Kenyon HomeCare Consulting

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California

Non-Skilled Home Care Organization Administrative Policies *and* Procedures Manual

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EDITING YOUR MANUAL

This document's formatting is controlled by the use of Word styles. It is a Microsoft Word document and should operate on systems using Office 2007 software or higher. Kenyon HomeCare Consulting has done its best to ensure reformatting will be minimal for most agencies, but we do not assume liability for any formatting errors that may occur.

There are a number of text placeholders that will need to be replaced with your agency's information. Text placeholders are as follows:

[HOME CARE ORGANIZATION NAME] — Your agency's business name

[BUSINESS TYPE] — Your agency's business type

California — The state your agency is licensed in

[OPENING TIME] — Your agency's opening operating time

[CLOSING TIME] — Your agency's closing operating time

[GEOGRAPHIC COVERAGE AREA] — Your agency's geographic coverage area, including cities, towns, and/or counties

[HOLIDAYS OBSERVED] — Your agency's observed holidays that you will be closed for

[DOLLAR LIMIT] —Your agency's dollar limit within document

[JOB TITLE] — Your agency's Administrator title

[STATUS] — Your agency's status: for-profit or non-profit

To Find and Replace Text Placeholders:

1. On the Edit menu, click Replace.
2. In the Find what box, enter the placeholder text exactly as it is above that you want to search for.
3. In the Replace with box, enter the replacement text.
4. Click Find Next, Replace, or Replace All.
5. To cancel a search in progress, press ESC.

To Update Table of Contents:

You can update either the whole table of contents or page numbers only.

1. Hold down CONTROL key, click the table of contents, and then click Update Field.
2. Click the option that you want.

ACCEPTANCE OF THE ADMINISTRATIVE POLICIES AND PROCEDURES MANUAL

I attest that the following administrative policies and procedures have been reviewed by me and have been accepted and approved by the Owner/Governing Body as the policies and procedures that guide the practices and services for [HOME CARE ORGANIZATION NAME].

Owner/Administrator Date

CALIFORNIA NON-SKILLED HOME CARE ORGANIZATION ADMINISTRATIVE POLICIES AND PROCEDURES MANUAL

REVISED AUGUST 2025

Includes Provider Information Notices (PINs) through July 31, 2025

California Department of Social Services Regulations
The Home Care Services Branch, implemented Jan 1, 2016, is governed by
Division 2, Chapter 13 of the California Health and Safety Code

https://california.public.law/codes/health_and_safety_code,_division_2,_chapter_13

Section code numbers are referenced and each section
can be seen in entirety from the website.

DATE INITIATED: DATE REVISED: DATE REVISED:

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ORGANIZATION AND ADMINISTRATION

LICENSE

POLICY

The [HOME CARE ORGANIZATION NAME] Owner/Governing Body understands that in the State of California, that it is required to obtain a license from the CDSS (California Department of Social Services) and keep that license in compliance with all rules and regulations following the application process as stipulated by the Home Care Services Bureau https://www.cdss.ca.gov/inforesources/community-care/home-care-services/home-care-org-application-process. The Department protects and safeguards the right and opportunity of all persons to seek, obtain, and hold employment without discrimination, abridgment, or harassment on account of race, religious creed, color, national origin, ancestry, physical disability, mental disability, medical condition, genetic information, marital status, sex, gender, gender identity, gender expression, age, sexual orientation, or military and veteran status. The California Fair Employment and Housing Act prohibits various forms of employment discrimination and empowers the Civil Rights Department to investigate and prosecute complaints alleging unlawful practices.

PURPOSE

To assure that the agency has a license to operate and is in compliance with the rules governing that license.

PROCEDURE

APPLICATION FOR INITIAL LICENSE

1. Any adult, firm, partnership, association, corporation, county, city, public agency or other governmental entity desiring to obtain a Home Care Organization license shall file with the Department an application, on forms furnished by the Department.
2. An individual, partnership, corporation, limited liability company, joint venture, association, or other entity shall not arrange for the provision of home care service by a registered home care aide to a client in California before obtaining a licensure pursuant to this chapter. This action shall be deemed “unlicensed home care services.”
3. The Home Care Organization applicant shall sign the application acknowledging he or she has read and understands the statutes and written directives which pertain to Home Care Organizations prior to the issuance of a license.
4. The application package shall contain completion of the Home Care Organization application, including fees required to Health and Safety Code (HSC) Section 1796.49. along with the following on forms furnished by the Department:
5. Application for a Home Care Organization:
    a. Home Care Organization applicant name, mailing address and telephone number.
    b. Type of application action requested.
    c. Name of the individual or entity filing the application.
    d. Name, email address, and telephone number of the Home Care Organization.

