incident; (ii) Description of the de-escalation techniques used prior to the emergency safety intervention, if applicable; (iii) Environmental considerations; (iv) Names of staff participating in the emergency safety intervention; (v) Any witnesses to the precipitating incident and subsequent intervention; (vi) Exact emergency safety intervention used; (vii) Documentation of the 15 minute interval visual monitoring of a child in seclusion; (viii) Beginning and ending time of the intervention; (ix) Outcome of the intervention; (x) Detailed description of any injury arising from the incident or intervention; and (xi) Summary of any medical care provided. ...	
1429	Emergency Safety Interventions. 290-2-5-.14(2)(c)3	Emergency safety interventions policies and procedures shall include: ... 3. Provisions for prohibiting manual hold use by any employee not trained in prevention and use of emergency safety interventions.	
1430	Emergency Safety Interventions. 290-2-5-.14(2)(d)	Emergency safety interventions or the use of physical or chemical restraints may be used to prevent runaways only when the child presents an imminent threat of physical harm to self or others, or as specified in the individual service and room, board and watchful oversight plan.	
1431	Emergency Safety Interventions. 290-2-5-.14(2)(e)	Facility staff shall be aware of each child's medical and behavioral conditions, as evidenced by written acknowledgement of such awareness, to ensure that the emergency safety intervention that is utilized does not pose any undue danger to the health and well-being of the child.	
1432	Emergency Safety Interventions. 290-2-5-.14(2)(f)	Residents shall not be allowed to participate in the emergency safety intervention of another resident.	
1433	Emergency Safety Interventions. 290-2-5-.14(2)(g)	Immediately following the conclusion of the emergency safety intervention and hourly thereafter for a period of at least four hours where the child is with a staff member, the child's behavior will be assessed, monitored, and documented to ensure that the child does not appear to be exhibiting symptoms that would be associated with an injury.	

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1434	Emergency Safety Interventions. 290-2-5-.14(2)(h)1.	At a minimum, the emergency safety intervention program that is utilized shall include the following: 1. Techniques for de-escalating problem behavior including child and staff debriefings; ...	
1435	Emergency Safety Interventions. 290-2-5-.14(2)(h)2.	At a minimum, the emergency safety intervention program that is utilized shall include the following: ... 2. Appropriate use of emergency safety interventions; ...	
1436	Emergency Safety Interventions. 290-2-5-.14(2)(h)3.	At a minimum, the emergency safety intervention program that is utilized shall include the following: ... 3. Recognizing aggressive behavior that may be related to a medical condition; ...	
1437	Emergency Safety Interventions. 290-2-5-.14(2)(h)4.	At a minimum, the emergency safety intervention program that is utilized shall include the following: ... 4. Awareness of physiological impact of a restraint on the child; ...	
1438	Emergency Safety Interventions. 290-2-5-.14(2)(h)5.	At a minimum, the emergency safety intervention program that is utilized shall include the following: ... 5. Recognizing signs and symptoms of positional and compression asphyxia and restraint associated cardiac arrest; ...	
1439	Emergency Safety Interventions. 290-2-5-.14(2)(h)6.	At a minimum, the emergency safety intervention program that is utilized shall include the following: ... 6. Instructions as to how to monitor the breathing, verbal responsiveness, and motor control of a child who is the subject of an emergency safety intervention; ...	
1440	Emergency Safety Interventions. 290-2-5-.14(2)(h)7.	At a minimum, the emergency safety intervention program that is utilized shall include the following: ... 7. Appropriate self-protection techniques; ...	

