ORANGE COUNTY ADULT ALCOHOL AND DRUG SOBER LIVING FACILITIES CERTIFICATION GUIDELINES

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ORANGE COUNTY ADULT ALCOHOL AND DRUG SOBER LIVING FACILITIES CERTIFICATION GUIDELINES (revised 2004)

CHAPTER 1: INTRODUCTORY PROVISIONS

ARTICLE 1: HISTORY AND PURPOSES OF CERTIFICATION PROGRAM

Section 100 Historical Perspective

The County of Orange recognizes the desirability of "home" type facilities designed for and dedicated to providing drug and alcohol free environments to individuals with alcohol and drug addictions. To date, certain of these facilities have operated in Orange County without a method of ensuring that these facilities provide quality environments for recovery or provide for community safety.

In 2000, the Orange County Board of Supervisors directed the Orange County Sheriff's Department to form a committee that included the Probation Department, District Attorney, Public Defender, Health Care Agency, State Parole Board, the Courts, representatives of Orange County cities, and a wide spectrum of community providers. The Sober Living Coalition and the Orange County Addiction Treatment Provider Association later added representatives to the committee, and a community representative was designated by the Board of Supervisors. The purpose of this committee was to develop a process for certifying and monitoring adult residential drug and alcohol sober living facilities.

In 2001, by ordinance and resolution, the Board of Supervisors approved the Orange County Adult Alcohol and Drug Sober Living Facilities Certification Program (hereafter "Certification Program"). The standards and procedures for the Certification Program are contained in this document, entitled "Orange County Adult Alcohol and Drug Sober Living Facilities Certification Program Guidelines" (hereafter "the Certification Guidelines"), and in Article 1 of Division 6 of Title V (Sections 5-6-1 et seq.) of the Orange County Codified Ordinances.

In 2004, following a report to the Board of Supervisors, the Board made minor amendments as recommended.

Section 101 Purpose

The sole purposes of the Certification Program are to provide access to quality residential facilities for persons in need of drug- and alcohol-free recovery environments, and to promote public safety.

Section 102 Reserved

ARTICLE 2: DEFINITIONS

Section 103 Definitions

The following general definitions apply to terminology used in the Certification Guidelines, except where specifically noted otherwise:

- 1. ADULT A person who is 18 years of age or older or a minor who has been emancipated pursuant to former Part 2.7 (commencing with former section 60), Division 1 of the Civil Code or Part 6 (commencing with section 7000), Division 11 of the Family Code.
- 2. CERTIFICATE OF COMPLIANCE A certificate that is issued by the Orange County Sheriff-Coroner Department to a sober living facility that has applied for certification under the Certification Guidelines and has met the requirements set forth in the Certification Guidelines. The Certificate of Compliance is valid for one year from the issue date.
- 3. CERTIFICATION APPEALS BOARD The body having the administrative responsibility for conducting hearings on all appeals of denial of certification or sanctions imposed by the Certification Coordinator.
- 4. CERTIFICATION COORDINATOR A lieutenant with the Orange County Sheriff-Coroner Department who is responsible for the overall management and coordination of the Certification Program.
- 5. CERTIFICATION GUIDELINES This document, entitled "Orange County Adult Alcohol and Drug Sober Living Facilities Certification Program Guidelines".
- 6. CERTIFICATION PROGRAM The Orange County Adult Alcohol and Drug Sober Living Facilities Certification Program, adopted by the Orange County Board of Supervisors in December 2001 and administered by the Orange County Sheriff-Coroner. The standards and procedures for the Certification Program are set forth in Article 1 of Division 6 of Title V (Section 5-6-1 et seq.) of the Orange County Codified Ordinances and in the Certification Guidelines.
- 7. CERTIFIED FACILITY A sober living facility that has been issued a Certificate of Compliance that currently is valid.

- 8. COUNSELOR CERTIFYING ORGANIZATION A statewide or national professional organization offering counselor certifications in the field of drug or alcohol addiction to eligible individuals. The organization must have standardized qualifications for certification, including education and/or employment requirements. Counselor certifying organizations include, but are not limited to, the California Association of Alcohol and Drug Counselors (CADAAC) and organizations providing certification as a Certified Addiction Specialist (CAS). Local community college certification programs are also accepted counselor certifying organizations.
- 9. CONVICTION A final judgment or a verdict or finding of guilty, a plea of guilty, or a plea of nolo contendere.
- 10. COUNTY REFERRAL A person directed to a sober living facility by the Probation Department, the Orange County Health Care Agency or another agency of the County of Orange for continued recovery from drug or alcohol addiction. The person being referred still may be under the supervision of the Orange County Superior Court or the Probation Department. This may include a person referred to a facility prior to adjudication of his/her criminal case.
- 11. COURT REFERRAL Any person directed to a sober living facility by the Orange County Superior Court. This may include a person referred to a facility prior to adjudication of his/her criminal case.
- 12. D.A.D.P. State of California, Department of Alcohol and Drug Programs. This is the State agency responsible for licensing of residential recovery treatment facilities. D.A.D.P. does not license sober living facilities.
 - 13. DAY A calendar day unless otherwise specified.
- 14. DIRECTOR AND HEAD OF ADMINISTRATIVE STAFF Also referred to as "Director." The manager of a sober living facility who is responsible for the supervision of all residents and of all staff employed by, or volunteering for, the facility, and for approving all progress reports about residents' recovery that are provided to courts, county or city agencies, or other providers of recovery services. He/ she is responsible for overall management of the facility.
- 15. FACILITY Depending on context, a sober living facility or the person or entity that operates a sober living facility.
- 16. HOUSE MANAGER A person who resides at a sober living facility, or any of multiple persons who collectively are present at the facility during curfew hours which shall be at a minimum between the hours of 11:00 p.m. and 6:00 a.m. weekdays and 12:00 a.m. to 6:00 a.m. on weekends, and who is/are in charge of the day-to-day operation of the facility. The house manager shall be responsible to ensure the safety of the building(s) and grounds; to collect fees from residents; to maintain compliance by residents and staff with facility rules and the Certification Guidelines; and to provide

support and referral information, but not counseling or treatment, to residents of the facility.

- 17. OUTPATIENT Refers to drug and alcohol treatment programs in which the resident does not reside at the facility where the resident receives treatment.
 - 18. PAROLE BOARD State Parole Board.
- 19. PEER COORDINATOR A paid or volunteer staff member who assists the house manager. The peer coordinator may oversee the household chore list and schedule; help to facilitate facility meetings; and report concerns regarding the behavior of residents and the maintenance of the facility to the house manager or director.
 - 20. PROBATION DEPARTMENT Orange County Probation Department.
- 21. PROGRESS REPORT An oral and/or written report of the overall progress towards recovery from substance abuse of a resident who is residing at a sober living facility. Progress reports may be made due to a court order or the terms of a resident's probation or parole, or, at the request of and with the consent of a resident, may be made to other entities or individuals, such as the resident's therapist or referring agency.
 - 22. RESIDENT An individual who resides in a sober living facility.
- 23. RESIDENTIAL FACILITY Refers to programs in which the residents reside at the facility. Hospitals are not included in this category. Facilities covered by the Certification Guidelines are residential facilities.
- 24. REVOCATION OF CERTIFICATION A disciplinary action that is imposed by the Certification Coordinator and upheld by the Certification Appeals Board to revoke certification of a facility. Revocation of certification is indefinite. Except in emergency situations, a revocation will not become effective until the time for the facility to appeal has elapsed, or if the facility appeals, until the revocation is upheld by the Certification Appeals Board. To the extent it is clinically appropriate, all County referrals shall be asked to move from a facility from which certification has been revoked and will be placed in a certified facility. Except as required by law or contractual obligations or as permitted by the Certification Guidelines, County personnel shall cease referring individuals to a facility from which certification has been revoked.
- 25. SECTION 200 REVIEW A written determination from the applicable local jurisdiction, made following an inspection of a facility by the local jurisdiction, that the facility is in compliance with the requirements of Section 200 of the Certification Guidelines.
- 26. "SHALL" and "WILL" mean mandatory, "SHOULD" means recommend, and "MAY" means permissive.

- 27. SOBER LIVING FACILITY A facility offering an alcohol and drug free residence for unrelated adults who are recovering from alcohol or drug addictions. These facilities may also be known as Transitional Living Environments. No drug or alcohol treatment services are provided on site. D.A.D.P. does not license such a facility to offer residential treatment for drug or alcohol abuse or addiction.
- 28. SUSPENSION OF CERTIFICATION A disciplinary action taken by the Certification Coordinator to suspend certification of a facility. A suspension is for a specific period of time. Except as required by law or contractual obligations or as permitted by the Certification Guidelines, County personnel shall cease referring individuals to a facility from which certification has been suspended. At their option, or, if applicable, at the discretion of the Superior Court, the Probation Department or the Parole Board, residents who were residing at the facility prior to the suspension may remain and complete their programs.

Section 104 Reserved

ARTICLE 3: AUTHORITY FOR AND EFFECT OF CERTIFICATION

Section 105 Voluntary Certification

The Certification Program is purely voluntary. No sober living facility shall be required to apply for or obtain certification under the Certification Guidelines. No facility shall be required to cease operation on account of its not being certified under the Certification Guidelines.

Section 106 Effect of Certification

- 1. It is anticipated that a period of approximately nine (9) months, until October 1, 2002, will be required to process all applications for certification that are filed during the initial response to the adoption of the Certification Program. During the period until October 1, 2002, it is anticipated that there will not be sufficient certified facilities to meet the demand for placement in said facilities.
- 2. Effective on October 1, 2002, and except as otherwise provided in the Certification Guidelines or as required by law or contractual obligations, County of Orange personnel, when referring a person to a sober living facility within the County of Orange, other than a facility operated by a State agency, shall refer a person who qualifies for admittance to a certified sober living facility only to a certified facility, if the referring County personnel determine that space is available in a certified facility that is suitable for the person being referred.
- 3. Certification, or lack of certification, is not intended to convey approval or disapproval of any sober living facility or its programs by the County of Orange or the

Orange County Sheriff-Coroner. Rather, certification shall be for informational purposes only.