e. Physical address and county of the Home Care Organization.

f. Alternate telephone number, if applicable.

g. Mailing address of the Home Care Organization.

h. Name and title of designee or person in charge of the Home Care Organization.

i. Total number of aides as measured by the estimated number of Affiliated Home Care Aides to be employed, or if applying prior to January 1, 2016, the current number of individuals providing home care services.

j. Business office hours of Home Care Organization.

k. Property ownership status, and name, mailing address, and phone number of property owner if renting or leasing, if applicable.

l. If the Home Care Organization was previously licensed, provide the previous name and license number.

m. If currently operating any community care facility, residential care facility for the elderly, residential care facility for persons with chronic life-threatening illness, child day care facility, day care center, family day care home, employer-sponsored childcare center, or Home Care Organization, provide the facility or Home Care Organization name and facility or Home Care Organization number.

n. Home Care Organization applicant or Home Care Organization licensee signature, title, county where signed, and date.

6. If the Home Care Organization applicant is a partnership, the name, signature, and mailing address of each general partner shall be provided.

7. If a general partner is a corporation or other business organization, the chief executive officer, or equivalent shall sign the application.

8. All general partners shall be on the license and sign the application.

9. If the member or managing member is a corporation or other business organization, the managing member or equivalent shall sign the application for a Home Care Organization.

10. If the Home Care Organization applicant is a corporation the application shall be signed by the chief executive officer or equivalent.

11. Any other information which may be required by the Department for the proper administration and enforcement of this directive.

12. Home Care Organization applicant required information:

a. Name and title within the Home Care Organization.

b. Sex of Home Care Organization applicant or Home Care Organization licensee.

c. Date of birth of the Home Care Organization applicant or Home Care Organization licensee.

d. The Home Care Organization applicant's or Home Care Organization licensee's home mailing address and home telephone number.

e. Other name(s) used by the Home Care Organization applicant or Home Care Organization licensee.

f. If the Home Care Organization applicant or Home Care Organization licensee has ever held or currently holds beneficial ownership interest of ten (10) percent or more in a Home Care Organization or a facility set forth in Health and Safety Code section 1796.17(b)(8), the following shall be provided:

i. Name and address of facility(s) or Home Care Organizations.

ii. Effective date(s) of licensure.

iii. Facility type, if applicable.

13. If the Home Care Organization applicant or Home Care Organization licensee worked in the home care services industry within five (5) years of the application filing date, and if the Home Care Organization applicant or Home Care Organization licensee owned, co-owned, or operated any business within the last three (3) years of the application filing date, the following shall be provided:

a. Name of business.

b. Number of employees.

c. Home Care Organization applicant's or Home Care Organization licensee's title.

d. Start and end date of ownership or operation.

e. Reason for leaving.

14. All individuals, each general partner in a partnership, and chief executive officer or authorized representative in a corporation shall provide Home Care Organization applicant information, signature, county where signed, and date of signature.

15. If the Home Care Organization applicant or Home Care Organization licensee has prior or present service as an administrator, general partner, corporate officer, or director in a Home Care Organization or facilities set forth in Health and Safety Code section 1796.17(a)(8), the following shall be provided:

a. Name and address of facility(s) or Home Care Organization(s).

b. Effective date(s) of licensure.

c. Facility type.

16. The Home Care Organization applicant or Home Care Organization licensee shall disclose any current or prior TrustLine registration to the Department.

17. The Home Care Organization applicant or Home Care Organization licensee shall acknowledge any revocation, denial, exclusion, forfeiture or any other disciplinary action taken or in the process of being taken against a licensed clinic, health care facility, community care facility, residential care facility for persons with chronic life-threatening illness, residential care facility for the elderly, child day care facility, day care center, family day care home, employer-sponsored child care center, or Home Care Organization with which they are or were affiliated and provide the following information:

a. Name and address of the facility, Home Care Organization, or licensed clinic.

b. Effective dates of licensure.

c. Facility type.

d. Explanation of action(s) taken and how the action was resolved.

e. Any other information which may be required by the Department for the proper administration and enforcement of this directive.