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1441	Emergency Safety Interventions. 290-2-5-.14(2)(h)8.	At a minimum, the emergency safety intervention program that is utilized shall include the following: ... 8. Policies and procedures relating to using manual holds, including the prohibition of any technique that would potentially impair a child's ability to breathe; ...	
1442	Emergency Safety Interventions. 290-2-5-.14(2)(h)9.	At a minimum, the emergency safety intervention program that is utilized shall include the following: ... 9. Facility policies and reporting requirements; ...	
1443	Emergency Safety Interventions. 290-2-5-.14(2)(h)10.	At a minimum, the emergency safety intervention program that is utilized shall include the following: ... 10. Alternatives to restraint; ...	
1444	Emergency Safety Interventions. 290-2-5-.14(2)(h)11.	At a minimum, the emergency safety intervention program that is utilized shall include the following: ... 11. Avoiding power struggles; ...	
1445	Emergency Safety Interventions. 290-2-5-.14(2)(h)12.	At a minimum, the emergency safety intervention program that is utilized shall include the following: ... 12. Escape and evasion techniques; ...	
1446	Emergency Safety Interventions. 290-2-5-.14(2)(h)13.	At a minimum, the emergency safety intervention program that is utilized shall include the following: ... 13. Time limits for the use of restraint and seclusion; ...	
1447	Emergency Safety Interventions. 290-2-5-.14(2)(h)14.	At a minimum, the emergency safety intervention program that is utilized shall include the following: ... 14. Process for obtaining approval for continual restraints and seclusion; ...	
1448	Emergency Safety Interventions. 290-2-5-.14(2)(h)15.	At a minimum, the emergency safety intervention program that is utilized shall include the following: ... 15. Procedures to address problematic restraints; ...	

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1449	Emergency Safety Interventions. 290-2-5-.14(2)(h)16.	At a minimum, the emergency safety intervention program that is utilized shall include the following: ... 16. Documentation; ...	
1450	Emergency Safety Interventions. 290-2-5-.14(2)(h)17.	At a minimum, the emergency safety intervention program that is utilized shall include the following: ... 17. Investigation of injuries and complaints; ...	
1451	Emergency Safety Interventions. 290-2-5-.14(2)(h)18.	At a minimum, the emergency safety intervention program that is utilized shall include the following: ... 18. Monitoring physical signs of distress and obtaining medical assistance; and ...	
1452	Emergency Safety Interventions. 290-2-5-.14(2)(h)19.	At a minimum, the emergency safety intervention program that is utilized shall include the following: ... 19. Legal issues.	
1453	Emergency Safety Interventions. 290-2-5-.14(2)(i)	Emergency safety intervention training shall be in addition to the annual training required in Rule .08(6)(d)2 and shall be documented in the staff member's personnel record.	
1454	Emergency Safety Interventions. 290-2-5-.14(2)(j)	All actions taken that involve utilizing an emergency safety intervention shall be recorded in the child's case record showing the cause for the emergency safety intervention, the emergency safety intervention used, and, if needed, approval by the director, the staff member in charge of casework services, and the external physician and/or MRO provider who has responsibility for the diagnosis and treatment of the child's behavior.	
1455	Emergency Safety Interventions. 290-2-5-.14(2)(k)	Institutions shall submit to the Department electronically a report, in a format acceptable to the Department, within 24 hours whenever an unusual incident occurs regarding emergency safety interventions, including: 1. Any injury that is received by a child as a result of any emergency safety intervention; 2. Whenever an Institution utilizes emergency safety interventions three or more times in one month with the same child and/or whenever the Institution utilizes more than 10 emergency safety interventions for all children in care within a 30-day period.	