- 4. Certification does not create a relationship of principal and agent between the County of Orange and any sober living facility, or between the County of Orange and any of the officers, employees, agents, contractors, or volunteers of any sober living facility.
- 5. On October 1, 2002, and as often thereafter as the list is updated, the Certification Coordinator shall provide to the Orange County Superior Court the list of certified facilities, in order to assist the Court in directing defendants into appropriate recovery environments.

Section 107 Reserved

CHAPTER 2: OBTAINING CERTIFICATION

ARTICLE 1: ELIGIBLE APPLICANTS

Section 108 Type of Facilities Eligible for Certification

- 1. Sober living facilities are eligible for certification pursuant to the Certification Guidelines.
- 2. In order to obtain a Certificate of Compliance, a facility must comply with the Certification Guidelines for each physical building comprising the facility.

Section 109 Who May Apply for Certification?

Any adult or firm, partnership, association, corporation or governmental entity may apply for certification. Strict nondiscrimination rules applicable to government programs shall be followed when considering applications for certification. The Certification Program shall be administered so as to be free of any unlawful discrimination based on ethnic group identification, race, religion, ancestry, color, creed, sex, marital status, national origin, age, political affiliation, medical condition, physical or mental disability, or sexual preference.

Section 110 Reserved

ARTICLE 2: APPLICATION PROCESS

Section 111 How to Obtain Application and Information

Applications and application information may be obtained by contacting the Orange County Sheriff/Certification Coordinator, Adult Alcohol and Drug Sober Living Facilities Certification Program, North Justice Center, 1275 North Berkeley, Fullerton,

California 92832 (Telephone: (714) 773-4520). Completed applications for certification should be submitted to the Certification Coordinator.

Section 112 Documentation to Be Submitted with Application

Each applicant facility shall submit to the Certification Coordinator a completed application form and the following additional documents:

- 1. The facility's Policy and Procedures Manual (Sections 157 and 158 of the Certification Guidelines).
 - 2. The facility's rules for residents, including:
 - a. The facility's policy prohibiting alcohol or non-prescribed drugs on the premises (Section 166 of the Certification Guidelines);
 - b. The facility's' prescription drug policy (Section 167 of the Certification Guidelines);
 - c. The facility's smoking policy (Section 168 of the Certification Guidelines);
 - d. The facility's rules and procedures regarding co-ed interaction, if applicable (Section 177 of the Certification Guidelines);
 - e. The facility's visitation policy (Section 180 of the Certification Guidelines).
- 3. Copies of all forms provided to residents and potential residents, including blank copies of all forms that residents or potential residents are required to complete and/or sign.
- 4. The facility's staff information (Section 132 of the Certification Guidelines).
- 5. The facility's resident selection criteria (Section 153 of the Certification Guidelines).
- 6. The facility's policy for alternative referral (Section 153 of the Certification Guidelines).
- 7. The facility's intake procedures (Section 155 of the Certification Guidelines).
 - 8. The facility's relapse policy (Section 165 of the Certification Guidelines).

- 9. The facility's fee schedule (Section 187 of the Certification Guidelines).
- 10. The facility's policy regarding delinquent payments and payment plans (Section 188 of the Certification Guidelines).
- 11. The facility's policy regarding refunds for advance payment of fees and repayment of fees (Section 189 of the Certification Guidelines).
- 12. The facility's food services and preparation schedule and policy, if applicable (Section 195 of the Certification Guidelines).
- 13. Proof that the names of all staff, paid and volunteer, of the facility have been submitted to the Orange County Sheriff Department for the purpose of conducting a background check.

For those staff who submit to voluntary fingerprint checks and criminal history checks, the results will be sent directly from the State Department of Justice or the U.S. Department of Justice, as applicable, to the Certification Coordinator.

14. A Section 200 Review from the applicable local jurisdiction, or permission for the Certification Coordinator to notify the local jurisdiction or the County of Orange, as appropriate, to conduct a Section 200 Review. The application will not be deemed complete until the Section 200 Review is completed and received by the Certification Coordinator. The local jurisdiction or the County of Orange, as applicable, will advise the applicant of the fees for the Section 200 review, and the fees for this inspection will be paid by the facility. All pending inspections must be completed and the Section 200 Review must be received by the Certification Coordinator within thirty (30) days of the original application to the local jurisdiction or the County of Orange, as applicable, for the Section 200 review.

For a fee, County of Orange personnel will complete the Section 200 Review if requested by a) the local jurisdiction, or b) the Certification Coordinator when the facility is located in an area where no other local jurisdiction performs Section 200 reviews. In addition, if the local jurisdiction is unable to complete the Section 200 Review within the thirty (30) day period, County personnel will conduct the inspection, for a fee, and submit the results to the Certification Coordinator.

- 15. Written consent, on the form provided with the application and executed by both the director and the house manager of the facility, to inspections of the facility by appropriate local jurisdiction or County of Orange personnel for the purposes of determining initial compliance with the Certification Guidelines, monitoring continued compliance with the Certification Guidelines, and investigating complaints of violation of the Certification Guidelines.
- 16. Proof that the facility has obtained insurance coverage at least as extensive in both coverage and amount as is required by County's CEO/ Risk Management

Services, from an insurer that is acceptable to County's CEO/ Risk Management Services. CEO/Risk Management Services' current insurance requirements will be made available with the application for certification.

- a. The Certification Coordinator will notify the facility when it appears that all other aspects of the application are in order and the application for certification will be granted, so that the applicant may obtain amendments of its insurance policies to include Orange County as an additional insured and to include such additional policy language as is specified by CEO/ Risk Management Services.
- b. Before certification is finally granted and a Certificate of Compliance issued, the facility must present to the Certification Coordinator written proof that all required insurance policies have been amended to include Orange County as an additional insured and to include such additional policy language as is specified by CEO/Risk Management Services.

Section 113 Certification Coordinator Review of Application

- 1. The Certification Coordinator will review applications for certification in the order in which the applications became complete.
 - 2. The Certification Coordinator shall:
 - a. Review each application for certification and supporting documentation to determine completeness and compliance with the Certification Guidelines;
 - b. Verify the information provided by the facility about its paid and volunteer staff with information obtained by the Sheriff-Coroner, and from the State Department of Justice and the U.S. Department of Justice (if available), as specified in Section 133;
 - c. Verify that the facility has a completed Section 200 Review;
 - d. Make or arrange such additional inspection(s) of the facility, interview(s) with its staff and/ or residents who are court referrals, review(s) of records and documents, or such other activities as may be necessary or appropriate to ascertain whether the facility complies with the Certification Guidelines;
 - e. Within thirty (30) working days of receipt of a completed application, issue to the facility by mail a Certificate of Compliance, if the facility is in compliance with the Certification Guidelines, or a written notification of denial of certification, if the facility is not in compliance with the Certification Guidelines;

- f. If an application is still incomplete at the end of ninety (90) working days after receipt of an incomplete application, notify the facility in writing of the information that is missing. The facility will have thirty (30) days from the date of the notification to provide the missing information;
- g. If an application is otherwise complete, but areas of non-compliance with the Certification Guidelines that are susceptible of correction within thirty (30) days are identified, notify the facility in writing of the deficiencies, in accordance with Section 208 of the Certification Guidelines. Thereafter, the Certification Coordinator shall treat the application as incomplete until the deficiencies are timely and adequately corrected.
- 3. The Certification Coordinator may terminate the review of an application if:
 - a. The facility fails to provide additional information or correct deficiencies within the required time period unless good cause is shown for delay;
 - b. The facility fails to provide a Section 200 Review within 30 days of notification pursuant to Section 113(2)(f) that the Section 200 review is missing from its application;
 - c. The facility submits a written request to withdraw the application;
 - d. The facility provides false, misleading or incomplete information on or with its application.
- 4. Termination of the review process shall not constitute denial of certification.

Section 114 Withdrawal of Application

- 1. A facility may withdraw an application for certification by submitting a written request to the Certification Coordinator.
- 2. Withdrawal shall not prohibit the Certification Coordinator from taking action to deny any application for certification.

Section 115 Reserved

Section 116 Reserved

ARTICLE 3: CERTIFICATE OF COMPLIANCE/ PERIOD OF CERTIFICATION

Section 117 Requirement to Post Certificate of Compliance

- 1. Upon obtaining certification, a facility shall post its Certificate of Compliance in a conspicuous place in the facility, where it can be seen by anyone entering the facility.
- 2. Each facility shall make the Certificate of Compliance available for inspection upon request.

Section 118 Period of Certification

Certification shall be effective for a one-year period and shall expire automatically on the anniversary of the date of issuance of the Certificate of Compliance, unless the certification earlier has been renewed.

Section 119 Automatic Termination of Certification during One-Year Certification Period

Certification shall automatically terminate during the one year certification period whenever the owners or operators of a certified facility:

- 1. Sell or transfer an ownership interest in the facility; however, when the facility is owned by a corporation, the corporation will not be deemed to have transferred an ownership interest in the facility when the transfer or sale was solely of stock in the corporation and does not constitute a majority change in ownership of the stock of the corporation;
- 2. Transfer to a person(s) or entity(s), other than a resident or a live-in staff person, a right to occupy or possess all or any part of the facility;
- 3. Change the personnel responsible for management of the facility, without completing the steps outlined in Sections 145-148 of the Certification Guidelines;
- 4. Voluntarily surrender the Certificate of Compliance to the Certification Coordinator;
 - 5. Move the facility to a new location;
 - 6. Die (only if the facility is owned and operated by a sole proprietor); or
- 7. Actually or constructively abandon the facility for a period of thirty (30) days or more.

Section 120 Reserved

ARTICLE 4: RENEWAL OF CERTIFICATION

Section 121 Renewal of Certification

- 1. At least sixty (60) working days prior to the expiration date noted on the Certificate of Compliance, the Certification Coordinator shall send a notice informing the facility of the date when the current period of certification will expire and advising the facility that it must submit within thirty (30) days any information described in Section 112 of the Certification Guidelines that has changed during the certification period.
- 2. The facility also will be required to obtain a re-inspection from the local jurisdiction or the County of Orange, as applicable, and submit an updated Section 200 Review. The updated Section 200 Review shall be submitted to the Certification Coordinator no later than fifteen (15) days before the expiration of certification.
- 3. The facility must be found to be in compliance with the Certification Guidelines in order for certification to be renewed.