18. Designation of Home Care Organization responsibility:
    a. Date form was completed.
    b. Home Care Organization name, physical address, county, and telephone number.
    c. Name and signature of each designee, acknowledging understanding of his or her roles and responsibilities as a designee of the Home Care Organization, and the understanding that the Home Care Organization operation is governed by statues and written directives that are enforced by the Department.
    d. Name and signature of the Home Care Organization applicant or Home Care Organization licensee, and title.
    e. Home Care Organization applicant or Home Care Organization licensee mailing address.
    f. Any other information which may be required by the Department for the proper administration and enforcement of this directive.

PARTNERSHIP, CORPORATION, LIMITED LIABILITY COMPANY, ORGANIZATION STRUCTURE:

1. Corporations and Limited Liability Companies shall provide the following information:
    a. Home Care Organization name as filed with the California Office of the Secretary of State.
    b. Name of chief executive officer or equivalent.
    c. Incorporation or registration date.
    d. Place of incorporation or registration.
    e. Corporation or limited liability company number.
    f. Supporting documents as set forth in (d)(1)(A), (d)(1)(B), and (d)(1)(E).
    g. Home Care Organization principal office of business address and county.
    h. Name, title, and telephone number of contact person.
    i. Name and address of agent for service of process.
    j. If Home Care Organization applicant is an out of state or foreign applicant, the following information must be provided:
        i. Name, mailing address, and telephone number of California representative.
        ii. Name and addresses of all persons who hold a beneficial ownership of ten (10) percent or more interest in the corporation or Limited Liability Company.
        iii. Percentage of the corporation or Limited Liability Company held.
        iv. If ownership interest is indirectly held, provide a diagram showing a chain of ownership and the interests held at each level.
2. If a corporation:
    a. The number of directors, method of selection and if applicable, term of office, and frequency of meetings.

b. Name, mailing address, telephone number, and term expiration date for each officer.

3. If a Limited Liability Company:
    a. The number of managers, managing members, method of selection and if applicable, term of office, and frequency of meetings.
    b. Name, mailing address, telephone number and term expiration date for each manager or managing member.
    c. Name, officer title, principal office of business address, telephone number and term expiration date of each officer, if applicable.
4. Public agencies shall provide the following information:
    a. Identify if the Home Care Organization is a public agency and identify the type of public agency.
    b. Name, physical address, city, state, and zip code of the public agency.
    c. Mailing address of the public agency.
    d. District or area to be served by the public agency and, if necessary, attached map.
5. Partnerships shall provide the following information:
    a. Name, principal business address other than Home Care Organization address, telephone number, city, state, and zip code for each general partner.
    b. Contact person name, title, and telephone number.
6. Other associations shall provide the following information:
    a. A list of persons legally responsible for the Home Care Organization, contact person, and appropriate legal documents which set forth legal responsibility of the Home Care Organization and accountability for operating the Home Care Organization.
    b. Any other information which may be required by the Department for the proper administration and enforcement of this directive.
7. If the Home Care Organization applicant is an entity controlled by a board of directors, a board of directors' statement including the following:
    a. Home Care Organization name and telephone number.
    b. Board member or prospective board members' name, home mailing address, city, state, zip code, and telephone number.
    c. Signed statement from each member or prospective member of the board of directors acknowledging that he or she understands his or her legal duties and obligations as a member of the board of directors and that the
    d. Home Care Organization's operation is governed by the laws and written directives enforced by the Department.
    e. Date of signature.
8. Criminal record statement for each individual specified in Health and Safety Code section 1796.33:
    a. Crime information for California, if applicable.

b. Crime information for other states, federal court, military, or jurisdiction outside of the U.S., if applicable.

c. Name of the individual.

d. Address of the individual.

e. Date of birth of the individual.

f. Valid driver's license number of the individual, if applicable.

g. Individual's signature and date.