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1459	Emergency Safety Interventions. 290-2-5-.14(2)(l)	Institutions shall submit a written report to the program's director on the use of any emergency safety intervention immediately after the conclusion of the intervention and shall further notify the child's parents or legal guardians regarding the use of the intervention. A copy of such report shall be maintained in the child's file.	
1461	Emergency Safety Interventions. 290-2-5-.14(2)(m)	At least once per quarter, the Institution, utilizing a master agency restraint log and the child's case record, shall review the use of all emergency safety interventions for each child and staff member, including the type of intervention used and the length of time of each use, to determine whether there was an appropriate basis for the intervention, whether the use of the emergency safety intervention was warranted, whether any alternatives were considered or employed, the effectiveness of the intervention or alternative, and the need for additional training. Written documentation of all such reviews shall be maintained. Where the Institution identifies opportunities for improvement as a result of such reviews or otherwise, the Institution shall implement these changes through an effective quality improvement plan.	
1464	Emergency Safety Interventions. 290-2-5-.14(2)(n)	All child care workers who may be involved in the use of emergency safety interventions, shall have evidence of having satisfactorily completed a nationally recognized training program for emergency safety interventions to protect residents and others from injury, which has been approved by the Department and taught by an appropriately certified trainer in such program.	
1465	Manual Holds. 290-2-5-.14(2)(o)1.	Manual Holds. Emergency safety interventions utilizing manual holds require at least one trained staff member to carry out the hold. Emergency safety interventions utilizing prone restraints require at least two trained staff members to carry out the hold.	
1466	Manual Holds. 290-2-5-.14(2)(o)2.	Emergency safety interventions shall not include the use of any chemical or physical restraint or manual hold that would potentially impair the child's ability to breathe or has been determined to be inappropriate for use on a particular child due to a documented medical or behavioral condition.	
1467	Manual Holds. 290-2-5-.14(2)(o)3.	When a manual hold is used upon any child whose primary mode of communication is sign language, the child shall be permitted to have his or her hands free from restraint for brief periods during the intervention, except when such freedom may result in physical harm to the child or others.	
1468	Manual Holds. 290-2-5-.14(2)(o)4.	If the use of a manual hold exceeds 15 consecutive minutes, the facility director or his or her designee, who possesses at least the qualifications of the director and has been fully trained in the facility's emergency safety intervention plan, shall be contacted by a two-way communications device or in person and determine that the continuation of the manual hold is appropriate under the circumstances. Documentation of any consultations and outcomes shall be maintained for each application of a manual hold that exceeds 15 minutes. Manual holds shall not be permitted to continue if the restraint is determined to pose an undue risk to the child's health given the child's physical or mental condition.	

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1471	Manual Holds. 290-2-5-.14(2)(o)5.	A manual hold may not continue for more than 30 minutes at any one time without the consultation as specified in subparagraph (4) of this subparagraph, and under no circumstances may a manual hold be used for more than one hour total within a 24-hour period.	
1472	Manual Holds. 290-2-5-.14(2)(o)6.	If the use of a manual hold on a child reaches a total of one hour within a 24-hour period, the staff shall reconsider alternative strategies, document same, and consider notifying the authorities or transporting the child to a hospital or other appropriate facility for evaluation.	
1473	Manual Holds. 290-2-5-.14(2)(o)7.	The child's breathing, verbal responsiveness, and motor control shall be continuously monitored during any manual hold. Written summaries of the monitoring by a trained staff member not currently directly involved in the manual hold shall be recorded every 15 minutes during the duration of the restraint. If only one trained staff member is involved in the restraint and no other staff member is available, written summaries of the monitoring of the manual hold shall be recorded as soon as is practicable, but no later than one hour after the conclusion of the restraint.	
1476	Seclusion. 290-2-5-.14(2)(p)1.	Seclusion. If used, seclusion procedures in excess of thirty (30) minutes must be approved by the director or designee. No child shall be placed in a seclusion room in excess of one (1) hour within any twenty-four (24) hour period without obtaining authorization for continuing such seclusion from the child's external physician and/or MRO provider and documenting such authorization in the child's record.	
1478	Seclusion. 290-2-5-.14(2)(p)2.	A seclusion room shall only be used if a child is in danger of harming himself or herself or others.	
1479	Seclusion. 290-2-5-.14(2)(p)3.	A child placed in a seclusion room shall be visually monitored at least every fifteen (15) minutes.	
1480	Seclusion. 290-2-5-.14(2)(p)4	A room used for the purpose of seclusion must meet the following criteria: <ul style="list-style-type: none"> (i) The room shall be constructed and used in such ways that the risk of harm to the child is minimized; (ii) The room shall be equipped with a viewing window on the door so that staff can monitor the child; (iii) The room shall be lighted and well-ventilated; (iv) The room shall be a minimum fifty (50) square feet in area; and (v) The room must be free of any item that may be used by the child to cause physical harm to himself/herself or others. 	

