

AMENDED IN SENATE MAY 28, 2015

AMENDED IN ASSEMBLY APRIL 23, 2015

CALIFORNIA LEGISLATURE—2015–16 REGULAR SESSION

**ASSEMBLY BILL**

**No. 1147**

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**Introduced by Assembly Member Maienschein**  
*(Coauthor: Assembly Member Kim)*

February 27, 2015

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An act to amend Sections 1760.2 and 1760.4 of, and to add Sections 1760.7, 1760.9, 1761.85, 1762, 1762.2, 1762.4, 1762.6, 1762.8, 1763, 1763.2, and 1763.4 to, the Health and Safety Code, relating to health facilities, and declaring the urgency thereof, to take effect immediately.

LEGISLATIVE COUNSEL'S DIGEST

AB 1147, as amended, Maienschein. Health facilities: pediatric day health and respite care facilities.

Under existing law, the State Department of Public Health licenses and regulates health facilities, including, among others, pediatric day health and respite care facilities. Existing law defines "pediatric day health and respite care facility" as a facility that provides an organized program of therapeutic social and day health activities and services and limited 24-hour inpatient respite care to medically fragile children 21 years of age or younger, including terminally ill and technology dependent children.

This bill would authorize an individual who is 22 years of age or older to continue to receive care in a pediatric day health and respite care facility, if the facility receives approval from the ~~department~~ *State Department of Public Health* for a Transitional Health Care Needs Optional Service Unit. *The bill would also authorize a patient who*

*previously received services from a pediatric day health and respite care facility and who is 22 years of age or older to receive care in an optional service unit, as provided.* The bill would establish a licensing process for a pediatric day health and respite care facility to operate an optional service unit, and would impose certain requirements on those optional service units, including, among others, that the optional service unit provide care for ~~clients~~ *patients* who are 22 years of age or older in a distinct part of the pediatric day health and respite care facility or optional service unit, separate from the area where care is provided to younger ~~clients~~ *patients, except under specified circumstances.*

This bill would authorize a pediatric day health and respite care facility to implement policies and procedures that prohibit smoking by ~~clients~~ *patients*, parents, staff, visitors, or consultants within the facility or on the premises, if the prohibition is clearly stated in the admission ~~agreement~~ *agreement* and notices are posted at the facility.

This bill would establish procedures for the issuance of a provisional license to a pediatric day health and respite care facility. The bill would specify additional procedures relating to the licensure of a pediatric day health and respite care ~~facility~~ *facility* and renewals of those licenses, including, among others, requiring the department to initiate an initial licensing inspection *of an optional service unit* within 60 days of receipt of a pediatric day health and respite care facility's completed application and requiring periodic inspections by a duly authorized representative of the department and specified reports related to those inspections. The bill would authorize the department to make reasonable accommodation for exceptions to the licensing standards if the health, safety, and quality of patient care is not compromised. The bill would also specify the grounds upon which those licenses may be revoked, including, among others, willful omission or falsification of a material fact in the application for a license. The bill would require proceedings for the denial, suspension, or revocation of licenses, or denial or withdrawal of approval, to be conducted in accordance with specified provisions of law.

Existing law requires facilities serving persons who are terminally ill, catastrophically and severely disabled, mentally alert but physically disabled, or any combination of these persons, to comply with specified provisions of the California Code of Regulations, and exempts those facilities from certain requirements of that code relating to required services for skilled nursing facilities.

This bill would provide additional exemptions from that code for a pediatric day health and respite care facility.

Existing law specifies the services that a pediatric day health and respite care facility is required to provide, including, among others, pharmacy services.

This bill would require that pharmacy services by a pediatric day health and respite care facility satisfy certain requirements, including, among others, that medications be administered only upon written and signed orders of the ~~child's~~ *patient's* attending physician.

This bill would require a pediatric day health and respite care facility to have a patient care committee to address quality of care provided in the facility, including, but not limited to, patient care policies, pharmacy services, and infection control. The bill would specify the composition of the committee, impose specified meeting requirements, and outline the committee's responsibilities.

