

LICENSING SCORESHEET
Community Homes – CHAPTER 6400 – 11/17/17

App Number: _____ SIN Number: _____ PCID: _____

Date(s) of On-Site Inspection: _____

Name(s) of Inspector(s): _____

Start/Stop Time for Each Date: _____ Total Travel To Home: _____

Name of Legal Entity: _____

Name of Facility: _____ License Capacity: _____ Current Census: _____

Address of Facility: _____ County: _____

Total Bedrooms: _____ Single: _____ Double: _____ Bathrooms: _____ Toilets: _____ Sinks: _____

Person In Charge: _____ Signature & Time: _____

Type of Inspection: Full

Partial

Reason: **Renewal** (annual, full inspection conducted to renew a regular license)

Provisional (follow-up inspection while a facility is operating on a provisional license, including provisional renewal inspection)

Initial (new facility or sale of legal entity)

Interim (any inspection that is not otherwise listed)

Complaint

Incident

Monitoring

Settlement - BHA Docket#: _____

Notice: Unannounced Announced

Waiver(s): Granted Denied **Date(s):** _____ **Regulation(s):** _____

N/A

GENERAL REQUIREMENTS

11 C V NM NA Chapter 20
 13 C V NM NA Max Capacity
 14a C V NM NA Occupancy Permit
 14b C V NM NA Permit Withdrawn
 14c C V NM NA Renovations Approval
 15a C V NM NA Self-Assessment
 15b C V NM NA L.I.I. Used
 15c C V NM NA L.I.I. Results
 16 C V NM NA Abuse
 17 C V NM NA Reporting to Childline
 18b C V NM NA Unusual Incidents Policy
 18c C V NM NA UI Oral Notice - 24 Hrs.
 18d C V NM NA UI Report - 72 Hrs.
 18e C V NM NA Final Report
 18f C V NM NA UI Reports – Ind. Record
 18g C V NM NA UI Reports Kept
 18h C V NM NA Family Notification - UI
 19a C V NM NA Death Report - 24 Hrs.
 19b C V NM NA Investigation of Unusual Death
 19c C V NM NA Death Report - Ind. Rec.
 19d C V NM NA Family Notification - Death
 20 C V NM NA Incident Record

21a C V NM NA PSP Clearance – 5 days
 21b C V NM NA FBI Clearance – 5 days
 21c C V NM NA Clearances 1 Year
 21d C V NM NA Clearances kept
 21e C V NM NA Child Abuse Clearance
 22a C V NM NA Funds and Property Policy
 22b C V NM NA Ind. Right to manage finances
 22c C V NM NA Ind. Funds – Ind. Benefits
 22d1 C V NM NA Financial/Prop. Record
 22d2 C V NM NA Record - Disbursement
 22e1 C V NM NA Record Deposits/Withdrawals
 22e2 C V NM NA Record Funds to Ind.
 22e3 C V NM NA Receipt over \$15
 22f C V NM NA Comingling of Ind. Funds
 22g C V NM NA Borrowing of Ind. Funds
 23 C V NM NA Grievance Procedures

INDIVIDUAL RIGHTS

31a C V NM NA Ind. Informed
 31b C V NM NA Signed Statement
 31c C V NM NA Exercise Rights
 32 C V NM NA Deprived of Rights
 33a C V NM NA Neglect, Abuse, Mistreatment

33b	C	V	NM	NA	Research Projects
33c	C	V	NM	NA	Manage Own Finances
33d	C	V	NM	NA	Program Planning
33e	C	V	NM	NA	Privacy
33f	C	V	NM	NA	Personal Property
33g	C	V	NM	NA	Visitors, Communication
33h	C	V	NM	NA	Telephone Access
33i	C	V	NM	NA	Mail
33j	C	V	NM	NA	Voting
33k	C	V	NM	NA	Religion
33l	C	V	NM	NA	No Excess Meds.
33m	C	V	NM	NA	Required to Work
34a	C	V	NM	NA	Discrimination
34b	C	V	NM	NA	Civil Rights Policies
34b1	C	V	NM	NA	Policies - Nondiscrimination
34b2	C	V	NM	NA	Policies - Accessibility
34b3	C	V	NM	NA	Policies - Complaints
34b4	C	V	NM	NA	Policies – Rights