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1485	Seclusion. 290-2-5- .14(2)(p)5.	No more than one child shall be placed in the seclusion room at a time.	
1486	Seclusion. 290-2-5- .14(2)(p)6.	<p>A seclusion room monitoring log shall be maintained and used to record the following information:</p> <ul style="list-style-type: none"> (i) Name of the secluded child; (ii) Reason for child's seclusion; (iii) Time of child's placement in the seclusion room; (iv) Name and signature of the staff member that conducted visual monitoring; (v) Signed observation notes; and (vi) Time of the child's removal from the seclusion room. <p>Authority: O.C.G.A. Sections 49-5-8, 49-5-12.</p>	
1501	Grievances. 290-2-5- .15(1)	The Institution shall develop and implement policies and procedures for children to voice grievances and to submit written grievances without fear of retaliation.	
1502	Grievances. 290-2-5- .15(2)	<p>All written grievances submitted by a child shall be recorded in the case record showing the grievance, description or method of explanation or resolution, and involved staff.</p> <p>Authority: O.C.G.A. Sections 49-5-8, 49-5-12.</p>	
1600	Child Abuse and Sexual Exploitation. 290-2-5- .16(1)	The Institution shall develop and implement policies and procedures that prohibit child abuse and sexual exploitation of children in care. Such policies and procedures shall incorporate requirements for the reporting of child abuse and sexual exploitation in accordance with state law.	
1602	Child Abuse and Sexual Exploitation. 290-2-5- .16(2)	All reports of alleged child abuse and sexual exploitation of children in care shall also be reported immediately to the Department's Residential Child Care Licensing unit.	

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1603	Child Abuse and Sexual Exploitation. 290-2-5-.16(a)1.	Such [Child abuse and sexual exploitation] policies and procedures shall also include the following: 1. Provisions for the immediate reporting by any staff member of any suspected incident of abuse or sexual exploitation of a child to the director of the Institution; ...	
1604	Child Abuse and Sexual Exploitation. 290-2-5-.16(a)2.	[Child abuse and sexual exploitation] policies and procedures shall also include the following: ... 2. Provisions for conducting internal investigations of such incidents (however, such provisions shall not relieve the Institution of the requirement to submit reports as required by this Rule); ...	
1605	Child Abuse and Sexual Exploitation. 290-2-5-.16(a)3.	[Child abuse and sexual exploitation] policies and procedures shall also include the following: ... 3. Provisions for preventing the recurrence of an alleged incident pending investigation; ...	
1606	Child Abuse and Sexual Exploitation. 290-2-5-.16(a)4.	[Child abuse and sexual exploitation] policies and procedures shall also include the following: ... 4. Provisions for evaluating the continued use, pending investigation, of any staff member alleged to be involved in a reported incident of abuse or sexual exploitation; and ...	
1607	Child Abuse and Sexual Exploitation. 290-2-5-.16(b)	As required in Rule .08(6)(d), all employees shall receive orientation and training on the Institution's abuse policies and procedures and reporting requirements. Authority: O.C.G.A. Sections 19-7-5, 49-5-8, 49-5-12.	
1700	Food Service. 290-2-5-.17(1)	An Institution shall provide each child with meals and snacks of serving sizes dependent upon the age of the child based upon nutrition guidelines as established by the United States Department of Agriculture Child and Adult Care Food Program.	
1701	Food Service. 290-2-5-.17(1)(a)	Meals and snacks shall be varied daily.	