Existing law requires pediatric day health and respite care facilities to meet the same fire safety standards adopted by the State Fire Marshal and the same seismic safety standards that apply to community care facilities. Existing law provides that a pediatric day health and respite care *facility* is not subject to architectural plan review or field inspection by the Office of Statewide Health Planning and Development, and requires, as part of the application for licensure, an applicant to submit evidence of compliance with local building code requirements and that the physical environment is adequate to provide the level of care and service required by the clients of the facility as determined by the department.

This bill would provide that those provisions do not prohibit the use of alternate space utilization, new concepts of design, treatment techniques, equipment and alternate finish materials, or other flexibility, if written approval is granted by the local building authority.

This bill would declare that it is to take effect immediately as an urgency statute.

Vote:  $\frac{2}{3}$ . Appropriation: no. Fiscal committee: yes.  
State-mandated local program: no.

*The people of the State of California do enact as follows:*

1 SECTION 1. Section 1760.2 of the Health and Safety Code is  
2 amended to read:

1 1760.2. As used in this chapter, the following definitions shall  
2 apply:

3 (a) (1) “Pediatric day health and respite care facility” means  
4 a facility that provides an organized program of therapeutic social  
5 and day health activities and services and limited 24-hour inpatient  
6 respite care to medically fragile children 21 years of age or  
7 younger, including terminally ill and technology-dependent  
8 ~~children: patients, except as provided in paragraph (2) and Section~~  
9 *1763.4.*

10 (2) An individual who is 22 years of age or older may continue  
11 to receive care in a pediatric day health and respite care facility if  
12 the facility receives approval from the state department for a  
13 Transitional Health Care Needs Optional Service Unit pursuant to  
14 Section 1763.4. *A patient who previously received services from*  
15 *a pediatric day health and respite care facility, who is 22 years of*  
16 *age or older and who satisfies the requirements of Section 1763.4,*  
17 *may also receive services in an optional service unit.*

18 (b) “Medically fragile” means having an acute or chronic health  
19 problem that requires therapeutic intervention and skilled nursing  
20 care during all or part of the day. Medically fragile problems  
21 include, but are not limited to, HIV disease, severe lung disease  
22 requiring oxygen, severe lung disease requiring ventilator or  
23 tracheostomy care, complicated spina bifida, heart disease,  
24 malignancy, asthmatic exacerbations, cystic fibrosis exacerbations,  
25 neuromuscular disease, encephalopathies, and seizure disorders.

26 (c) “~~Technology-dependent-child~~ *patient*” means a person  
27 ~~who, from birth through 21 years of age who birth,~~ has a chronic  
28 disability, requires the routine use of a specific medical device to  
29 compensate for the loss of use of a life sustaining body function,  
30 and requires daily, ongoing care or monitoring by trained  
31 personnel.

32 (d) “Respite care” means day and 24-hour relief for the parent  
33 or guardian and care for the ~~child: patient.~~ 24-hour inpatient respite  
34 care includes, but is not limited to, 24-hour nursing care, meals,  
35 socialization, and developmentally appropriate activities. As used  
36 in this chapter, “24-hour inpatient respite care” is limited to no  
37 more than 30 intermittent or continuous whole calendar days per  
38 patient per calendar year.

1 (e) “Comprehensive case management” means locating,  
2 coordinating, and monitoring services for the eligible ~~client~~ *patient*  
3 population and includes all of the following:

4 (1) Screening of ~~client~~ *patient* referrals to identify those persons  
5 who can benefit from the available services.

6 (2) Comprehensive ~~client~~ *patient* assessment to determine the  
7 services needed.

8 (3) Coordinating the development of an interdisciplinary  
9 comprehensive care plan.

10 (4) Determining individual case cost effectiveness and available  
11 sources of funding.

12 (5) Identifying and maximizing informal sources of care.

13 (6) Ongoing monitoring of service delivery to determine the  
14 optimum type, amount, and duration of services provided.