9. The application supporting documents shall contain the following:

a. Partnership, Corporation, Limited Liability Company, Organization Structure administration documents shall include:

i. A corporation shall provide a copy of articles of incorporation, constitution and bylaws and any amendments thereto.

ii. A Limited Liability Company shall provide a copy of its articles of organization and operating agreement and any amendments thereto.

iii. A partnership of any type shall provide a copy of its partnership agreement, any related governing documents, and any amendments thereto.

iv. A partnership agreement is not required when the partners are husband and wife.

v. Where applicable, a diagram showing all affiliated organizations, including parent, grandparent and other entities that can control the Home Care Organization applicant or Home Care Organization licensee through voting, or power of appointments.

vi. A copy of the resolution authorizing the filing of a Home Care Organization license application, if a corporation.

vii. Public agencies shall provide a copy of the resolution or legal document authorizing application for Home Care Organization licensure.

viii. If the Home Care Organization applicant or Home Care Organization licensee is a foreign corporation, Limited Liability Company, limited partnership, or limited liability partnership they shall provide a copy of registration to do business in California from the Office of the Secretary of State.

ix. Any other information which may be required by the Department for the proper enforcement of this directive.

b. Job descriptions for staff, Affiliated Home Care Aides, and volunteers shall include:

i. Duties and responsibilities for each classification.
ii. Minimum qualifications for each classification.
iii. Lines of supervision for each classification.
iv. Any other information which may be required by the Department for the proper administration and enforcement of this directive.

c. Personnel policies shall include:

i. Qualifications of employment.

ii. Abuse reporting procedures to include instruction outlined in Health and Safety Code section 1796.42(e).

iii. Hiring practices to include procedures informing employees that conditions of employment include fingerprint clearance and TB clearance.

iv. Any other information which may be required by the Department for the proper administration and enforcement of this directive.

d. Affiliated Home Care Aide training plan shall include:

i. Entry-level training: a minimum of five (5) hours of training PRIOR to presence with a client

A. Written description of objectives, title, duration, and instructor of each component for orientation training as specified in Health and Safety Code section 1796.44(b)(1).

(a) Two (2) hours of orientation training regarding his or her role as caregiver and the application terms of employment.

(b) Three (3) hours of safety training, includes the basic safety precautions, emergency procedures. and infection control (refer to relate policies in this manual, including infection control program; safety and workplan violence prevention program, evacuation planning in the event of an emergency)

B. Written description of objectives, title, duration, and instructor of each component for basic safety training as specified in Health and Safety Code section 1796.44(b)(2). (basic safety precautions, emergency procedures and infection control)

ii. Annual training

A. The Affiliated Home Care Aide shall complete a minimum of five (5) hours of annual training These are additional hours to the entry five (5) hours of training. The annual training shall relate to core competencies and be agency population-specific, including but not limited to the following:

(a) Client's rights and safety

(b) How to provide for, and respond to, a client's daily living needs

(c) How to report, prevent, and detect abuse and neglect

(d) How to assist a client with personal hygiene and other home care services

(e) If transportation services are provided, how to safely transport a client

e. Written description of objectives, title, duration, and instructor of each core competency for annual training as specified in Health and Safety Code section 1796.44(c). (Refer to Resource Toolkit Training Log in this manual)
https://california.public.law/codes/health_and_safety_code_section_1796.44

i. Provide an example of the verification log of training to include information as set forth in Health and Safety Code section 1796.44((Refer to Resource Toolkit Training Log in this manual.)

ii. Any other information which may be required by the Department for the proper administration and enforcement of this directive.

f. The entry-level training and annual training described above (i and ii) may be completed through an online training program

g. Home Care Organization program description shall include:

i. Business Hours.

ii. (Description of basic and optional services to include but not be limited to transportation provided to clients by the Home Care Organization.

iii. Procedure for response to abuse reporting duties.

iv. A description of service counties or areas where clients are served.

v. Any other information which may be required by the Department for the proper administration and enforcement of this directive.

vi. A pamphlet, brochure, or other documents provided all the information is included.

10. As of January 01, 2023, the Department may issue a home care organization license to the applicant that satisfies the requirements set forth in this chapter, filing a complete home care organization application, including the fees (Section 1796.49) and all of the following:

a. Passes a background examination, as required pursuant to Section 1796.33.

b. Completes a department orientation.

c. Does not have any outstanding fees or civil penalties due to the department.

d. Provide a Bonding and Insurance verification which shall include:

i. Home Care Organization surety bond:

A. The original Home Care Organization surety bond shall be received by the Department and be in the amount specified in Health and Safety Code section 1796.37(a)(4). The Home Care Organization surety bond shall include the following:

(a) Home Care Organization applicant or Home Care Organization licensee name and mailing address.

(b) Surety company name, mailing address and telephone number.