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1702	Food Service. 290-2-5- .17(1)(b)	Additional servings of food shall be offered to children over and above the required daily minimum if not contraindicated by modified diets.	
1703	Food Service. 290-2-5- .17(1)(c)	Modified diets based on medical or religious reasons shall be served to children as needed. Modifications due to medical reasons shall be based on the written order of a physician and the order shall be placed in the child's case record.	
1704	Food Service. 290-2-5- .17(2)	An Institution licensed to care for thirteen or more children must obtain a valid food service permit and remain in compliance with Department of Public Health food service requirements. All Institutions shall meet the following requirements: ...	
1706	Food Service. 290-2-5- .17(2)(a)	Food shall be stored, prepared, and served in a safe and sanitary manner commensurate with generally accepted and recognized food service standards. ...	
1707	Food Service. 290-2-5- .17(2)(b)	Each Institution shall have designated space for food preparation and storage areas separate from bathrooms, garbage storage areas, utility rooms, and bedrooms used by children. ...	
1708	Food Service. 290-2-5- .17(2)(c)	All perishable and potentially hazardous foods shall be refrigerated at a temperature of forty-five (45) degrees Fahrenheit or below and served promptly after cooking. Freezer temperature shall be maintained at zero (0) degrees Fahrenheit or below. ...	
1709	Food Service. 290-2-5- .17(2)(d)	Food shall be in sound condition, free from spoilage and contamination and shall be safe for human consumption. ...	
1710	Food Service. 290-2-5- .17(2)(e)	All raw fruits and vegetables shall be washed thoroughly before being cooked or served. Food not subject to further washing or cooking before serving shall be stored in such a manner as to be protected against contamination. ...	
1711	Food Service. 290-2-5- .17(2)(f)	Containers for food storage other than the original containers or packages in which the food was obtained shall be impervious and nonabsorbent and have tight fitting lids or covers. ...	
1712	Food Service. 290-2-5- .17(2)(g)	Eggs, pork, pork products, poultry, and fish, shall be thoroughly cooked. ...	

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1713	Food Service. 290-2-5- .17(2)(h)	Meats, poultry, fish, dairy products, bakery products and processed foods shall have been inspected under an official regulatory program. ...	
1714	Food Service. 290-2-5- .17(2)(i)	Food service equipment and preparation areas shall be kept clean and free of accumulations of dust, dirt, food particles and grease deposits. ...	
1715	Food Service. 290-2-5- .17(2)(j)	Non-disposable dishes, glasses and silverware shall be properly cleaned by pre-rinsing and scraping, washing, sanitizing and drying. Authority: O.C.G.A. Sections 26-2-370 <i>et seq.</i> , 49-5-8, 49-5-12.	
1800	Physical Plant and Safety. 290-2-5- .18	An Institution shall maintain its buildings, grounds, furniture, and equipment in a clean, safe, and sanitary condition and in a good state of repair.	
1801	Physical Plant and Safety. 290-2-5- .18(a)1.	Required Approvals. An Institution shall be in compliance with all applicable zoning laws, ordinances, or rules and regulations which apply to its operation.	
1802	Physical Plant and Safety. 290-2-5- .18(a)2.	All water and sewage disposal systems, if other than approved city and county systems, shall be approved by the proper authorities having jurisdiction.	
1803	Physical Plant and Safety. 290-2-5- .18(a)3.	An Institution shall submit proof of compliance with applicable laws and regulations issued by the State Fire Marshal, the proper local fire marshal, or state inspector, including a certificate of occupancy if required. The premises of the Institution shall have functioning fire extinguishers and smoke detectors.	
1804	Physical Plant and Safety. 290-2-5- .18(a)4.	All buildings and grounds shall be constructed and maintained in accordance with these rules. Institutions that initially apply for a license or current licensees that plan to renovate buildings for housing residents shall submit building blueprints or similar schematic drawings or diagrams for review and approval by the Department.	