Section 122 Reserved

ARTICLE 5: DENIAL OF CERTIFICATION

Section 123 Grounds for Denial of Certification

The Certification Coordinator may deny a facility's application for certification for any of the following reasons:

- 1. The facility is not in compliance with any provision of the Certification Guidelines;
- 2. The facility has failed to remedy each deficiency identified by the Certification Coordinator within the time period specified;
- 3. The facility provided false, misleading or incomplete information to the Certification Coordinator.

Section 124 Facility Notice and Advisement of Right to Reconsideration

If the Certification Coordinator denies certification, a written notice shall be sent to the applicant by first class mail. The notice shall:

1. Explain the reasons for denial;

- 2. Detail the correction(s) required to bring the facility into compliance with the Certification Guidelines;
- 3. Advise the facility of the rights to reconsideration and appeal in accordance with the Certification Guidelines.

Section 125 Reserved

ARTICLE 6: RECONSIDERATION

Section 126 Procedure for Reconsideration

- 1. A facility that has been denied certification may file a request for reconsideration with the Certification Coordinator. The request shall be in writing and shall be filed within fifteen (15) calendar days from the date of the notice of denial of certification
- 2. The Certification Coordinator shall schedule a hearing that shall be held no later than thirty (30) calendar days after receipt of a timely request for reconsideration.
- 3. The Certification Coordinator shall serve a notice of hearing on the facility, no later than ten (10) calendar days prior to the scheduled date of the hearing.
- 4. At the hearing before the Certification Coordinator, the facility shall be given an opportunity to present witnesses and documentary evidence.
- 5. The hearing will be conducted informally and the technical rules of evidence shall not apply. Any and all evidence that the Certification Coordinator deems reliable, relevant and not unduly repetitious may be considered.
- 6. Within fifteen (15) calendar days after the hearing, the Certification Coordinator shall issue and transmit to the facility a written decision sustaining, reversing, or modifying his/her earlier decision.
- 7. The decision by the Certification Coordinator after the hearing shall be final unless the facility or, if applicable, a member of its staff, files an appeal to the Certification Appeals Board pursuant to Sections 228, 229 and 234 of the Certification Guidelines.

Section 127 Reserved

CHAPTER 3: GENERAL CERTIFICATION REQUIREMENTS

ARTICLE 1: GENERAL REQUIREMENTS

Section 128 General Requirements

- 1. Each sober living facility, including sober living facilities associated with licensed residential recovery treatment facilities, and its staff shall comply with the Certification Guidelines.
- 2. Each sober living facility, including sober living facilities associated with licensed residential recovery treatment facilities, and its staff shall comply with all rules, policies and procedures of the facility.

Section 129 Reserved

ARTICLE 2: CONTRACTUAL REQUIREMENTS

Section 130 Greater or Conflicting Contract Requirements

Facilities certified pursuant to the Certification Guidelines may be under contract with the County of Orange to provide alcohol and drug-free housing services. The Certification Guidelines are not intended to supersede contractual requirements, unless the requirements of the Certification Guidelines are greater than those in the contract. To the extent a contract between a certified facility and the County of Orange imposes requirements or obligations on the facility that are greater than the requirements of the Certification Guidelines, the contract requirements and obligations shall prevail.

Section 131 Reserved

CHAPTER 4: STAFF REQUIREMENTS

ARTICLE 1: STAFF APPLICATION DATA

Section 132 Staff Information to Be Provided with Application

An application for certification and supporting documentation shall contain the following information about the staff of the facility:

- 1. A list of all staff positions, paid or volunteer, and a clear description of the duties of each position.
- 2. The following information about each staff member, whether paid or volunteer:

- a. Full name, and any other names used previously or currently;
- b. Current residence address and phone number;
- c. Date of birth;
- d. Social Security number;
- e. Driver's license number;
- f. Education and academic achievements
- g. Prior work experience
- h. History of convictions, if any;
- i. Current criminal street gang and/or prison gang participation, if any.

Section 133 Staff Required to Submit to Background Check

- 1. Prior to certification of a facility, all staff, paid and volunteer, of the facility shall be subject to a background check by the Orange County Sheriff's Department.
- 2. In order for the facility to qualify for certification, the director and house manager will be requested to voluntarily submit to a more extensive background check including "live scan" fingerprinting and a check of summary criminal history information through the State Department of Justice and, if available, the U.S. Department of Justice. In addition, any other staff member may be requested to voluntarily submit to the above-described more extensive background check when the Sheriff's background check raises a reasonable suspicion that the staff member does not meet the criminal history requirements for his/her position. All criminal history information will be sent directly from the State Department of Justice and the U.S. Department of Justice to the Certification Coordinator.

Section 134 Falsifying Information

- 1. No staff member of a facility shall falsify information on his/her application for employment or on an application for certification of a facility.
- 2. Falsifying information may include but is not necessarily limited to the following: falsifying true legal name, date of birth, current address, social security number, or driver's license number.

3. The presence at the facility of an employee or volunteer who falsified information on a certification application or on his/her application for employment or a volunteer position is a violation of the Certification Guidelines and shall be grounds for denial of certification, if the employee or volunteer remains at the facility for more than fifteen (15) calendar days after the director knew or should have known of the falsification.

Section 135 County Authority to Conduct Staff Background Check

In 2001, the Orange County Board of Supervisors adopted an Ordinance to Authorize Voluntary Certification of Alcohol and Drug Sober Living Facilities. The ordinance includes section 5-6-4, entitled "Criminal activity by owners, operators, managers, employees and volunteers of certified sober living facilities." That section authorizes the Sheriff-Coroner to access summary criminal history information about specified facility personnel pursuant to Penal Code sections 11105(b)(10) and 13300(b)(10) and sets forth the types of criminal history that disqualify individuals from holding specified positions at certified facilities.

Section 136 Reserved

ARTICLE 2: STAFF QUALIFICATIONS AND DUTIES

Section 137 Prior Employment History of Improper Conduct

No staff member, paid or volunteer, of a facility shall have a prior employment history of any of the following improper conduct:

- 1. Forging or falsifying documents to a court, referring agencies or an alcohol or drug recovery facility;
 - 2. Sexual assault or sexual harassment
- 3. Inappropriate behavior with staff or residents at another alcohol and drug recovery facility that resulted in termination or resignation from that facility. Inappropriate behavior shall include, but is not limited, to the following:
 - a. Physical assault;
 - b. Embezzlement or other theft related conduct;
 - c. Falsifying a drug test;
 - d. Selling or furnishing illegal drugs;
 - e. Selling or furnishing alcohol to a resident; or

f. Entering into a financial agreement, venture or proposition with a resident unless previously approved by the director of the facility.

Section 138 Paid and Volunteer Staff – Criminal History Qualifications

- 1. Prior to certification of a facility, all staff, paid and volunteer, shall pass an Orange County criminal justice background check conducted by the Orange County Sheriff Department.
 - a. No sober living facility shall be certified if any of its staff have been convicted of any of the following offenses:
 - (i) Sex offenses for which the person is required to register as a sex offender under California Penal Code section 290;
 - (ii) Arson offenses Violation of Penal Code sections 451, 451.1, 451.5, 452, 452.1, 453, 454, or 455; or
 - (iii) Violent felonies, as defined in Penal Code section 667.5, which involve doing bodily harm to another person, and for which the staff member was convicted within five years prior to employment.
 - b. No alcohol or drug recovery facility shall be certified if any of its staff participates in the criminal activities of a prison gang and/or criminal street gang, as defined in Penal Code section 186.22(f).
- 2. No certified facility shall employ a person or permit a person to act as a volunteer at the facility if that person has not passed a criminal background check by the Orange County Sheriff's Department using the criteria set forth in subsection 1 of Section 138 of the Guidelines.
- 3. Individual exceptions to staff qualifications set forth in Section 138, subsection 1 a.(iii) may be requested if the facility deems the decision will benefit the program. Requests for exceptions shall be submitted in writing, include appropriate justification of request, and must be approved by the Certification Coordinator in advance of employment.

Section 139 Director-Duties and Qualifications

1. A facility shall employ one or more persons who collectively perform the duties of Director and Head of Administrative Staff (also known as "director") that are set forth in Section 103 and elsewhere in the Certification Guidelines. The facility may designate a different title for this position, and may have two or more employees perform the duties of this position, as long as each person performing any of the duties meets the minimum requirements set forth in the Certification Guidelines for the position. In smaller facilities, the director also may perform the duties of other positions, as long as

he/she has adequate time during assigned work hours to perform the duties of director and all his/her other duties, and as long as he/she meets the requirements of the Certification Guidelines for all the positions he/she holds.

- 2. Education and Experience: The director shall have education, training and/or experience qualifying him/her to supervise drug or alcohol addicted residents, including residents who have criminal backgrounds. Each person performing any of the duties of the director shall also meet at least one of the following minimum requirements:
 - a. Possession of a four year college degree in a field related to rehabilitation of substance abusers; or
 - b. Certification by a professional counselor certifying organization;
 - c. A minimum of eighteen (18) months full time experience as a counselor, supervisor, or professional in a position similar to the director's position.

Proof that (a), (b), or (c) above has been met will be required (e.g., photocopy of professional degrees, references to show prior service in the recovery field).

3. Criminal History:

- a. A director shall meet the requirements set out in Section 138 of the Certification Guidelines.
- b. In addition, no facility shall be certified if its Director and Head of Administrative Staff is currently under parole or formal probation supervision.
- 4. Training: Persons holding positions encompassing the duties of director of a facility accepting court referrals or referrals from the Probation Department or the Parole Board, or the director's designee, shall attend all required meetings and training conducted by a Superior Court, the Probation Department, the Parole Board, or the Certification Coordinator. The Certification Coordinator shall provide notice of such required meetings and training.
- 5. Sobriety: The director, if he or she is a former drug or alcohol abuser, should have a minimum of two years of sobriety, and should be participating in a continued program of personal enhancement and recovery.