15 (f) “License” means a basic permit to operate a pediatric day  
16 health and respite care facility. With respect to a health facility  
17 licensed pursuant to Chapter 2 (commencing with Section 1250),  
18 “license” means a special permit authorizing the health facility to  
19 provide pediatric day health and respite care services as a separate  
20 program in a distinct part of the facility.

21 (g) “State department” means the State Department of Public  
22 Health.

23 SEC. 2. Section 1760.4 of the Health and Safety Code is  
24 amended to read:

25 1760.4. (a) The state department shall develop and adopt  
26 regulations for the licensure of, and shall license, pediatric day  
27 health and respite care facilities. The regulations shall include  
28 minimum standards for the following:

29 (1) Adequacy, safety, and sanitation of the physical plant and  
30 equipment.

31 (2) Staffing with duly qualified personnel.

32 (3) Training of the staff.

33 (4) Providing the services offered.

34 These regulations shall be filed with the Secretary of State no  
35 later than July 1, 1993.

36 (b) The state department shall establish within the state  
37 department an advisory committee of experts to assist in the  
38 development of the regulations required pursuant to this section.

39 A representative of the state department shall act as chairperson  
40 of the committee. The members of the committee shall serve

1 without compensation, but shall be reimbursed by the state  
2 department for all necessary expenses incurred in the actual  
3 performance of their duties. To the extent sufficient funds have  
4 been appropriated in the Budget Act, the state department may  
5 provide staff support to the committee as the state department  
6 deems is necessary for the conduct of the committee's business.  
7 The committee shall meet at the state director's pleasure until the  
8 time that the proposed regulations are presented for adoption at  
9 the public hearing.

10 (c) Pending adoption of the regulations pursuant to subdivision  
11 (b), an entity may be licensed as a pediatric day health and respite  
12 care facility if it meets interim regulations administered by the  
13 state department for congregate living health facilities pursuant to  
14 Section 1267.13.

15 (d) (1) In addition to the exceptions from regulations described  
16 in subdivision (n) of Section 1267.13, a pediatric day health and  
17 respite care facility shall not be required to conform to the  
18 following regulations contained in Chapter 3 of Division 5 of Title  
19 22 of the California Code of Regulations: 72329.1, 72353, 72359,  
20 72363, 72365, 72371, subdivisions (b) and (c) of Section 72375,  
21 subdivision (b) of Section 72377, 72516, 72525, and 72531.

22 (2) A pediatric day health and respite care facility shall not be  
23 required to meet the requirements of Section 72367 of Article 3  
24 of Chapter 3 of Division 5 of Title 22 of the California Code of  
25 Regulations, except that medications brought by or with the patient  
26 on admission to the facility shall not be used unless, after admission  
27 by the facility, the contents of the containers have been examined  
28 and positively ~~identified~~. *identified by a licensed nurse, in*  
29 *accordance with his or her scope of practice.*

30 (e) A pediatric day health and respite care facility shall have a  
31 patient care committee to address quality of care provided in the  
32 facility, including, but not limited to, patient care policies,  
33 pharmacy services, and infection control.

34 (1) The pediatric day health and respite care facility shall  
35 maintain minutes of every committee meeting and indicate the  
36 names of members present, the date, the length of the meeting, the  
37 subject matter discussed, and any action taken.

38 (2) The patient care committee shall include the medical director,  
39 dietician, pharmacist, nursing staff, nurse supervisor, center

1 administrator or director, and other staff as may be required by  
2 facility policies and procedures.

3 (3) The patient care committee shall meet at least twice per ~~year,~~  
4 *year* or more often if a need or problem is identified by the  
5 committee.

6 (4) The patient care committee shall be responsible for all of  
7 the following:

8 (A) Reviewing and approving all policies relating to patient  
9 care. Based on reports received from the pediatric day health and  
10 respite care facility's administrator, the committee shall review  
11 the effectiveness of policy implementation and shall make  
12 recommendations to the administrator of the facility for the  
13 improvement of patient care. The committee shall review patient  
14 care policies annually and revise the policies as necessary. The  
15 committee's minutes shall list the policies the committee reviewed.