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1805	Physical Plant and Safety. 290-2-5-.18(b)1.	Sleeping Areas. The Institution shall have separate sleeping areas which contain not less than 63 square feet of usable floor space per resident. Single bedrooms shall contain at least 75 square feet of usable floor space. Usable floor space does not include built-in closet space. The preceding requirements on usable floor space shall apply to any Institution that renovates its current sleeping areas or increases its capacity by adding new buildings or areas to the Institution. Beds shall be arranged to provide for at least three feet of space between the heads, foot, and sides of each bed. If bunk bed units are used, they shall be arranged to provide for at least five feet of space between the ends, foot and sides of each bunk bed unit. Except for parenting youth sharing a sleeping area with their child(ren), boys and girls shall sleep in separate sleeping areas.	
1807	Physical Plant and Safety. 290-2-5-.18(b)2.	Each child shall be provided with his or her own personal space and furnishings for storage of clothes and personal belongings.	
1808	Physical Plant and Safety. 290-2-5-.18(b)3.	Children shall not co-sleep or bedshare. Each child shall be provided his or her own personal bed and mattress. Children six (6) years of age or older shall sleep on a mattress and bed that is no shorter than the child's height and at least thirty inches wide. Children under the age of six (6) years shall sleep on a mattress and bed that is age, size, and developmentally appropriate. Clean sheets, pillows and pillowcases, blankets or bed covering shall be provided and sheets and pillowcases shall be changed or cleaned at least weekly. Waterproof mattresses shall be provided as needed or as required by the child's assessment and service plan.	
1811	Physical Plant and Safety. 290-2-5-.18(b)4.	Bedrooms shall be provided with outside ventilation by means of windows, air conditioners, or mechanical ventilation.	
1813	Physical Plant and Safety. 290-2-5-.18(b)5.	No staff member shall sleep in children's bedrooms. Separate sleeping quarters and lavatory for staff shall be provided in the living units.	
1814	Physical Plant and Safety. 290-2-5-.18(b)6.	Children shall not be required to sleep in areas of the premises that are not routinely used as or specifically designated as bedrooms, such as doorways, hallways, bathrooms, closets, crawl spaces, fire escapes, kitchens, communal living areas, etc.	

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1815	Physical Plant and Safety. 290-2-5-.18(c)1.	Lavatory and Bathing Facilities. There shall be separate lavatory (water basin and toilet) and bathing facilities for boys and girls that shall be located near the sleeping areas. Such facilities shall not be used routinely by staff.	
1817	Physical Plant and Safety. 290-2-5-.18(c)2.	There shall be at least one lavatory equipped with hot and cold water and mirror for every eight residents or fraction thereof. Rooms that contain more than one toilet shall contain stalls for individual privacy. Each lavatory shall be supplied with toilet paper and holders, and individual hand towels, or disposable towels, or mechanical hand drying equipment.	
1820	Physical Plant and Safety. 290-2-5-.18(c)3.	There shall be at least one shower or bathtub with hot and cold water for every ten residents or fraction thereof. Bathtubs and shower stalls shall be equipped with nonslip surfaces.	
1822	Physical Plant and Safety. 290-2-5-.18(c)4.	Lavatory areas shall be ventilated with either an open screened window or functioning exhaust fan.	
1823	Physical Plant and Safety. 290-2-5-.18(d)	Living Room. An Institution shall maintain a living room or den for the children residing in a living unit. Such space shall be equipped with comfortable furnishings suitable for relaxation and social interaction.	
1825	Physical Plant and Safety. 290-2-5-.18(e)	Dining Area. The Institution shall maintain a dining area that is furnished to permit children, staff, and guests to eat together in a small group or groups.	
1826	Physical Plant and Safety. 290-2-5-.18(f)	Climate Control. The Institution shall be maintained at a temperature range of sixty-five (65) degrees Fahrenheit to eighty- two (82) degrees Fahrenheit, depending upon the season of the year.	