Section 140 House Manager-Duties and Qualifications

1. Each facility shall have a designated house manager or person of higher authority such as a director, who resides at the facility and performs the duties of house manager set forth in Section 103 of the Certification Guidelines. Alternatively, two or more employees may perform the duties of house manager, as long as each person

performing any of the duties meets the minimum requirements for house manager set forth in the Certification Guidelines.

- 2. The facility shall clearly identify the house manager to all residents. The lines of authority within the organization shall be clearly defined, with the director or house manager having final authority.
- 3. Drug Testing: The house manager will be subject to alcohol and drug testing as determined by the director of the facility and in accordance with applicable law

4. Duties:

- a. The house manager's duties include the duties described for the position in Section 103 of the Certification Guidelines.
- b. A house manager shall not approve progress reports.
- c. The house manager may administer drug and alcohol tests to the residents, to the extent permitted by law.

5. Criminal History:

- a. A House Manager shall meet the requirements set out in Section 138 of the Certification Guidelines.
- b. In addition, no facility shall be certified if its house manager is under parole or formal probation supervision on the date of the facility's application for certification or the house manager's employment by the facility, whichever is later.
- 6. Sobriety: If a house manager is a former drug or alcohol abuser, he/she should have a minimum of one year of sobriety and should be participating in a continued program of personal enhancement and recovery.

Section 141 Peer Coordinator-Duties and Qualifications

1. If a facility has a peer coordinator, it still shall have a house manager and/or director who resides at or is present or on call whenever residents are present at the facility. Notwithstanding the foregoing, in case of an emergency or unforeseen circumstance, the availability of other designated supervisory personnel to respond to the facility shall be sufficient.

2 Duties:

- a. Each facility may have a designated resident who assists the house manager, and who may perform the duties listed in Section 103 for a Peer Coordinator.
- b. The peer coordinator shall not supervise or provide referral information, counseling or treatment to residents.
- c. The peer coordinator shall not write or sign progress reports.
- 3. Compensation: A person working in the capacity of peer coordinator shall receive compensation for his/her services.
- 4. Drug testing: A peer coordinator shall be subject to alcohol and drug testing as determined by the director or house manager of the facility in accordance with applicable law.

5. Criminal History:

- a. A peer coordinator shall meet the requirements set out in Section 138 of the Certification Guidelines.
- b. In addition, no facility shall be certified if, on the date of the facility's application for certification or the peer coordinator's employment by the facility, whichever is later, a peer coordinator is under parole or formal probation supervision for a violent felony, as defined in Penal Code section 667.5.
- c. A facility will not be disqualified from certification on account of its peer coordinator's being under probation or parole supervision solely for a non-violent offense(s), if the peer coordinator otherwise meets the requirements of this section.
- 6. Sobriety: If a peer coordinator is a former drug or alcohol abuser, he/she should have a minimum of three months of sobriety and should be participating in a continued program of personal enhancement and recovery.

Section 142 Subsequent Criminal Activity or Convictions of Disqualifying Offenses

Certification previously granted to a sober living facility shall be revoked and a pending application for certification shall be denied if:

1. a. Any of the staff of a sober living facility or a peer coordinator are found to have been convicted, prior to the application for certification, of any offense that would have disqualified the facility from certification;

- b. Any of the staff of a sober living facility or a peer coordinator are convicted, while the application is pending or during the period of certification, of any offense that would have disqualified the facility from certification if the conviction had occurred earlier; or
- c. It is discovered that any of the staff of the facility is required to register as a sex offender pursuant to Penal Code section 290 or currently participates, or has participated at any time since the submission of the application for certification, in the criminal activity of a prison gang and/or criminal street gang, as defined in Penal Code section 186.22 (f); and
- 2. The staff member's conviction, sex offender registration requirement or membership or participation in the criminal activities of a prison gang and/or criminal street gang would have disqualified the facility from certification if it had occurred or had been discovered earlier.

Section 143 Reserved

Section 144 Reserved

ARTICLE 3: NEW STAFF DURING CERTIFICATION PERIOD

Section 145 Qualifications of Staff Added After Certification

- 1. At a minimum, within three (3) working days of making a job offer, a facility shall provide the Certification Coordinator with the information about the new staff member listed in Section 132 of the Certification Guidelines. The Sheriff's Department thereupon will conduct a background check. If the background check is not completed within two (2) business days, the employee may begin work at the facility, subject to later completion of the background check of the new employee to determine whether he or she meets the staff qualification requirements of the Certification Guidelines.
- 2. Continued employment of a new staff member who does not meet the staff qualifications set out in the Certification Guidelines shall be grounds for suspension or revocation of certification.

Section 146 Replacement of Director and House Manager

In order to be assured that a facility continues to meet certification standards for the safety of residents, staff, and the community, a permanent director or house manager shall be replaced as soon as possible, but no later than:

Director – Sixty (60) days from the date the position becomes vacant.

House Manager – Thirty (30) days from the date the position becomes vacant.

Section 147 Appointment of Acting Director or House Manager

In order to be assured that a facility continues to meet certification standards for the safety of residents, staff, facility and the community, an acting director and acting house manager shall be appointed no later than the following:

- 1. An acting director shall be appointed as soon as possible, but no later than 72 hours after the departure of the preceding director. The acting director shall qualify under the standards of the Certification Guidelines.
- 2. An acting house manager shall be appointed immediately (within 24 hours) after the departure of the preceding house manager. The acting house manager shall, at a minimum, qualify under the standards of the Certification Guidelines for peer coordinator.

Section 148 Reserved

ARTICLE 4: DENIAL OF CERTIFICATION DUE TO STAFF

Section 149 Denial of Certification Due to Lack of Staff Qualifications

The Certification Coordinator shall deny certification to a facility if:

- 1. Review of its staffing or staff's qualifications indicates that the facility is not in compliance with Sections 133-144 of the Certification Guidelines.
- 2. The facility fails to remedy each deficiency identified in the written notice of deficiency.
- 3. The facility provides false, misleading or incomplete information about any of its staff positions or staff members.

Section 150 Staff Notice and Advisement of Right to Reconsideration

If the Certification Coordinator determines to disqualify a facility from certification on account of the qualifications of a member of its staff, the Certification Coordinator shall first send a written notice to both the facility and the staff member by first class mail. The notice shall:

- 1. Explain the reasons for disqualification;
- 2. If the reason for disqualification is subject to correction, detail the correction required to the particular noncompliance specified in the notice;
 - 3. Specify a time period for compliance;

4. Advise the facility and the staff member of the right to reconsideration and appeal in accordance with the Certification Guidelines.

Section 151 Staff Procedure for Reconsideration

- 1. A facility or a staff member or prospective staff member of a facility whose qualifications have been determined to disqualify the facility from certification may file a request for reconsideration by the Certification Coordinator. The request shall be in writing and shall be filed fifteen (15) calendar days from the date of the service of the notice of denial of certification.
- 2. The Certification Coordinator shall schedule a hearing, which shall be held no later than thirty (30) calendar days after receipt of a timely request for reconsideration.
- 3. The Certification Coordinator shall serve notice of hearing on the facility and the staff member, not later than ten (10) calendar days prior to the scheduled date of the hearing.
- 4. At the hearing before the Certification Coordinator, the facility and the staff member shall be given an opportunity to present witnesses and documentary evidence. For example, letters from the Probation Department, the Parole Board or a sponsor.
- 5. The hearing will be conducted informally and the technical rules of evidence shall not apply. Any and all evidence that the Certification Coordinator deems reliable, relevant and not unduly repetitious may be considered.
- 6. Within fifteen (15) calendar days after the hearing, the Certification Coordinator shall issue and transmit to the facility and the staff member a written decision sustaining, reversing, or modifying his/her earlier decision.
- 7. The decision by the Certification Coordinator after the hearing shall become final unless the facility or staff member files an appeal to the Certification Appeals Board pursuant to Sections 228, 229 and 230 of the Certification Guidelines.

Section 152 Reserved

CHAPTER 5: ADMISSION AND INTAKE REQUIREMENTS

ARTICLE 1: ADMISSION

Section 153 Resident Selection Criteria

In order to help safeguard residents, staff, visitors, and neighbors, each certified sober living facility shall have and adhere to written criteria for resident selection. Prospective

residents will be advised of the criteria prior to admittance, and be offered referrals to non-certified facilities when appropriate.

Resident Selection Criteria shall include:

- 1. Criminal History: The facility shall require each prospective resident to complete a form listing any crimes specified in Section 138 of the Certification Guidelines of which the prospective resident has been convicted and the dates and locations of such convictions. If the prospective resident claims not to have been convicted of any such crimes, he/she shall certify on the form that he/she has never been convicted of any of the crimes specified in Section 138 of the Certification Guidelines. No certified facility shall accept as a resident a person who discloses a conviction for any of the crimes specified in Section 138 of the Certification Guidelines.
- 2. All criteria for selecting residents shall be objective and shall relate to the facility's strengths or expertise in assisting in recovery from alcohol and drug addictions.
- 3. A facility shall not unlawfully discriminate against prospective applicants on the basis of ethnic group identification, race, religion, ancestry, color, creed, sex, marital status, national origin, age, political affiliation, medical condition, physical or mental disability, or sexual preference, and shall adhere to all applicable federal and state laws and regulations related to nondiscrimination.
- 4. The facility shall admit any person who meets the facility's objective and non-discriminatory admissions criteria and who is physically and mentally able to comply with the facility's rules. Such persons include those who otherwise qualify for admission and who are living with Human Immunodeficiency Virus (HIV) disease, as well as persons with a mental illness diagnosis.
- 5. Each facility shall comply with the applicable provisions of law pertaining to the prohibition of discrimination against qualified persons with disabilities with respect to admission to the facility, accessibility of the facility, and participation in the facility's services, programs and activities, including Section 504 of the Rehabilitation Act of 1973 (29 U.S.C. § 794 et seq., as implemented by 45 C.F.R. § 84.1 et seq.), if applicable, and with such provisions of the Americans with Disabilities Act of 1990 (42 U.S.C. § 12101 et seq. as amended) as may be applicable.
- 6. Before admission to the facility, the facility shall require potential residents who show signs of any communicable disease, or who, through medical disclosure during the intake and admission process, disclose a health related problem that would put others at risk, to be cleared medically to reside in housing with uninfected persons.
- 7. If a prospective resident is denied admission into a facility, the facility shall have a written policy for alternative referral and shall provide a copy of that policy to the prospective resident who is denied admission.