16 (B) Infection control in the facility, which shall include, but not  
17 be limited to, establishing, reviewing, monitoring, and approving  
18 policies and procedures for investigating, controlling, and  
19 preventing infections in the facility, and maintaining, reviewing,  
20 and reporting statistics of the number, types, sources, and locations  
21 of infections within the pediatric day health and respite care  
22 facility.

23 (C) Establishing, reviewing, and monitoring the storage and  
24 administration of drugs and biologicals, reviewing and taking  
25 appropriate action based on any findings from a pharmacist hired  
26 to consult with the committee and internal quality assurance  
27 reviews, and recommending improvements of services to the  
28 administrator of the facility.

29 (f) (1) A pediatric day health and respite care facility shall  
30 comply with licensing requirements. The state department may,  
31 upon written request of an applicant or licensee, approve the use  
32 of alternate concepts, methods, procedures, techniques, equipment,  
33 personnel qualifications, or conducting pilot projects, provided  
34 those alternatives are carried out with safe and adequate care for  
35 the patients and with the prior written approval of the state  
36 department. The state department's approval shall provide for the  
37 terms and conditions under which the alternatives are granted. An  
38 applicant's or licensee's written request shall be accompanied by  
39 substantiating evidence supporting the request pursuant to this  
40 paragraph.

1 (2) The state department's review of written requests submitted  
2 under this subdivision shall consider the unique nature of services  
3 provided to individuals served by the pediatric day health and  
4 respite care facility when compared to the requirements for  
5 congregate living health facilities for individuals requiring inpatient  
6 care.

7 (3) If the state department grants an approval under this  
8 subdivision, a pediatric day health and respite care facility shall  
9 immediately post that approval, or a true copy of that approval,  
10 adjacent to the facility's license.

11 SEC. 3. Section 1760.7 is added to the Health and Safety Code,  
12 to read:

13 1760.7. A pediatric day health and respite care facility shall  
14 provide pharmacy services that satisfy all of the following:

15 (a) (1) Medications shall be supplied to the licensed nursing  
16 personnel of the pediatric day health and respite care facility by  
17 the ~~child's~~ *patient's* parent, foster parent, or legal guardian in the  
18 original dispensing container that specifies administration  
19 instructions.

20 (2) Medications shall be administered only upon written and  
21 signed orders of the ~~child's~~ *patient's* attending physician.

22 (3) The pediatric day health and respite care facility shall not  
23 order medications from a pharmacy or take delivery of medications  
24 from a pharmacy.

25 (4) The pediatric day health and respite care facility shall not  
26 accept a ~~child~~ *patient* into the facility if the ~~child's~~ *patient's*  
27 medications have expired or are scheduled to expire during the  
28 ~~child's~~ *patient's* stay at the facility.

29 (b) (1) Physician orders shall be current and maintained in the  
30 ~~child's~~ *patient's* medical record at the pediatric day health and  
31 respite care facility. Verbal orders from the attending physician  
32 for services to be rendered at the facility may be received and  
33 recorded by licensed nursing personnel in the ~~child's~~ *patient's*  
34 medical record at the facility and shall be signed by the attending  
35 physician within 30 working days.

36 (2) Medications shall not be administered to a ~~child~~ *patient*  
37 unless the facility first verifies that the medication was ordered by  
38 a physician. Verification may be obtained by contacting the  
39 physician's office or by being provided with a copy of the  
40 physician's order for the medication.

1 (c) The pediatric day health and respite care facility shall  
2 maintain records of medication administered for at least one year,  
3 unless a longer period is required by state or federal law. The  
4 records of medication administered shall be a part of the ~~child's~~  
5 *patient's* plan of care.