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1827	Physical Plant and Safety. 290-2-5-.18(g)	Ceilings and Walls. All ceilings shall be at least seven (7) feet in height. Ceiling and walls shall be of good repair.	
1828	Physical Plant and Safety. 290-2-5-.18(h)	Windows. Windows which are accessible from the outside shall be lockable and easily opened from the inside. The manufacturer's designed functions of windows shall not be altered without the approval of the State Fire Marshal.	
1829	Physical Plant and Safety. 290-2-5-.18(i)	The Institution shall be kept clean and free of hazards to health and safety and of debris and pests. Domestic and farm animals, owned or residing at the Institution, shall be inoculated against rabies as required by law.	
1830	Physical Plant and Safety. 290-2-5-.18(i)1.	Any firearms or ammunition on the Institution's premises shall not be allowed within any living units and shall be stored in locked cabinets or similar storage containers which are not accessible to children and which are in areas that are not accessible to children.	
1831	Physical Plant and Safety. 290-2-5-.18(i)2.	An effective pest control system shall be implemented. Pesticides, disinfectants, chemicals, and cleaning supplies, with hazardous labels, shall be stored in designated areas away from children and if used by children, such use shall be supervised by staff.	
1833	Physical Plant and Safety. 290-2-5-.18(j)	Exterior Grounds. Exterior grounds of the Institution shall be free of hazards to health and safety.	
1834	Physical Plant and Safety. 290-2-5-.18(j)1.	Garbage which is stored outside shall be stored in covered containers and shall be emptied at least weekly. Garbage storage areas and containers shall be cleaned periodically to eliminate buildup of dirt and grime that attracts pests and rodents.	

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1836	Physical Plant and Safety. 290-2-5-.18(j)2.	Playgrounds and recreation areas used by children shall be kept clean and free from litter and hazards to health and safety.	
1837	Physical Plant and Safety. 290-2-5-.18(j)3.	Swimming Pools. If an Institution has a swimming pool on its grounds, such pool shall be enclosed with protective fencing and be free of contamination. A certified lifeguard shall be in attendance at all times that a swimming pool is in use by any resident.	
1839	Physical Plant and Safety. 290-2-5-.18(k)1.	Transportation. Vehicles used by an Institution to transport children shall be insured and have a satisfactory annual safety inspection. The inspection shall be documented on a form provided by the Department and signed by a certified inspector or mechanic.	
1841	Physical Plant and Safety. 290-2-5-.18(k)2.	When transporting children, an Institution's vehicle shall only be operated by a staff member or an authorized resident who possesses a valid driver's license as required for the class of the vehicle operated. If an Institution authorizes residents to drive, it shall establish and implement policies and procedures relative to the use of Institution vehicles by such residents.	
1843	Physical Plant and Safety. 290-2-5-.18(k)3.	No vehicle shall be used to transport more children than the manufacturer's rated seating capacity for the vehicle.	
1844	Physical Plant and Safety. 290-2-5-.18(k)4.	All vehicles used to transport children shall be equipped with safety equipment as required by federal and state laws.	
1845	Physical Plant and Safety. 290-2-5-.18(l)1.	Accessibility. Where children are dependent upon a wheelchair or other mechanical device for mobility, the child-caring institution shall have: 1. At least two exits from the child-caring institution, remote from each other that are accessible to the child and with easily negotiable ramps; ...	

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1846	Physical Plant and Safety. 290-2-5-.18(l)2.	Where children are dependent upon a wheelchair or other mechanical device for mobility, the child-caring institution shall have: ... 2. All doorways and hallways leading to exits, as well as bathrooms, must be wheelchair accessible; and ...	
1847	Physical Plant and Safety. 290-2-5-.18(l)3.	Where children are dependent upon a wheelchair or other mechanical device for mobility, the child-caring institution shall have: ... 3. The bathroom shall be sufficient to accommodate a wheelchair and a staff person with appropriate accessibility devices installed.	
1848	Physical Plant and Safety. 290-2-5-.18(m)	First Aid Supplies. Each living unit shall have a first aid kit and instruction manual; such kit shall contain scissors, tweezers, gauze pads, adhesive tape, thermometer, assorted band-aids, antiseptic cleaning solution, and bandages. Authority: O.C.G.A. Sections 40-8-76, 49-5-8, 49-5-12.	
2100	Disaster Preparedness. 290-2-5-.21	The facility shall prepare for potential emergency situations that may affect the care of children by developing and complying with an effective disaster preparedness plan that identifies emergency situations and outlines an appropriate course of action. The plan must be reviewed annually and revised, as appropriate, including any related written agreements.	
2101	Disaster Preparedness. 290-2-5-.21(a)1.	The disaster preparedness plan shall include at a minimum plans for the following emergency situations: 1. Local and widespread weather emergencies or natural disasters, such as tornadoes, hurricanes, earthquakes, ice or snow storms, or floods; ...	
2102	Disaster Preparedness. 290-2-5-.21(a)2.	The disaster preparedness plan shall include at a minimum plans for the following emergency situations: ... 2. Manmade disasters such as acts of terrorism and hazardous materials spills; ...	
2103	Disaster Preparedness. 290-2-5-.21(a)3.	The disaster preparedness plan shall include at a minimum plans for the following emergency situations: ... 3. Unanticipated interruption of service of utilities, including water, gas, or electricity, either within the facility or within a local or widespread area; ...	