Section 154 Reserved

ARTICLE 2: INTAKE

Section 155 Intake Procedures

- 1. The facility shall have a written intake procedure for new residents.
- 2. The director or house manager shall hold an intake appointment with each new resident, during which the director or house manager shall:
 - a. Review and place in the new resident's file his/her treatmentrelated court orders and/or treatment plan recommendations from referral sources and others, if available;
 - b. Determine and document in the resident's file how the facility can assist the new resident in implementing his/her treatment related court orders and/or treatment plan recommendations, and so advise the new resident;
 - c. Identify and document in the new resident's file any prescribed medication used by resident;
 - d. Provide the new resident with a copy of the facility's rules for residents;
 - e. Have the new resident sign all consent forms and confidentiality waivers required by the facility and his/her referring agencies or the Superior Court, and place such signed forms in the resident's file;
 - f. All court referrals and residents referred by the Probation Department or the Parole Board, who have not already done so, shall sign a waiver of confidentiality at the time of initial intake into the facility, and the facility shall maintain that waiver in its records. The waiver shall permit disclosure of information about the resident to whichever of the courts, the Probation Department and/or the Parole Board is monitoring the resident's progress.

Section 156 Reserved

CHAPTER 6: PROGRAM REQUIREMENTS

ARTICLE 1: POLICIES AND PROCEDURES MANUAL

Section 157 Policy and Procedures Manual

- 1. Each facility shall maintain, and have available for inspection, a Policy and Procedures Manual.
- 2. Each staff member shall be familiar with the policies and procedures contained in the Manual.

Section 158 Contents of Policy and Procedures Manual

At a minimum, a facility's Policy and Procedures Manual shall contain the following:

- 1. Employees
 - a. Job descriptions for all staff positions;
 - b. Drug testing procedures and requirements;
 - c. Staff discharge procedures;
 - d. A procedure to immediately notify the Certification Coordinator of any change in the personnel holding staff positions.
- 2. Nondiscrimination/Compliance with the Law
 - a. A prohibition against sexual harassment by and of staff and residents;
 - b. A prohibition against unlawful discrimination against employees and applicants for employment on the basis of ethnic group identification, race, religion, ancestry, color, creed, sex, marital status, national origin, age, political affiliation, medical condition, physical or mental disability, martial status, or sexual preference, in accordance with all applicable federal and state laws and regulations. This prohibition shall extend to all of the following: employment, upgrade, demotion or transfer, recruitment or recruitment advertising, layoff or termination, rate of pay or other forms of compensation, and selection for training.
 - c. A prohibition against unlawful discrimination in the provision of services, the allocation of benefits or in the accommodation in facilities on the basis of ethnic group identification, race, religion, ancestry, color,

creed, sex, marital status, national origin, age, political affiliation, medical condition, physical or mental disability, or sexual preference in accordance with all applicable federal and state laws and regulations.

- d. Drug free work place policy, including procedures for compliance with the California Drug Free Work Place Act, Government Code sections 8350-8357
- e. A procedure for keeping staff and the residents informed and updated on all aspects of the above-described policies.
- 3. Drug testing: Procedures for drug testing of house managers and peer coordinators and such other staff and applicants for staff positions as the facility specifies.
- 4. Prescription Medications: A prohibition against the inappropriate use of prescribed medications on the facility premises, as described in Section 167 of the Certification Guidelines.
- 5. Conflicts of Interest: A prohibition against personal and financial conflicts of interest including a prohibition against entering into a financial agreement, venture or proposition with a resident unless previously approved by the director of the facility.
- 6. Designation of staff other than the director who may have access to residents' files. All staff with access to residents' files must have a legitimate need for such access as part of performing their duties at the facility.
 - 7. Policies to support residents' recovery efforts, as follows:
 - a. A requirement that staff maintain respect for the dignity of each resident at all times;
 - b. A requirement that staff encourage residents to accept personal responsibility for their behavior.
 - c. Recommendations about encouraging active involvement of residents and staff with the recovery community through appropriate activities such as drug and alcohol free social events and recovery-oriented services and events.
 - d. Recommendations about providing residents opportunities to acquire life skills for sobriety, crime free behavior, education and employment.

e. A written drug and alcohol relapse policy and procedure for residents, as set forth in Section 165 of the Certification Guidelines.

Section 159 Reserved

ARTICLE 2: RESIDENTS' ACTIVITIES

Section 160 Staff Presence and Availability

- 1. At each facility, a person or persons performing the duties of director and/or house manager shall reside at the facility or shall be present at the facility during curfew hours, which shall be, at a minimum, between the hours of 11:00 p.m. and 6:00 a.m. weekdays and 12:00 a.m. to 6:00 a.m. weekends. Whenever a director or house manager is not present at the facility, a responsible member of the facility's staff shall be on call to respond to the facility within twenty (20) minutes of being summoned. The phone number that the certification coordinator can call to summon a staff member to the facility within twenty (20) minutes shall be on file with the certification coordinator at all times.
 - 2. The staff person in charge shall be readily identifiable at all times.
- 3. Each facility shall designate and post the hours that individual staff members will be on site.

Section 161 Criminal Activity

No type of criminal activity shall be promoted, condoned or permitted at the facility or at any activity associated with the facility.

Section 162 Residents' Court Orders and Treatment Plans

- 1. Facility staff shall support and cooperate with all residents' known court orders and accommodate residents' schedules for compliance with the residents' treatment plans.
- 2. Failure to support a resident's court orders shall be deemed a serious violation of the Certification Guidelines, resulting in suspension or revocation of certification.

Section 163 Participation in Recovery Activities

1. The facility shall provide adequate opportunities for residents to participate in activities consistent with the stated goals and objectives of their treatment plans.

2. Facility staff shall encourage all residents to be active during the day in activities appropriate to recovery, e.g., participating in treatment or counseling, attending school, working a job, searching for a job or performing other activities that are appropriate for recovery.

Section 164 Reserved

ARTICLE 3: ALCOHOL/DRUGS/SMOKING

Section 165 Drug and Alcohol Testing/ Relapse Policies

- 1. The Parole Board, the Probation Department, and the Superior Court may impose mandatory drug testing on residents and provide such testing. Each facility shall facilitate its residents' compliance with such mandatory testing requirements.
- 2. The facility may, but is not required to, adopt a policy requiring residents, including residents without mandatory testing requirements, to submit to drug tests in order to determine whether residents remain sober while residing at the facility. If such a policy is adopted, the facility shall be solely responsible for ensuring that all legally required consent forms are signed by residents and that all legal requirements pertaining to such testing are satisfied.
 - 3. The frequency of tests should be noted in each resident's file.
- 4. Resident's drug test results shall be kept confidential to the extent required by law. Except as may be required by court orders and/or the terms of residents' probation or parole, residents' test results will not be disclosed to the Certification Coordinator.
- 5. If it is the policy of the facility to require drug tests of residents who do not have mandatory drug test requirements imposed by court orders and/or the terms of probation or parole, the facility shall have a written relapse policy and procedure describing the actions to be taken when such a resident tests positive for alcohol and/or drug use.
- 6. The facility shall have a similar written relapse policy applicable to residents who do not participate in drug tests and to relapses discovered by methods other than drug tests.

Section 166 Prohibition against Alcohol and Non-Prescribed Drugs

The facility shall have a written policy prohibiting alcohol and any drugs other than prescription medication on the premises. This policy shall be prominently posted at the facility.

Section 167 Prescription Drug Policy

- 1. The facility shall have a written policy regarding the possession, use and storage of residents' prescribed medications. The facility may not dispense medication, but must make it available to residents.
- 2. The facility shall prohibit the possession of prescription medication by any resident other than the resident for whom it is prescribed, and in any quantity greater than the amount prescribed.

Section 168 Smoking Policy

The facility shall have and enforce a written smoking policy designating places in or around the facility as the only places where smoking is permitted.

Section 169 Reserved

ARTICLE 4: REPORTS

Section 170 Accurate Progress Reports

- 1. The facility shall provide accurate reports about a resident's progress to courts, the Probation Department and the Parole Board, in accordance with residents' court orders and/or the terms of residents' probation or parole.
- 2. Upon the request and with the consent of a resident, the facility shall provide accurate reports about the resident's progress to the resident's referring agency or personnel involved in the resident's recovery, such as therapists.

Section 171 False Reports

It is a felony to prepare any type of written instrument that is false or antedated, with intent to present it for any judicial trial or proceeding or inquiry. (Penal Code section 134).

Section 172 Approval of Progress Reports

The Director shall approve all progress reports issued by the facility.

Section 173 Notification of Resident's Departure

If a county referral or a court referral moves out of the facility, or is terminated for cause from a facility, the appropriate court, or referring County department or agency shall be notified within 24 hours or the next working day.

Section 174 Reports to Certification Coordinator

- 1. Each facility shall follow the procedures prescribed in this section if any events identified in subsection (3) of this section occur.
- 2. Upon the occurrence of any of the events identified in subsection (3) of this section, the director or house manager of the facility shall make a telephonic report to the Certification Coordinator within one (1) working day. The telephonic report shall be followed by a written report within seven (7) working days of the event. If a report that meets the requirements of this section is made to State or local authorities, a copy of such report will suffice for the written report to be submitted to the Certification Coordinator.
 - 3. Events that require reporting shall include:
 - a. Death of any resident due to any cause.
 - b. Any facility-related injury of a resident or staff member, which requires medical treatment.
 - c. All cases of communicable disease reportable under section 2502 of Title 17, California Code of Regulations. Such cases of communicable disease shall be reported only to the local health officer.
 - d. Poisonings.
 - e. Catastrophes such as flooding, tornado, earthquake or any other natural disaster.
 - f. Fires or explosions that occur on the premises or grounds.
 - g. Any criminal activity that occurs on the premises or the grounds of the facility.
 - 4. Information provided in the report shall include the following:
 - a. Resident's and/or staff member's name, age, sex, and date of admission.
 - b. Date, time, and nature of the event.
 - c. Attending physician's name, findings and treatment, if available.
- 5. Any change in the facility owner or operator's mailing address shall be reported to the Certification Coordinator within ten (10) working days following the change.