(c) Local agent name and telephone number.

(d) Bond amount as specified in Health and Safety Code section 1796.37(a)(4).

(e) Home Care Organization name and address.

(f) Home Care Organization number, if applicable.

(g) Effective date of the bond.

(h) Attorney in Fact of Surety company name and signature, bond number, and date signed.

(i) Principal name and signature.

e. Submits proof of general and professional liability insurance in the amount of at least one million dollars ($1,000,000) per occurrence and three million dollars ($3,000,000) in the

aggregate and shall include the following for each policy: The proof shall consist of the policy number, effective and expiration dates of the policy, name and address of the carrier, name and address of the broker or agent, and the policy limits. (Chapter 13, Article 7: 1796.42)

f. Submits proof of a valid workers' compensation policy covering its Affiliated Home Care Aides. The proof shall consist of the policy number, the effective and expiration dates of the policy, and the name and address of the policy carrier.

g. Submits proof of an employee dishonesty bond, including third-party coverage, with a minimum limit of ten thousand dollars ($10,000). This proof shall be submitted at each subsequent renewal.

11. Provides the department, upon request, with a complete list of its Affiliated Home Care Aides, and proof that each satisfices the requirements of Sections 1796.43, 1796.44, and 1796.45.

12. Discloses prior or present service as an administrator, general partner, corporate officer, or director of, or discloses that he or she has held or holds a beneficial ownership of 10 percent or more in, any of the following:

    a. A community care facility, as defined in Section 1502.

    b. A residential care facility, as defined in Section 1568.01

    c. A residential care facility for the elderly as defined in Section 1569.2.

    d. A child-care day-care facility, as define in Section 1596.750.

    e. A day care center, as described in Chapter 3.5 (commencing with Section 1596.90).

    f. A family day care home, as described in Chapter 3.6 (commencing with Section 1597.30).

    g. An employer-sponsored childcare center, as described in Chapter 3.65 (commencing with Section 1597.70

13. A home care organization licensed pursuant to this chapter,

    a. Discloses any revocation or other disciplinary action taken, or in the process of being taken, against a license held or previously held by the entities specified in paragraph (11).

    b. Provides evidence that every member of the board of directors, if applicable, understands his or her legal duties and obligations as a member of the board of directors and that the home care organization's operation is governed by laws and regulations that are enforced by the department.

    c. Provides any other information as may be required by the department for the proper administration and enforcement of this chapter.

    d. Cooperates with the department in the completion of the home care organization license application process. Failure of the home care organization licensee to cooperate may result in the withdrawal of the home care organization license application. “Failure to cooperate” means that the information described in this chapter and in any rules and regulations promulgated pursuant to this chapter has not been provided, or not provided in the form requested by the department, or both.

SUBMISSION OF NEW APPLICATION FORMS

1. [Home Care Organization] licensee shall file new application forms and all other required forms and supporting documents as required for the following reasons, which include, but are not limited to:
    a. A change in the location of the Home Care Organization
        i. A licensee shall provide information on forms provided by the Department.
    b. When the licensee is a corporation, any change of licensee including, but not limited to the following:
        i. Change in controlling interest including but not limited to change in majority stock holding, change in membership of a nonprofit, change in ownership of parent company or another affiliate.
        ii. Separating from a parent company.
        iii. Merger with another company.
2. All application documents shall be signed.
3. The Home Care Organization licensee shall provide original documents to the Department.

INITIAL APPLICATION REVIEW AND ISSUANCE OF LICENSE

1. Within ninety (90) calendar days of receipt of the application package, the Department shall give written notice to the Home Care Organization applicant of one of the following:
    a. The application package is complete, and the Department will begin its review.
    b. The application package is deficient, describing what documents are outstanding, inadequate, or both, and informing the Home Care Organization applicant the information must be submitted within thirty (30) calendar days of the date of the notice.
2. If the Home Care Organization applicant does not submit the required information within the thirty (30) calendar days, the application may be denied unless the Department has received and approval a withdrawal request.
3. The application review shall not constitute approval of the application.
4. Within ninety (90) calendar days of the date that a completed application package has been received and its review has been completed, the Department shall give written notice to the Home Care Organization applicant or Home Care Organization licensee of one of the following:
    a. The application has been approved.
    b. Issuance of the license itself shall constitute written notification of license approval.
5. The application has been denied.
    a. The notice of denial shall include the information of the denial.
    b. The Department may continue to review a denied application for reasons that include, but are not limited to, a person with a criminal record, which was the basis for license denial, is no longer associated with the Home Care Organization.
6. The Department has ceased review as one or more of the conditions specified in Health and Safety Code section 1796.40 has occurred.

a. Section 1796.40: If an application for a home care organization license indicates, or the department determines during the application review process, that the home care organization applicant was previously issued a license under this chapter (or under Chapter 1, 2, or Chapters 3) and the prior license was revoked within the preceding two years, the department shall cease any further review of the application until two years have elapsed from the date of the revocation.