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2104	Disaster Preparedness. 290-2-5-.21(a)4.	The disaster preparedness plan shall include at a minimum plans for the following emergency situations: ... 4. Loss of heat or air conditioning; ...	
2105	Disaster Preparedness. 290-2-5-.21(a)5.	The disaster preparedness plan shall include at a minimum plans for the following emergency situations: ... 5. Fire, explosion, or other physical damage to the facility; and ...	
2106	Disaster Preparedness. 290-2-5-.21(a)6.	The disaster preparedness plan shall include at a minimum plans for the following emergency situations: ... 6. Pandemics, infectious disease outbreaks and illnesses or other situations where the community's need for services may exceed the availability of beds and services regularly offered by the facility.	
2107	Disaster Preparedness. 290-2-5-.21(b)	There shall be plans to ensure sufficient staffing and supplies to provide room, board and watchful oversight during the emergency situation.	
2108	Disaster Preparedness. 290-2-5-.21(c)	There shall be plans for the emergency transport or relocation of all the facility children, should it be necessary, in vehicles appropriate to the children's needs. Additionally, there shall be written agreements with any facilities which have agreed to receive the facility's children in these situations.	
2109	Disaster Preparedness. 290-2-5-.21(d)	The facility shall document participation of all areas of the facility in quarterly fire drills.	
2110	Disaster Preparedness. 290-2-5-.21(e)	In addition to fire drills, the facility shall have its staff rehearse portions of the disaster preparedness plan, with a minimum of two rehearsals each calendar year either in response to an emergency or through planned drills, with coordination of the drills with the local Emergency Management Agency (EMA) whenever possible.	
2111	Disaster Preparedness. 290-2-5-.21(f)	The plan shall include the notification to the Department of the emergency situation as required by these rules and notification of the lawful custodians of the children's whereabouts and condition.	

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2112	Disaster Preparedness. 290-2-5-.21(g)	The facility shall provide a copy of the internal disaster preparedness plan to the local Emergency Management Agency (EMA) and shall include the local EMA in development of the facility's plan for the management of external disasters.	
2113	Disaster Preparedness. 290-2-5-.21(h)	<p>The facility's disaster preparedness plan shall also include the following additional items in efforts to limit and contain health hazards to children, staff, and the general public due to pandemic or infectious disease outbreaks:</p> <ol style="list-style-type: none"> 1. Contact information for sources of public health information and guidance (e.g. Centers for Disease Control (CDC), state/local public health authorities); 2. Name and contact information of facility staff designated to provide updates to the Department, upon request, regarding the status of the outbreak or illness; 3. Process in place for providing notice of the outbreak or illness and any other necessary updates to parents/guardians; 4. Plan for immediate isolation of affected children and staff from unexposed children and staff; 5. Plan for minimizing the risk of exposure to unexposed children or staff; and 6. Plan for addressing business continuity and programmatic issues relevant to pandemic or infectious disease outbreaks. 	
2114	Disaster Preparedness. 290-2-5-.21(i)	The facility's disaster preparedness plan shall be made available to the Department for inspection upon request.	
2115	Disaster Preparedness. 290-2-5-.21(j)	<p>The Department may suspend any requirements of these rules and the enforcement of any rules where the Governor of the State of Georgia has declared a public health emergency.</p> <p>Authority: O.C.G.A. Sections 49-5-8, 49-5-12.</p>	