Section 175 Reserved

ARTICLE 5: INTERACTION OF RESIDENTS

Section 176 Single Gender Facilities

Single gender facilities are encouraged but not required. The rules and regulations for single gender facilities shall include, but need not necessarily be limited to the following:

- 1. Residents shall wear appropriate attire when in shared areas of the facility and in the presence of other residents, staff or visitors.
- 2. Sexual harassment of residents or staff is prohibited. Sexual harassment policies, procedures and rights shall be posted in the facility along with the name and telephone number of a contact person.
- 3. Staff shall not engage in behavior with any resident that leads to a romantic or sexual relationship while the resident is residing at the facility.

Section 177 Co-ed Facilities

If the facility has both male and female residents, it shall have written rules and procedures regarding co-ed interaction, including but not necessarily limited to the following:

- 1. Residents shall wear appropriate attire when in shared areas of the facility and in the presence of other residents, staff or visitors.
 - 2. Male and female residents shall not share bedrooms.
- 3. Sexual harassment of residents or staff is prohibited. Sexual harassment policies, procedures and rights shall be posted in the facility along with the name and telephone number of a contact person.
- 4. Staff shall not engage in behavior with any resident that leads to a romantic or sexual relationship while the resident is residing at the facility.
- 5. A facility is permitted to make exceptions to the foregoing rules in situations that a court or residents' referring agencies deem appropriate, e.g. if a married couple or a couple in a long term committed relationship enter a facility as a couple, some of the foregoing rules would be inapplicable to them.

Section 178 Reserved

ARTICLE 6: VISITORS

Section 179 Access to Facility by Unauthorized Persons

Access to the facility by individuals who are neither residents, facility staff, volunteers, nor authorized visitors shall be monitored by the facility and limited so that neither the program nor the comfort of residents is disrupted by such access.

Section 180 Visitation Policy

The facility shall have a written visitation policy. The following are the minimum requirements:

- 1. All visitors shall sign in and out of the facility, using their full names;
- 2. Visitors shall be permitted in the facility only between such hours as the facility may designate, but in no event after 10:00 p.m. or before 8:00 a.m.;
- 3. There shall be designated visiting areas, which shall be located in the common living areas of the facility, and which shall be available to all residents for meetings and receiving and entertaining guests. The bedrooms and garages shall be off limits for visitors and shall not be used at any time for visits or meetings without the prior written approval of the Certification Coordinator, the Probation Department or the Orange County Health Care Agency;
 - 4. No visitors shall be permitted on the premises while intoxicated;
 - 5. Visitors shall not be left alone in the facility at any time:
 - 6. Regulations regarding children visiting the facility shall include:
 - a. Specific hours for visitation;
 - b. The type of supervision required; and
 - c. Restriction of children to the common areas.

Section 181 Reserved

ARTICLE 7: LEAVING THE FACILITY

Section 182 Resident Sign In/Out Log and Schedule

1. The facility shall maintain a resident sign in and sign out log for all residents who are court or county referrals.

- 2. Each resident who is a court referral or a county referral shall be required to sign his/her complete name in the log with the time that he/she left the facility and the location and telephone number of his/her destination.
- 3. Each resident who is a court referral or a county referral shall be required to sign his/her complete name in the log upon returning to the facility, and the time he/she returned
- 4. The facility shall retain its sign in/sign out logs for a minimum of one (1) year.
- 5. Every resident's schedule for treatment, work, education or other activities shall be provided to, and maintained by, the facility management.
- 6. Every resident's schedule shall include the location and telephone number where the resident can be reached.
- 7. Every resident shall be required to notify the management of any change in his/her schedule for treatment, work, education or other activities.

Section 183 Master Log for Multiple Facilities

Programs with multiple residential facilities shall maintain a current master log of all residents at all of the program's certified facilities. The master log shall be maintained and shall be available at the program's business office or main facility.

Section 184 Curfew

The facility shall have a curfew for residents starting no later than 11:00 p.m. on weeknights and 12:00 a.m. on weekends and ending no earlier than 6:00 a.m. on any day. Allowable exceptions may include residents who work during these hours and residents who have prior approval of the facility's staff, the Health Care Agency, or the resident's Probation Officer or Parole Officer.

Section 185 Overnight Passes

- 1. Overnight passes may be given to a resident after he/she becomes eligible, at the discretion of and with the approval of the director or house manager, or on order of a Superior Court, the Probation Department or the Parole Board. No overnight pass shall be granted if it would conflict with any existing court order.
- 2. When going on an overnight pass, a resident shall be required to sign in and out of the facility on the resident sign in and sign out log.
- 3. The facility will notify the referring agency of any violation of Section 185.

Section 186 Reserved

ARTICLE 8: FEES

Section 187 Fee Schedule

- 1. The facility shall have a written fee schedule that is provided to all residents and posted at the facility.
- 2. The current fee schedule shall be provided to the Certification Coordinator.
- 3. At the time of acceptance and admission into the facility, each resident shall be informed of the exact fees required, and fee payment policies and procedures.
- 4. The facility may establish a reasonable and appropriate fee, to be approved in advance by the Certification Coordinator, for any drug or alcohol testing conducted by the facility.
- 5. The resident shall be informed of all items that are provided by the facility and which personal items residents must provide themselves.
 - 6. Residents shall not be charged a relapse or re-entry fee.

Section 188 Delinquent Payments and Payment Plans

- 1. The facility shall have a written policy regarding delinquent payments and payment plans.
- 2. If a resident has not paid the amount due, the decision whether to terminate the resident, extend a grace period or make a payment plan arrangement is at the discretion of the director.

Section 189 Advance Payment of Fees and Repayment of Fees

The facility shall have a written policy regarding refunds for advance payment of fees and repayment of fees.

Section 190 Receipt for Fees

A resident shall be given a signed receipt at the time of payment of any fees.

Section 191 Reserved

ARTICLE 9: RESIDENTS' FUNDS

Section 192 Co-mingling Funds

Staff shall not co-mingle their own funds or the facility's funds with residents' funds

Section 193 General Assistance

If the facility accepts a resident's General Assistance rent allowance, the facility shall follow all procedures required by the Orange County Social Services Agency.

Section 194 Reserved

ARTICLE 10: FOOD SERVICE

Section 195 Food Service

- 1. If food service is offered by the facility, the facility shall provide the residents with the facility's food services and preparation schedule and policy.
 - 2. The kitchen shall be clean.
 - 3. Food shall be properly maintained and stored.
- 4. The facility may provide meals, which may be included in the fees paid by residents.
 - 5. Residents may be responsible for their own food items.
 - 6. There shall be adequate seating in the dining area.

Section 196 Reserved

ARTICLE 11: RESIDENTS' FILES

Section 197 Maintenance of Residents' Files

All files pertaining to residents shall be handled in the following manner:

- 1. All files shall be kept in a locked cabinet.
- 2. Residents' files shall not be co-mingled.
- 3. Access shall be limited to the director and other personnel with a legitimate need for access who are specified in the facility's policies and procedures.

4. Each staff member, paid or volunteer, with access to residents' files shall be required to agree in writing with the facility to maintain the confidentiality of the records and information in such files unless required by law to disclose file records or information. This agreement shall specify that it is effective irrespective of the subsequent resignation or termination of the staff member.

Section 198 Contents of Individual Residents' Files

The content of individual residents' files shall include, but need not be limited to, the following:

- 1. A personal information form which contains:
 - a. Personal data for proper identification;
 - b. Length of sobriety and prior recovery experience;
 - c. The names of the resident's current outpatient treatment and educational facilities;
 - d. The name of the source of referral to the facility.
- 2. Copies of the resident's currently effective court orders, if any.
- 3. The resident's recovery plan recommendations from referral sources and others.
- 4. Notations about how the facility can assist the resident in implementing his/her recovery-related court orders and/or recovery plan recommendations.
 - 5. List of prescribed medication used by the resident.
- 6. Signed originals of all consent forms and confidentiality waivers required by the facility or the residents' referring agencies or the Superior Court. For all court referrals and residents referred by the courts, the Probation Department or the Parole Board, the resident's file must include a waiver of confidentiality, signed at the time of the resident's initial intake into the facility, to permit disclosure of designated information about the resident to whichever of the courts, the Probation Department and/or the Parole Board is monitoring the resident's progress.
- 7. Copies of all progress reports and all correspondence written by the staff regarding the resident.
- 8. Dates and results of all drug and alcohol tests and all forms related to such tests, including consent forms and/or court orders.

- 9. Overnight pass information.
- 10. Dates of the resident's entry and completion or termination from the facility, including the circumstances of his/her exit.
- 11. The resident's fee payment record, including amount of fee(s), and the date(s) and amount(s) of payment.
- 12. A copy of the facility's rules and resident in-take forms, signed and dated by the resident upon entry to the facility.

Section 199 Reserved

CHAPTER 7: BUILDING AND GROUNDS REQUIREMENTS

ARTICLE 1: SECTION 200 REVIEW

Section 200 Compliance with Codes, Permits and Other Requirements Related to Buildings and Grounds

Prior to certification, each sober living facility shall obtain from the applicable local jurisdiction an inspection and a written determination [called a "Section 200 Review"] that the facility complies with all of the following requirements:

- 1. Conformance with all locally applicable and regularly enforced zoning regulations.
 - 2. Possession of all required local, county and state permits.
- 3. Conformance with applicable fire safety standards, including occupancy limit, smoke detectors and emergency exit plan.
 - 4. Building and Grounds Requirements.
 - a. The facility shall be clean, safe, sanitary and in good repair at all times.
 - b. The interior of the facility shall be free of flies and other insects.
 - c. The facility shall provide for the safe disposal of contaminated water and chemicals used for cleaning purposes.
 - d. Living areas in the facility shall be separate and secure. Permanent walls, floors, ceilings and doors shall enclose the facility's living, sleeping, bathing and toileting areas. This does not preclude the

use of more than one building or the use of wing(s) of a building or floor(s) of a building in meeting this requirement.