7. The Department shall provide written notice to the Home Care Organization applicant, indicating when the Home Care Organization applicant may reapply for licensure. It shall be the responsibility of the Home Care Organization applicant to submit a new application if a license is still desired. Cessation of review will not result in additional time added to the initial denial or revocation period as set forth in the Health and Safety Code section 1796.40.

LICENSING OF INTEGRAL HOME CARE ORGANIZATIONS

1. Upon receipt of a written application from the Home Care Organization applicant or licensee, the Department may issue a single license for a separate building(s), which might otherwise require a separate license, if the following requirements are met:
    a. The separate building(s) of the Home Care Organization are integral components of a single Home Care Organization, and
    b. All components of the Home Care Organization are conducted at a single site with a common address and owned and operated by the same licensee, even if there are separate buildings or portions of the Home Care Organization on the site.
    c. If this does not apply, each component shall be separately licensed.

POSTING OF INFORMATION

1. A Home Care Organization license shall be valid, unaltered, and posted pursuant to Health and Safety Code section 1796.42.
2. The posted business hours shall be in no less than 36-point type.
3. Notification of sale of property, or business, or both shall be posted in no less than 12-point type and at least thirty (30) calendar days prior to the date of sale.

CONDITION OF LICENSE FOR SALE OF PROPERTY AND BUSINESS; CHANGE IN OWNER

1. A Home Care Organization license, and any waiver and exception issued to a HomeCare Organization shall not be transferable.
2. In the case of a Home Care Organization Licensee death, written notification of the date of death and the status of the Home Care Organization shall be provided to the Department within two (2) days or as soon as possible. If a new owner is identified, this change in ownership shall comply with Submission of New Application Forms, and the following: 3. and 4.
3. In the case of change of owner, a new application for licensure shall be submitted by the Home Care Organization applicant.

4. The Home Care Organization operations shall not be continued until the buyer or owner qualifies for a Home Care Organization license or conditional license.
    a. The seller shall notify, in writing, the prospective buyer of the necessity to obtain a Home Care Organization license, as required by this directive, if the buyer's intent is to continue operating the Home Care Organization as a Home Care Organization. The seller shall send a copy of this written notice to the Department within five (5) working days of notifying the buyer.
    b. The prospective buyer shall submit an application for a Home Care Organization license, within five (5) working days of the acceptance of the offer by the seller.
    c. No sale of the Home Care Organization shall be permitted until thirty (30) days have elapsed from the date upon which notice has been provided pursuant to paragraphs (4) (a) and (b).
    d. The Department shall give priority to applications for licensure which are submitted pursuant to this section in order to ensure timely transfer of the property and business. The Department shall make a decision within sixty (60) days after a complete application is submitted on whether to issue a Home Care Organization license.
    e. If the parties involved in the transfer of the property and business fully comply with this section, then the transfer may be completed, and the buyer shall not be considered to be operating an unlicensed Home Care Organization while the Department makes final determination on the application for initial licensure.
5. No license issued pursuant to the provisions of this directive shall have any property value for sale or exchange purposes and no person, including any owner, agent, or broker shall sell or exchange any license for any commercial purpose.

ADVERTISEMENT AND LICENSE NUMBER

1. Each Home Care Organization licensed under this directive may reveal its license number in all advertisements, publications, or announcements made with the intent to attract clients.
2. Advertisements, publications, or announcements subject to the requirements of subdivision shall include, but are not limited to, those contained in the following:
    a. Print advertising.
    b. Consumer report.
    c. Announcement of intent to commence business.
    d. Professional or service directory.
    e. Website.
    f. Email.
    g. Social Media.
3. Correspondence shall be considered a form of advertisement if the intent is to attract clients.