6 (d) The pediatric day health and respite care facility may treat  
7 changes in the ~~child's~~ *patient's* condition, such as new onset pain,  
8 nausea, diarrhea, infections, or other similar changes, in accordance  
9 with the ~~child's~~ *patient's* plan of care if the ~~child~~ *patient* has been  
10 prescribed medications to treat these anticipated symptoms, and  
11 *the treatment* does not present a risk to the health and safety of  
12 themselves, other ~~children,~~ *patients,* staff, or other individuals with  
13 whom the ~~child~~ *patient* may come into contact. ~~Children~~ *A patient*  
14 who ~~present~~ *presents* with symptoms that are not anticipated or  
15 planned for in the plan of care shall not remain in the facility.

16 (e) Other requirements as specified in subdivision (a) of Section  
17 72375, and subdivision (a) of Section 72377, of Article 3 of  
18 Chapter 3 of Division 5 of Title 22 of the California Code of  
19 Regulations.

20 (f) *Only licensed nursing personnel, acting in accordance with*  
21 *their scope of practice, may accept, inspect the condition of medical*  
22 *containers, and record the receipt and the return of all medications*  
23 *in a pediatric day health and respite care facility. The facility shall*  
24 *comply with Section 72313 of Title 22 of the California Code of*  
25 *Regulations with regard to the administration of medication.*

26 (g) *A pediatric day health and respite care facility shall comply*  
27 *with all applicable state and federal laws regarding the labeling*  
28 *condition of medication containers.*

29 SEC. 4. Section 1760.9 is added to the Health and Safety Code,  
30 to read:

31 1760.9. A pediatric day health and respite care facility may  
32 implement policies and procedures that prohibit smoking by ~~clients,~~  
33 *patients,* parents, staff, visitors, or consultants within the facility  
34 or on the premises, if the prohibition is clearly stated in the  
35 admission agreement, and notices are posted at the facility.

36 SEC. 5. Section 1761.85 is added to the Health and Safety  
37 Code, to read:

38 1761.85. Sections 1761.2, 1761.4, and 1761.8 do not prohibit  
39 the use of alternate space utilization, new concepts of design,  
40 treatment techniques, equipment and alternate finish materials, or

1 other flexibility, if written approval is granted by the local building  
2 authority.

3 SEC. 6. Section 1762 is added to the Health and Safety Code,  
4 to read:

5 1762. (a) In order to obtain a license under the provisions of  
6 this chapter to establish, conduct, or maintain a pediatric day health  
7 and respite care facility, a person, entity, political subdivision of  
8 the state, or governmental agency shall file with the state  
9 department a verified application on a form prescribed, prepared,  
10 and furnished by the state department, containing information as  
11 may be required by the state department for the proper  
12 administration and enforcement of this chapter.

13 (b) The state department shall initiate an initial licensing  
14 inspection of a *Transitional Health Care Needs Optional Service*  
15 *Unit* within 60 days of receipt of a completed application.

16 SEC. 7. Section 1762.2 is added to the Health and Safety Code,  
17 to read:

18 1762.2. (a) If a pediatric day health and respite care facility  
19 or an applicant for a license has not been previously licensed, the  
20 state department shall issue a provisional license to the facility  
21 only as provided in this section.

22 (b) A provisional license to operate a pediatric day health and  
23 respite care facility shall terminate six months from the date of  
24 issuance, or the date that the state department is able to conduct a  
25 full and complete inspection, whichever is later.

26 (c) Within 30 days prior to the termination of a provisional  
27 license, the state department shall give the facility a full and  
28 complete inspection, and, if the facility meets all applicable  
29 requirements for licensure, a regular license shall be issued. If the  
30 facility does not meet the requirements for licensure but has made  
31 substantial progress towards meeting the requirements, as  
32 determined by the state department, the initial provisional license  
33 shall be renewed for six months.

34 (d) If the state department determines that there has not been  
35 substantial progress towards meeting licensure requirements at the  
36 time of the first full inspection provided by this section, or, if the  
37 state department determines upon its inspection made within 30  
38 days of the termination of a renewed provisional license that there  
39 is lack of full compliance with the requirements, the state  
40 department shall not issue a further license.

1 (e) If an applicant for a provisional license to operate a pediatric  
2 day health and respite care facility has been denied provisional  
3 licensing by the state department, the applicant may contest the  
4 denial by filing a request for a hearing pursuant to Section 131071.

