

## NOTICE PUBLICATION/REGULATIONS SUBMISSION

**CERT**

(See instructions on reverse)

For use by Secretary of State only

STD. 400 (REV. 10/2019)

OAL FILE NUMBERS	NOTICE FILE NUMBER Z-2022-0524-07	REGULATORY ACTION NUMBER 2022-1017-010	EMERGENCY NUMBER C
For use by Office of Administrative Law (OAL) only			
NOTICE		REGULATIONS	
AGENCY WITH RULEMAKING AUTHORITY Department of Developmental Services			AGENCY FILE NUMBER (If any)

OFFICE OF ADMIN. LAW  
2022 OCT 17 PM 12:22**A. PUBLICATION OF NOTICE (Complete for publication in Notice Register)**

1. SUBJECT OF NOTICE Community Crisis Homes/Enhanced Behavioral	TITLE(S) 17	FIRST SECTION AFFECTED 59000	2. REQUESTED PUBLICATION DATE June 3, 2022
3. NOTICE TYPE <input checked="" type="checkbox"/> Notice re Proposed Regulatory Action <input type="checkbox"/> Other	4. AGENCY CONTACT PERSON Amy Whiting	TELEPHONE NUMBER (916) 654-4418	FAX NUMBER (Optional)
OAL USE ONLY	ACTION ON PROPOSED NOTICE <input type="checkbox"/> Approved as Submitted <input type="checkbox"/> Approved as Modified <input type="checkbox"/> Disapproved/Withdrawn	NOTICE REGISTER NUMBER	PUBLICATION DATE

**B. SUBMISSION OF REGULATIONS (Complete when submitting regulations)**

1a. SUBJECT OF REGULATION(S) Children's CCH and EBSH Certificate of Compliance	1b. ALL PREVIOUS RELATED OAL REGULATORY ACTION NUMBER(S) 2021-0615-08E, 2022-0415-01EE, 2022-0715-02EE
2. SPECIFY CALIFORNIA CODE OF REGULATIONS TITLE(S) AND SECTION(S) (Including title 26, if toxics related)	
SECTION(S) AFFECTED (List all section number(s) individually. Attach additional sheet if needed.)	ADOPT See Attachment A
	AMEND See Attachment A
TITLE(S) 17	REPEAL
3. TYPE OF FILING	
<input type="checkbox"/> Regular Rulemaking (Gov. Code §11346) <input type="checkbox"/> Resubmission of disapproved or withdrawn nonemergency filing (Gov. Code §§11349.3, 11349.4) <input type="checkbox"/> Emergency (Gov. Code, §11346.1(b)) <input checked="" type="checkbox"/> Certificate of Compliance: The agency officer named below certifies that this agency complied with the provisions of Gov. Code §§11346.2-11347.3 either before the emergency regulation was adopted or within the time period required by statute. <input type="checkbox"/> Resubmission of disapproved or withdrawn emergency filing (Gov. Code, §11346.1) <input type="checkbox"/> Emergency Readopt (Gov. Code, §11346.1(h)) <input type="checkbox"/> File & Print <input type="checkbox"/> Other (Specify) _____ <input type="checkbox"/> Changes Without Regulatory Effect (Cal. Code Regs., title 1, §100) <input type="checkbox"/> Print Only	
4. ALL BEGINNING AND ENDING DATES OF AVAILABILITY OF MODIFIED REGULATIONS AND/OR MATERIAL ADDED TO THE RULEMAKING FILE (Cal. Code Regs. title 1, §44 and Gov. Code §11347.1) August 15, 2022 through August 30, 2022	
5. EFFECTIVE DATE OF CHANGES (Gov. Code, §§ 11343.4, 11346.1(d); Cal. Code Regs., title 1, §100) <input type="checkbox"/> Effective January 1, April 1, July 1, or October 1 (Gov. Code §11343.4(a)) <input checked="" type="checkbox"/> Effective on filing with Secretary of State <input type="checkbox"/> \$100 Changes Without Regulatory Effect <input type="checkbox"/> Effective other (Specify) _____	
6. CHECK IF THESE REGULATIONS REQUIRE NOTICE TO, OR REVIEW, CONSULTATION, APPROVAL OR CONCURRENCE BY, ANOTHER AGENCY OR ENTITY <input checked="" type="checkbox"/> Department of Finance (Form STD. 399) (SAM §6660) <input type="checkbox"/> Fair Political Practices Commission <input type="checkbox"/> State Fire Marshal <input type="checkbox"/> Other (Specify) _____	
7. CONTACT PERSON Amy Whiting	TELEPHONE NUMBER (916) 654-4418
FAX NUMBER (Optional)	E-MAIL ADDRESS (Optional) regulationsmailing@dds.ca.gov

8. I certify that the attached copy of the regulation(s) is a true and correct copy of the regulation(s) identified on this form, that the information specified on this form is true and correct, and that I am the head of the agency taking this action, or a designee of the head of the agency, and am authorized to make this certification.

For use by Office of Administrative Law (OAL) only

SIGNATURE OF AGENCY HEAD OR DESIGNEE DocuSigned by:  
Carla Castañeda

DATE  
October 13, 2022

TYPED NAME AND TITLE OF SIGNATORY  
069361741D0C4E3...  
Chief Deputy Director

# Attachment A

## NOTICE PUBLICATION/REGULATIONS SUBMISSION

Std. 400 (REV. 10/2019)

### B. SUBMISSION OF REGULATIONS

2. SPECIFY CALIFORNIA CODE OF REGULATIONS TITLE(S) AND SECTION(S)

<b>SECTION(S) AFFECTED</b> (List all section number(s) Individually. Attach additional sheet if needed.)	ADOPT <b>59009.5, 59010.1, 59010.2, 59010.3, 59010.4, 59010.5, 59059.5, 59060.1, 59060.2, 59060.3, 59060.4, and 59060.5</b>
	AMEND <b>59000, 59001, 59002, 59004, 59005, 59006, 59007, 59008, 59009, 59010, 59011, 59012, 59013, 59022, 59050, 59051, 59052, 59054, 59055, 59056, 59057, 59058, 59059, 59060, 59061, 59062, 59063, 59064, 59065, 59066, 59067, 59068, 59069, 59070, 59071 and 59072</b>
TITLE(S) <b>17</b>	REPEAL