WITHDRAWAL OF APPLICATION FOR INITIAL LICENSE

1. A Home Care Organization applicant shall have the right to request to withdraw an initial application.
2. The withdrawal shall be in writing, and the application fee shall be forfeited.

3. A withdrawal request shall not deprive the Department of its authority to institute or continue a proceeding against the Home Care Organization applicant or Home Care Organization licensee upon any ground provided by law unless it has consented in writing to such withdrawal.
4. If the Department grants the withdrawal, no time shall be required to elapse before a new application may be submitted.

LICENSEE ORIENTATION

1. The Home Care Organization applicant or Home Care Organization licensee shall attend an orientation approved by the Department prior to receiving a license.
2. When applying for more than one license simultaneously or applying for an additional license, the Home Care Organization applicant or Home Care Organization licensee shall not be required to attend more than one orientation unless three (3) or more years have elapsed from the date of the last orientation the Home Care Organization applicant or Home Care Organization licensee successfully completed.
    a. The orientation shall cover, but not be limited to, the following areas:
        i. Scope of operation subject to regulation by the Department.
        ii. Reporting requirements.
        iii. Inspection process.
    b. Upon completion of the orientation, a quiz shall be administered to the Home Care Organization applicant or Home Care Organization licensee.
    c. An orientation certificate which verifies successful completion will be provided by the Department and shall be included in the personnel record as specified in Section 90-066
    d. The orientation shall be attended and successfully completed within thirty (30) calendar days from the Department receiving payment for the orientation.
    e. Unless approved by the Department, the orientation fee is due prior to registration for an orientation.
    f. The orientation fee is nonrefundable and shall be paid by check or money order made payable to the Department and mailed to the address indicated in the orientation notice.

CONDITIONAL LICENSE

1. The Department may issue a conditional license to an applicant, upon the filing of a Home Care Organization application for a conditional license, if it determines the following circumstances exist:
    a. The Home Care Organization applicant is in substantial compliance with applicable laws and written directives, and an urgent need for licensure exists, including but not limited to, the need to facilitate the sale of a Home Care Organization.
2. The Department shall have the authority to issue a conditional license for a maximum of four (4) months when it determines that full compliance with licensing laws will be achieved within that time period.
3. The Department shall have the authority to extend a conditional license for an additional three (3) months when it determines that four (4) months is required to achieve full compliance with licensing laws due to circumstances beyond the control of the Home Care Organization applicant.

4. If, during the conditional license period, the Department discovers any serious deficiencies, the Department shall have the authority to institute an administrative action and refer the case for criminal prosecution, if home care services continue.
5. A conditional license shall not be extended and shall terminate on the date specified on the license, or upon denial of the application, whichever is earlier.
6. If a conditional license is converted to a Home Care Organization license the renewal date of the Home Care Organization license shall be based upon the original issue date of the conditional license.
7. Upon applying for a conditional license, the individual or entity shall no longer be considered an unlicensed Home Care Organization and the civil penalty for violation of Health and Safety Code Section 1796.35 shall not accrue for the duration of the conditional license unless the application is withdrawn.
8. The denial, termination or withdrawal of a conditional license shall not deprive the Department of its authority to institute or continue a proceeding against the Home Care Organization applicant upon any ground provided by law, including criminal prosecution.
9. The civil penalty authorized in Health and Safety Code section 1796.35 shall be imposed if an unlicensed Home Care Organization is operated and the individual or entity refuses to seek licensure or the Home Care Organization applicant seeks licensure and the license application is denied and the individual continues to operate the unlicensed Home Care Organization, or the conditional license terminates, and the individual continues to operate the unlicensed Home Care Organization.
    a. A Home Care Organization applicant may appeal the denial, or the assessment of civil penalties, or both to the director, or both to the Bureau Chief.