5 (f) The state department shall not apply less stringent criteria  
6 when granting a provisional license pursuant to this section than  
7 it applies when granting a permanent license.

8 SEC. 8. Section 1762.4 is added to the Health and Safety Code,  
9 to read:

10 1762.4. (a) A license issued under this chapter shall expire 12  
11 months from the date of its issuance. The licensee shall pay a fee,  
12 not to exceed the reasonable regulatory cost to the state department,  
13 to the state department annually, not less than 30 days prior to  
14 expiration date, subject to the state department mailing the notice  
15 of renewal in accordance with subdivision (b).

16 (b) (1) At least 45 days prior to the expiration of a license issued  
17 pursuant to this chapter, the state department shall mail a notice  
18 for renewal to the licensee.

19 (2) A license renewal shall be submitted with the necessary fee  
20 in accordance with subdivision (a). A license shall be deemed  
21 renewed upon payment of the necessary fee, commencing from  
22 the license's expiration date. If the requirements of this section  
23 are satisfied, the state department shall issue a license to the facility  
24 by the expiration date of the license to ensure the provider remains  
25 in good standing. The facility's license shall be mailed within 15  
26 calendar days after the date the state department receives the  
27 renewal fee.

28 SEC. 9. Section 1762.6 is added to the Health and Safety Code,  
29 to read:

30 1762.6. Every pediatric day health and respite care facility for  
31 which a license has been issued shall be periodically inspected by  
32 a duly authorized representative of the state department. Reports  
33 of each inspection shall be prepared by the representative upon  
34 forms prepared and furnished by the state department and filed  
35 with the state department. The inspection shall be for the purpose  
36 of ensuring that the pediatric day health and respite care facility  
37 is complying with the provisions of this chapter and the rules and  
38 regulations of the state department.

39 SEC. 10. Section 1762.8 is added to the Health and Safety  
40 Code, to read:

1 1762.8. The state department may deny an application for, or  
2 suspend or revoke a license issued under the provisions of this  
3 chapter in the manner provided in Section 1763 ~~upon~~ upon, any  
4 of the following grounds:

5 (a) A serious violation by the licensee of any of the provisions  
6 of this chapter, of any other law, or of the rules and regulations  
7 promulgated under this chapter that jeopardizes the health and  
8 safety of ~~clients~~ patients.

9 (b) Aiding, abetting, or permitting the commission of any illegal  
10 act.

11 (c) Willful omission or falsification of a material fact in the  
12 application for a license.

13 SEC. 11. Section 1763 is added to the Health and Safety Code,  
14 to read:

15 1763. Proceedings for the denial, suspension, or revocation of  
16 licenses, or denial or withdrawal of approval under this chapter  
17 shall be conducted in accordance with Section 131071. The  
18 suspension, expiration, or forfeiture by operation of law of a license  
19 issued by the state department, its suspension, forfeiture, or  
20 cancellation by order of the state department or by order of a court,  
21 or its surrender without the written consent of the state department,  
22 shall not deprive the state department of its authority to institute  
23 or continue a disciplinary proceeding against the licensee upon  
24 any ground provided by law or to enter an order suspending or  
25 revoking the license or otherwise taking disciplinary action against  
26 the licensee on any of those grounds.

27 SEC. 12. Section 1763.2 is added to the Health and Safety  
28 Code, to read:

29 1763.2. The state department has authority to make reasonable  
30 accommodation for exceptions to the standards in this chapter if  
31 the health, safety, and quality of patient care is not compromised.  
32 Prior written approval communicating the terms and conditions  
33 under which the exception is granted shall be required. An  
34 applicant shall request an exception in writing accompanied by  
35 detailed supporting documentation.

36 SEC. 13. Section 1763.4 is added to the Health and Safety  
37 Code, to read:

38 1763.4. (a) For purposes of this chapter, ~~“Transitional the~~  
39 *following definitions shall apply:*

1 (1) “Distinct part” means an identifiable unit accommodating  
2 beds or patient space, including, but not limited to, contiguous  
3 beds or patient space, a wing, floor, or building approved by the  
4 state department for a specific purpose.