- e. All residents shall be protected against safety hazards within the facility through provision of appropriate protective devices, including, but not limited to, non-slip material on rugs.
- f. All outdoor and indoor passageways, stairways, inclines, ramps, open porches, and other areas of potential hazard shall be kept free of obstructions.
- g. Permanent or portable storage space shall be available for storage of facility equipment and supplies. Facility equipment and supplies shall be stored in appropriate space and shall not be stored in space designed for other activities.
- h. Every in-ground pool and every above-ground pool that cannot be emptied after each use shall have an operative pump and filtering system.
- i. Adequate living space for each resident in the bedrooms and bathrooms shall be provided as follows:
 - (i) Bedrooms shall not be overcrowded. The definition of a bedroom for the purposes of this requirement is the definition contained in the Uniform Building Code. There should be a minimum of 70 square feet for the first two people and 50 square feet for each additional person in bedrooms.
 - (ii) Each resident shall have a closet and dresser space made available to him/her.
- j. Adequate bathing, hand washing and toilet facilities shall be provided with a maximum ratio of one bathroom facility per six (6) residents. Space for each resident's toilet articles shall be provided.
- k. The bathrooms shall be clean, shall provide privacy, and shall contain general hygiene items such as soap and toilet paper.
- 1. When female and male residents are housed in the same facility, the facility shall ensure minimal personal security and privacy, which shall include the following:
 - (i) Separate and adequate toilet, hand washing, and bathing facilities for females and males. Such facilities shall be in proximity of designated sleeping quarters.

- (ii) Separate and adequate sleeping areas for females and males. Such areas shall be enclosed by permanent walls, which extend from the floor to the ceiling and have permanent doors.
- m. Locks shall be placed on all exterior doors and windows in order to maintain proper security.
- 5. Fixtures, Furniture, Equipment and Supplies:
 - a. A comfortable temperature for residents shall be maintained at all times.
 - b. All window screens shall be in good repair and be free of insects, dirt and other debris.
 - c. The facility shall provide lamps or lights as necessary in all rooms and other areas to ensure the safety of all persons in the facility.
 - d. Hot water faucets used by residents for personal care shall meet the following requirements:
 - (i) Hot water delivered to plumbing fixtures used by the residents shall not be less than 105 degrees Fahrenheit (40.5 degrees Celsius) and not more than 130 degrees Fahrenheit (54.4 degrees Celsius).
 - (ii) Taps delivering water at 131 degrees Fahrenheit (54.9 degrees Celsius) or above shall be prominently identified with warning signs.
 - e. All toilets, hand washing and bathing facilities shall be maintained in safe and sanitary operating conditions.
 - f. Solid waste shall be stored, located and disposed in such a manner that it will not transmit communicable diseases, emit odors, create a nuisance, or provide a breeding place or food source for insects or rodents.
 - (i) All containers, including movable bins, used for storage of solid waste shall have tight fitting covers that are kept in place. The containers and covers shall be in good repair, leak proof and rodent proof.
 - (ii) Solid waste containers, including movable bins, receiving putrescible waste shall be emptied at least once per week or more often if necessary to comply with subsection (f) above.

- g. The facility shall provide each resident with clean linen in good repair, including lightweight, warm blankets; top and bottom sheets; pillowcases; mattress pads; bath towels and wash cloths. The quality of the linen provided shall permit changing, at a minimum, once a week or with greater frequency if needed.
- h. The facility shall provide each resident with an individual bed maintained in good repair, equipped with good springs and a clean mattress, and supplied with pillow(s), and with bed linens as described above. Bunk beds are not excluded provided they otherwise meet the requirements of this Section 200.

Section 201 Reserved

CHAPTER 8: GOOD NEIGHBOR POLICY

ARTICLE 1: POLICY

Section 202 Good Neighbor Policy

- 1. The purpose of the Certification Guidelines is to promote safe and effective services for residents with substance abuse issues. Neighborhood support of an alcohol or drug recovery facility enhances the facility's ability to meet this goal.
- To increase the likelihood that the residents of the facility are able to be integrated into the community with an improved quality of life, it is required that each facility shall adopt a good neighbor policy similar to the one enumerated here.
- 3. A good neighbor policy must include, but would not necessarily be limited to, the policies outlined in Sections 204-206 of the Certification Guidelines.

Section 203 Reserved

ARTICLE 2: POLICY CONTENTS

Section 204 Neighborhood Complaints

You are in a better position if you have the first opportunity to respond to concerns.

Each facility shall ensure that the neighboring residents are advised about whom to contact at the facility if they have complaints or questions, and how to get in contact with that person.

Each facility shall develop a written protocol of procedures for staff to follow when a complaint is received.

Each facility shall train the staff member(s) responsible for receiving complaints and questions to field complaints in a positive way.

If a neighbor's complaint is legitimate, the facility shall address it with a commitment that steps will be taken immediately to prevent its happening again. Then, the facility shall review its systems and/or staff to make changes or improvements as needed.

Section 205 Reserved

Section 206 Reserved

CHAPTER 9: MONITORING AND REVIEW OF FACILITIES

ARTICLE 1: MONITORING

Section 207 Monitoring Certified Facilities

- 1. On site follow-up monitoring of any certified sober living facility may be conducted by the Certification Coordinator or any agency referring residents to the facility to determine continuing compliance with any of the requirements of the Certification Guidelines. Each certified sober living facility shall be inspected at least once during each period of certification to insure compliance with the Certification Guidelines, and follow-up inspections shall be conducted as needed.
- 2. The purpose of these inspections will be solely to determine whether the facility continues to meet the Certification Guidelines. These inspections shall not be used as an excuse to conduct searches for evidence of crime without required probable cause, warrant or consent.
- 3. The monitoring personnel may conduct a site inspection of the facility, may interview facility staff and/or residents in private, and may review facility records, with or without advance notice, at any reasonable time, upon presentation of proper identification, in order to determine compliance with the Certification Guidelines. The facility's staff shall cooperate with the monitoring personnel and assist him/ her upon request. The inspection shall be conducted with due regard for the privacy of residents. Monitoring personnel shall not access any files of residents unless there is a court order permitting such access or the resident has given written informed consent.
- 4. After completion of the monitoring review, the monitoring personnel shall prepare a written report. All reports shall be submitted to the Certification Coordinator and a copy provided to the facility inspected.

Section 208 Notice of Deficiency

- 1. If deficiencies are identified, a written notice of deficiency, listing all deficiencies, shall be mailed to the facility's director or his/her designee within ten (10) working days of completion of the monitoring review.
 - 2. The notice of deficiency shall specify:
 - a. The section number of the Certification Guidelines or the title and code section number of each statute or regulation which has been violated, if relevant:
 - b. The manner in which the facility fails to comply with the specified section of the Certification Guidelines or statute/regulation;
 - c. Recommended corrections;
 - d. The date by which each deficiency shall be corrected;
 - e. Procedure for appeal to the Certification Appeals Board.
- 3. The facility's director or his/her designee shall respond to the notice of deficiency and prove compliance to the Certification Coordinator in writing within the time specified in the notice of deficiency.

Section 209 Contract Monitoring

Nothing in this Article supersedes monitoring and review of a contract provider by the Orange County Health Care Agency, or any other County agency, pursuant to the terms of a contract between that provider and the County of Orange.

Section 210 Reserved

ARTICLE 2: INVESTIGATION OF COMPLAINTS

Section 211 Complaint Defined

A complaint is a formal or informal negative charge or allegation regarding a violation of an applicable section of the Certification Guidelines. A complaint may include, but is not limited to, the following issues: criminal activity, resident safety, zoning codes, staff or resident use of drugs, or facility safety.

Section 212 Complaints Regarding Criminal Activity

All complaints about criminal activity at a facility shall be immediately reported to the law enforcement agency having jurisdiction where the facility is located.

Section 213 Complaints Regarding Certification Guidelines

- 1. Any person may file a complaint regarding a violation of an applicable section of the Certification Guidelines by contacting the Certification Coordinator in person, by telephone, in writing, or by any other automated or electronic means.
- 2. To the extent permitted by law, the Certification Coordinator shall keep confidential the identity of the complainant, unless authorized by the complainant to disclose his/her identity.
- 3. If requested by the complainant, the Certification Coordinator shall notify the complainant, in writing, of the results of the investigation, to the extent that such information legally may be disclosed to a member of the public.
- 4. The Certification Coordinator shall cause to be investigated by the appropriate authority all complaints filed against the facility or staff. The Probation Department shall investigate issues related to probationers at the facility.
- 5. The authority selected to investigate the complaint may conduct a site inspection of the facility, may interview facility staff and/or residents in private, and may review facility records with or without advance notice, at any reasonable time, upon presentation of proper identification, in order to determine compliance with the Certification Guidelines. The facility's staff will cooperate with the investigator and assist him/her upon request. The inspection shall be conducted with due regard for the privacy of residents. Complaint investigators shall not access any files of residents unless there is a court order permitting such access or the resident has given written informed consent.
- 6. After completion of the investigation, the authority investigating the complaint shall prepare a written report. All reports shall be submitted to the Certification Coordinator. The complaint investigation is complete when all evidence has been inspected and all witnesses who have information relevant to the allegations have been interviewed.

Section 214 Notice of Deficiency

- 1. If a complaint investigation discloses deficiencies, a written notice of deficiency, listing all deficiencies, shall be mailed to the facility's director or his/her designee within five (5) working days of completion of the investigation.
 - 2. The notice of deficiency shall specify:
 - a. The section number of the Certification Guidelines or title and code section number of each statute or regulation that has been violated, if relevant;

- b. The manner in which the facility fails to comply with the specified Guidelines or statute/regulation;
- c. Recommended corrections;
- d. The date by which each deficiency shall be corrected;
- e. The procedure for appeal to the Certification Appeals Board.
- 3. The facility's director or his/her designee shall respond to the notice of deficiency and prove compliance to the Certification Coordinator in writing within the time specified in the notice of deficiency.