WAIVERS AND EXCEPTIONS

1. Unless prior written Department approval is received as specified in (b) below, the Home Care Organization licensee shall maintain continuous compliance with the written directives.
2. The Department shall have the authority to approve a waiver for a Home Care Organization-wide need or circumstance or an exception for a client, Home Care Aide or staff need or circumstance, if the use of alternate concepts, programs, services, procedures, techniques, personnel qualifications, or the contact of experimental or demonstration projects under the following circumstances:
    a. Such alternatives shall be carried out with provisions for safe and adequate services and shall in no instance be detrimental to the health and safety of any Home Care Organization client, staff, volunteer, or Affiliated Home Care Aide.
    b. The Home Care Organization applicant or Home Care Organization licensee shall submit to the Department a written request for a waiver or exception, together with substantiating evidence supporting the request.
3. Within thirty (30) calendar days of receipt of a request for a waiver or an exception, the Department shall notify the Home Care Organization applicant or Home Care Organization licensee, in writing, of one of the following:
    a. The request, with substantiating evidence, has been accepted for consideration.
    b. The request is deficient, describing additional information required for the request to be acceptable and a time frame for submitting this information.

i. Failure of the Home Care Organization applicant or Home Care Organization licensee to comply within the time specified in above shall result in denial of the request.

4. Ninety (90) calendar days following the acceptance of the request as specified in (c)(1), the Department shall notify the Home Care Organization applicant or Home Care Organization licensee, in writing, whether the request has been approved or denied.

LICENSING FEES

1. An application fee as specified in the Health and Safety Code section 1796.49 shall be charged by the Department:
    a. After initial licensure, a renewal fee shall be charged by the Department every two years on the anniversary of the effective date of the license
    b. The initial fee and renewal fee are nonrefundable
    c. The fees, and other reasonable fees, as prescribed by the Department, are necessary for enforcement and administration of the Health and Safety Code Division 2, Chapter 13
2. In addition to fees set forth in subdivision (a), the Department shall charge the following fees:
3. (Fees are subject to change https://www.ca.gov/inforesoruces/community-case-licensing/orientation)
    a. A fee for attendance of a department-approved orientation session
    b. A fee if change occurs within a corporation
4. In addition to fees set forth in subdivision (a) and (b), the Department may charge the following fees:
    a. A fee if an existing licensee moves the Home Care Organization to a new physical address.
    b. A fee that represents fifty (50) percent of the initial application fee if change occurs within a corporation
    c. A probation monitoring fee, if applicable, equal to the initial application fee
5. [HOME CARE ORGANIZATION NAME] understands that all fees are nonrefundable.
6. A Home Care Organization shall use a check or money order to pay all fees unless otherwise specified.
7. If a business or personal check has been dishonored, a business or personal check will no longer be accepted, and payment must be in the form of a cashier's check or money order only.

ADMINISTRATION OF SUB-OFFICE

8. In addition to its address of licensure, a Home Care Organization licensee may operate a sub-office(s) for the purpose of Home Care Aide training and recruitment or exchange of Home Care Aide personnel documents.
9. Prior to operation, a sub-office shall be approved by the Department.
10. The request for a Home Care Organization sub-office (HCS001 Date 12/15) shall contain the following information on a form furnished by the Department:
    a. Type of application action requested.
    b. Home Care Organization name, number, and mailing address.

c. Name of the licensee and telephone number.

d. Address of the sub-office.

e. Operating days and operating hours of the sub-office. There shall be an agency representative in the sub-office during the hours posted.

f. Name and title of designee(s) or person(s) in charge of the sub-office during operating hours.

g. The primary purpose of the sub-office.

h. How the Home Care Organization will ensure there is no full-time staff working at the sub-office and that no records for clients or Affiliated Home Care Aides are permanently stored at the sub-office.

i. For purposes of this section, full-time means no more than 24 hours in a seven-day period.

11. The sub-office shall post a copy of the Home Care Organization license in a conspicuous location.

12. The sub-office shall not provide in-person meetings with clients or potential clients.

    a. A sub-office may refer a client or potential client to the Home Care Organization address if an on-site meeting is requested by a client or potential client.

13. The Home Care Organization shall submit a new request prior to a change of sub-office.

14. The Department shall have inspection authority over a Home Care Organization licensee's sub-office(s) and may make unannounced surveys to the sub-office .

15. The Home Care Organization shall ensure that the staffing operation and administration of a sub-office complies with the provision of the Home Care Services Protection Act. The Department may take administrative action against a Home Care Organization licensee for the failure of a sub-office to comply with any provision of this written directive.

16. Pursuant to Health and Safety Code section 1796.17(a), the Department may require a sub-office to become licensed as a separate Home Care Organization when it has determined that the volume and complexity of services provided are such that the sub-office no longer is within the parameters of the definition of a sub-office.

REFERENCES:

H&S Code Chapter 13 Article 7 1796.42
https://California.pubic.aw/code/ca_health_and_safety-code-section-1796.24