5 (2) “Older children” means patients who are 15 to 21 years of  
6 age, inclusive.

7 (3) “Transitional Health Care Needs Optional Service Unit” or  
8 “optional service unit” means a functional unit of a pediatric day  
9 health and respite care facility that is organized, staffed, and  
10 equipped to provide care to individuals who are 22 years of age  
11 or older.

12 ~~(1) Clients~~

13 (A) *Patients* receiving care in the optional service unit shall be  
14 in age-appropriate groupings as provided for in the pediatric day  
15 health and respite care facility’s policies and procedures. Older  
16 ~~adolescents under the age of 22 children~~ are not precluded from  
17 being cared for in the same optional service unit as the ~~younger~~  
18 ~~adults~~. *patients who are 22 years of age or older. If a pediatric*  
19 *day health and respite care facility proposes to provide care to*  
20 *older children in the optional service unit, the facility shall have*  
21 *policies, procedures, equipment, and supplies to meet the needs*  
22 *of those patients. A pediatric day health and respite care facility*  
23 *is not required to operate an optional service unit.*

24 ~~(2)~~

25 (B) In order to continue receiving care in the pediatric day health  
26 and respite care facility, ~~participants~~ *patients* who are 22 years of  
27 age or older shall have a developmental age of 18 years of age or  
28 younger, as evidenced by the ~~client’s~~ *patient’s* Individual Education  
29 Plan (IEP), Regional Center Assessment, physician’s assessment,  
30 or other assessment using a standardized assessment tool that is  
31 nationally recognized in the field. *A patient who previously*  
32 *received services from a pediatric day health and respite care*  
33 *facility, who is 22 years of age or older, and who satisfies the*  
34 *requirements of this subparagraph may also receive services in*  
35 *an optional service unit.*

36 (b) An optional service unit shall be approved by the state  
37 department. A pediatric day health and respite care facility desiring  
38 approval for an optional service unit shall file an application on  
39 forms furnished by the state department. The state department shall

1 list on the facility license each optional service for which approval  
2 is granted.

3 (c) ~~Care~~ Except as provided in subparagraph (A) of paragraph  
4 (3) of subdivision (a), care for ~~clients~~ patients who are 22 years  
5 of age or older shall be provided in a distinct part of the pediatric  
6 day health and respite care facility or optional service unit, separate  
7 from the area where care is provided to ~~younger clients~~ patients  
8 who are 21 years of age or younger. The facility shall establish  
9 and implement policies and procedures for determining the age  
10 ranges of ~~clients~~ patients who are cared for in the optional service  
11 unit. These policies and procedures shall include, but not be limited  
12 to, consideration of the ~~client's~~ patient's chronological age,  
13 developmental age, and ~~size~~. size, and shall reflect the needs of  
14 individual patients through a comprehensive assessment.

15 (d) The pediatric day health and respite care facility shall ensure  
16 that its staffing and equipment are sufficient to provide services  
17 to ~~clients~~ patients who are 22 years of age or older.

18 (e) A Transitional Health Care Needs Optional Service Unit  
19 shall have written policies and procedures for the management of  
20 the service. The policies and procedures shall be established and  
21 implemented by the patient care policy committee described in  
22 Section 1760.4

23 (f) (1) The state department may review and approve the  
24 policies and procedures for an optional service unit.

25 (2) The State Department of Developmental Services and the  
26 regional centers may review the policies and procedures for an  
27 optional service unit.

28 SEC. 14. This act is an urgency statute necessary for the  
29 immediate preservation of the public peace, health, or safety within  
30 the meaning of Article IV of the Constitution and shall go into  
31 immediate effect. The facts constituting the necessity are:

32 In order to protect, at the earliest possible time, the health and  
33 safety of medically fragile adults who are at imminent risk of aging  
34 out of pediatric day health and respite care facilities, it is necessary  
35 that this act take effect immediately.

O