Section 215 Emergency

If the Certification Coordinator or any of its allied agencies determines that there is an emergency situation that jeopardizes the public safety and/or the safety of the facility's residents, the Certification Coordinator shall recommend to referring County agencies and the Superior Court that referrals to the facility be suspended immediately pending further investigation. Examples: Owner/Director of a program using drugs, sexual harassment of residents or criminal activity at the facility.

Section 216 Reserved

ARTICLE 3: CORRECTIVE ACTION PLANS

Section 217 Deficiency

A "deficiency" means a failure to comply with the Certification Guidelines or applicable laws. A deficiency may be a cause for a denial of certification or notice of sanction.

Section 218 Corrective Action Plan

- 1. When a facility is sent a notice of deficiency, the director of the facility shall submit to the Certification Coordinator written verification of correction for each deficiency that is identified in the notice of deficiency. The written verification shall substantiate that the deficiency has been corrected and specify the date when the deficiency was corrected. The written verification shall be postmarked no later than the date specified in the notice of deficiency.
- 2. If the facility cannot correct a deficiency by the date specified in the notice of deficiency, the director shall submit a written corrective action plan to the Certification Coordinator. The written corrective action plan shall be postmarked no later than the date specified in the notice of deficiency.

- 3. The written corrective action plan shall:
 - a. Specify the steps already taken and to be taken in the future to correct the deficiency;
 - b. Specify a date when the deficiency will be corrected.
- 4. In reviewing the corrective action plan, the Certification Coordinator shall consider:
 - a. Potential hazards presented by the deficiency;
 - b. Number of residents impacted;
 - c. Whether the documentation submitted by the director demonstrates that the deficiency will be timely corrected.
- 5. Within fifteen (15) days of receipt of the written verification and/or corrective action plan, the Certification Coordinator shall notify the director in writing, by first class mail, whether the written verification and/or corrective action plan has been approved.

Section 219 Follow-up Review to Verify Correction of Deficiency

- 1. The Certification Coordinator, Orange County Health Care Agency, Probation Department and/or appropriate local jurisdictions may conduct follow-up reviews to determine if the facility has corrected all deficiencies specified in the notice of deficiency.
- 2. If a follow-up review indicates that a deficiency has not been corrected on or before the date specified in the notice of deficiency or subsequently approved corrective action plan, the Certification Coordinator shall impose a sanction pursuant to Sections 221-227 of the Certification Guidelines.

Section 220 Reserved

ARTICLE 4: SANCTIONS

Section 221 Sanctions Defined

A sanction is a disciplinary action taken by the Certification Coordinator that is designed to secure enforcement of the Certification Guidelines by imposing a penalty for a violation of the Guidelines.

Section 222 Purposes of Sanctions

- 1. The purposes of imposing sanctions are:
 - a. To protect the safety of the community and the residents.
 - b. To assist the certified facility in maintaining a quality level of continuing care and service.
- 2. All sanctions imposed shall be handled on an individual basis.

Section 223 Types of Sanctions

- 1. The Certification Coordinator may impose sanctions for a violation of the Certification Guidelines. The sanctions may include any one or more of the following:
 - a. Counseling: A verbal reprimand and recommendations to the facility director of possible remedies that the facility might explore. Corrective action by the provider is expected.
 - b. Letter of Reprimand: This document places the facility on notice that the violation will be made a permanent part of the facility's file with the Certification Coordinator. This is an offense, which if it continues, may result in imposition of more severe sanctions. This letter should contain a description of the problem and recommended corrective action with an expected date of completion.
 - c. Suspension of Certification: A disciplinary action taken by the Certification Coordinator to suspend certification. A suspension is for a specific period of time. Except as required by law or contractual obligations or as permitted by the Certification Guidelines, County personnel shall cease referring individuals to a facility from which certification has been suspended. At their option, or, if applicable, at the discretion of the Superior Court, the Probation Department or the Parole Board, residents who were residing at the facility prior to the suspension may remain and complete their programs.
 - d. Revocation of Certification: A disciplinary action that is imposed by the Certification Coordinator to revoke certification of a facility. Revocation of certification is indefinite. Except in emergency situations, a revocation will not become effective until the time for the facility to appeal has elapsed, or if the facility appeals, until the revocation is upheld by the Certification Appeals Board. To the extent it is clinically appropriate, all County referrals shall be asked to move from a facility from which certification has been revoked and will be placed in certified facilities. Except as required by law or contractual obligations or as permitted by the Certification Guidelines, County personnel shall cease

referring individuals to a facility from which certification has been revoked.

Section 224 Right to Appeal Sanctions

A facility has a right to appeal any sanction that is imposed on it. When imposing sanctions consisting of a letter of reprimand, suspension of certification or revocation of certification, the Certification Coordinator shall advise the facility of the procedures for appeal.

Section 225 Failure to Correct Deficiencies for which Sanctions Imposed

Failure to correct deficiencies for which sanctions were imposed may result in the imposition of more severe sanctions.

Section 226 Notice to Interested Parties

If a facility's certification is suspended or revoked, the Certification Coordinator shall give written notice of the sanction to the District Attorney, the Orange County Superior Court, the Probation Department, the Orange County Health Care Agency, the Parole Board and other interested County agencies and to the city where the facility is located.

Section 227 Reserved

CHAPTER 10: APPEAL AND HEARING

ARTICLE 1: RIGHT TO APPEAL DENIAL OF CERTIFICATION OR IMPOSITION OF SANCTIONS

Section 228 Facility Right To Appeal

- 1. If a facility has been denied certification, and the request for reconsideration has been denied, the director of the facility may file an appeal to the Certification Appeals Board at the District Attorney's Office. All appeals shall be forwarded through the Certification Coordinator to the Certification Appeals Board.
- 2. If a sanction consisting of a letter of reprimand, suspension of certification or revocation of certification has been imposed on a facility, the director may file an appeal to the Orange County District Attorney's Certification Appeals Board. A prior request for reconsideration to the Certification Coordinator is not available for an imposition of a sanction. All appeals will be forwarded through the Certification Coordinator to the Certification Appeals Board.

Section 229 Staff Right To Appeal

- 1. A staff member or prospective staff member of a facility whose qualifications or lack thereof have been determined to disqualify the facility from certification, and whose request to the Certification Coordinator for reconsideration has been denied, may file an appeal to the Certification Appeals Board.
- 2. If a sanction consisting of a letter of reprimand, suspension of certification or revocation of termination has been imposed on a facility as a result of the qualifications or lack thereof of a staff member, the staff member and/or the facility's director and head of administrative staff may file an appeal to the Certification Appeals Board. (There is no request for reconsideration by the Certification Coordinator available for an imposition of a sanction.)

Section 230 Reserved

ARTICLE 2: CERTIFICATION APPEALS BOARD

Section 231 Certification Appeals Board

The Certification Appeals Board shall be the administrative responsibility of the Orange County District Attorney's Office. The District Attorney's Office will conduct all appeal hearings before the Certification Appeals Board.

Section 232 Board Membership

- 1. The Certification Appeals Board shall consist of five (5) members designated by their respective organizations, as follows:
 - a. One former employee or director of a sober living facility, who is not currently affiliated with a sober living facility.
 - b. One current or retired city manager or assistant city manager.
 - c. One current or retired deputy probation officer or police officer.
 - d. One current or retired deputy public defender.
 - e. One member who is employed by the Orange County Health Care Agency, Behavioral Health Services.
- 2. The members shall be nominated and appointed in accordance with rules of the Board of Supervisors to be filed with the Clerk of the Board.
- 3. The term of each member shall be three years. The members shall serve staggered terms so that no more than three members' terms will lapse in the same year.

4. A vacancy shall exist and shall be reported to the Board of Supervisors or its designee whenever a member fails to attend more than three consecutive meetings of the Certification Appeals Board without good cause.

Section 233 Duties of the Certification Appeals Board

- 1. It shall be the function of the Certification Appeals Board, upon request, to review the decisions of the Certification Coordinator when there is an appeal filed for a denial of certification and/or the imposition of sanctions.
- 2. The Certification Appeals Board shall meet at least once a year and shall appoint a chairperson at its first meeting each year.

Section 234 Filing Appeals

- 1. The director of a facility whose application for certification has been denied or that is being sanctioned, and when applicable, a staff member or prospective staff member of a facility on whose qualifications or lack thereof the denial or sanction is based, may file an appeal in writing of the denial of certification or sanction. No particular form is required. The appeal must be received within ten (10) days from the date the notice of denial of certification or imposition of sanction is received.
- 2. The appeal should be addressed to: Orange County Sheriff/Certification Coordinator, Adult Alcohol and Drugs Sober Living Facilities Certification Program, North Justice Center, 1275 North Berkeley, Fullerton, California 92832 (Telephone: (714) 773-4520).
- 3. The Certification Coordinator shall forward the appeal and all supporting documentation to the Certification Appeals Board via the District Attorney's Office.

Section 235 Procedures for Hearing Before the Certification Appeals Board

- 1. If an appeal is timely filed, the District Attorney's Office shall schedule a hearing before the Certification Appeals Hearing Board within thirty (30) days, but no sooner than ten (10) days after the appeal was filed by the facility or staff member.
- 2. The District Attorney's Office shall provide the facility and/or staff member with written notice of the hearing, giving the time, date, and location of the hearing.
- 3. During the hearing, the facility and/or staff member shall be given the opportunity to present evidence including, but not limited to, sworn testimony, sworn affidavits, and documentary evidence.

- 4. The District Attorney and/or the Certification Coordinator may also present evidence as noted above.
- 5. At the close of the hearing, the Certification Appeals Board may uphold or overturn the decision to deny certification or uphold, set aside, or modify the sanctions, as applicable. The Board members shall make their individual decisions based upon a preponderance of the evidence presented at the hearing.
- 6. A majority vote of the Board members present determines the result. There must be a minimum of three members voting.
- 7. Within five (5) calendar days after the hearing, the Certification Appeals Board shall issue and transmit to the facility and/or staff member a written decision sustaining, reversing, or modifying the Certification Coordinator's decision.
- 8. The Certification Appeals Board's decision shall be the final administrative determination.

Section 236 Reserved