STAFFING

42	C	V	NM	NA	18 yrs.
43a	C	V	NM	NA	CEO
43b	C	V	NM	NA	CEO Responsibilities
43b1	C	V	NM	NA	CEO Policies
43b2	C	V	NM	NA	CEO Admission/Discharge
43b3	C	V	NM	NA	CEO Safety of Ind.
43b4	C	V	NM	NA	CEO Regs. Compliance
43c	C	V	NM	NA	CEO Qualifications
44a	C	V	NM	NA	P. S. 30 Ind.
44b1	C	V	NM	NA	P. S. Daily Activities
44b2	C	V	NM	NA	P. S. Assessments
44b3	C	V	NM	NA	P. S. Develop ISP
44b4	C	V	NM	NA	P. S. Attending ISP
44b5	C	V	NM	NA	P. S. Fulfill Plan Lead
44b6	C	V	NM	NA	P. S. Review ISP Updates
44b7	C	V	NM	NA	P. S. Content Discrepancy
44b8	C	V	NM	NA	Implement ISP
44b9	C	V	NM	NA	Supervise Services
44b10	C	V	NM	NA	Monthly Reports
44b11	C	V	NM	NA	Report Change in Need
44b12	C	V	NM	NA	Review ISP with Ind.
44b13	C	V	NM	NA	Document Review of ISP
44b14	C	V	NM	NA	Provide Document to SC
44b15	C	V	NM	NA	Inform Team – Decline Review
44b16	C	V	NM	NA	Recommend Revision of Serv/Out
44b17	C	V	NM	NA	Coordinate Services to Ind.
44b18	C	V	NM	NA	Coordinate Staff Training
44b19	C	V	NM	NA	Develop/Imp. Provider Services
44c	C	V	NM	NA	PS Qualifications
45a	C	V	NM	NA	1:8 Ratio Awake
45b	C	V	NM	NA	1:16 Ratio Sleeping
45c	C	V	NM	NA	Supervision
45d	C	V	NM	NA	ISP Ratio Implementation
45e	C	V	NM	NA	Unsupervised Conv. Of Staff
46a	C	V	NM	NA	Staff Orientation
46b	C	V	NM	NA	Training Syllabus
46c	C	V	NM	NA	CEO – 24hrs. Training
46d	C	V	NM	NA	Staff Training 24 hrs.
46e	C	V	NM	NA	MR Training

46f	C	V	NM	NA	Initial Fire Safety Training
46g	C	V	NM	NA	Annual Fire Safety Training
46h	C	V	NM	NA	Initial First Aid Training
46i	C	V	NM	NA	First Aid/CPR/Heimlich
46j	C	V	NM	NA	Training Records

PHYSICAL SITE

61a	C	V	NM	NA	Special Accommodations
61b	C	V	NM	NA	Adaptive Equip.
62a	C	V	NM	NA	Poisons Locked
62b	C	V	NM	NA	Poisons Unlocked
62c	C	V	NM	NA	Poisons Original Containers
62d	C	V	NM	NA	Poisons Separate from Food
63	C	V	NM	NA	Heat Sources
64a	C	V	NM	NA	Clean and Sanitary
64b	C	V	NM	NA	Insects/Rodents
64c	C	V	NM	NA	Trash Removal
64d	C	V	NM	NA	Cleanable Trash Cans
64e	C	V	NM	NA	Lids on Trash Cans
64f	C	V	NM	NA	Closed Outside Trash
65	C	V	NM	NA	Ventilation
66	C	V	NM	NA	Lighting
67a	C	V	NM	NA	Surfaces – Good Repair
67b	C	V	NM	NA	Surfaces – Hazard Free
67c	C	V	NM	NA	Paint Tested/Lead Stripped
68a	C	V	NM	NA	Water Under Pressure
68b	C	V	NM	NA	Hot Water - 120°
68c	C	V	NM	NA	Coliform Water Test
69a	C	V	NM	NA	65° Non-Sleeping
69b	C	V	NM	NA	58° Sleeping
69c	C	V	NM	NA	85° Mechanical Vent
70	C	V	NM	NA	Telephone
71	C	V	NM	NA	Emergency Numbers
72a	C	V	NM	NA	Windows/Doors Screened
72b	C	V	NM	NA	Screens – Good Repair
72c	C	V	NM	NA	Outside Doors - Locks
73a	C	V	NM	NA	Handrails
73b	C	V	NM	NA	Porch Railings
74	C	V	NM	NA	Nonskid Surfaces
75a	C	V	NM	NA	Landings
75b	C	V	NM	NA	Landing Width
76a	C	V	NM	NA	Furniture Safe, Clean, Sturdy
76b	C	V	NM	NA	Furniture Appropriate
76c	C	V	NM	NA	Furniture Homelike
76d	C	V	NM	NA	Amount of Furniture
76e	C	V	NM	NA	Dining Tables
77a	C	V	NM	NA	First Aid Kit
77b	C	V	NM	NA	First Aid Kit - Content
77c	C	V	NM	NA	First Aid Manual
78a	C	V	NM	NA	Living/Dining Area
78b	C	V	NM	NA	30 Sq. Ft.
79	C	V	NM	NA	Elevator Approval
80a	C	V	NM	NA	Outside Walkways
80b	C	V	NM	NA	Outside Conditions
81a	C	V	NM	NA	Bedrooms – basements
81c	C	V	NM	NA	60 Sq. Ft./80 Sq. Ft.

PHYSICAL SITE CONT.

81d	C	V	NM	NA	100 Sq. Ft. - Wheelchair
81e	C	V	NM	NA	2 Ind. Per Bedroom
81f	C	V	NM	NA	Bedrooms – Access
81g	C	V	NM	NA	Bedrooms - Passageway
81h	C	V	NM	NA	Window in Bedroom
81i	C	V	NM	NA	Curtains, Shades
81j	C	V	NM	NA	Doors for Privacy
81k1	C	V	NM	NA	Bed
81k2	C	V	NM	NA	Mattress Foundation
81k3	C	V	NM	NA	Pillow/Linens
81k4	C	V	NM	NA	Chest of Drawers
81k5	C	V	NM	NA	Closet Space
81k6	C	V	NM	NA	Mirror
81l	C	V	NM	NA	Cribs with Domes
81m	C	V	NM	NA	Shared Bedrooms
82a	C	V	NM	NA	Toilets
82b	C	V	NM	NA	Tubs/Showers
82c	C	V	NM	NA	Bathrooms – Phys. Disability
82d	C	V	NM	NA	Privacy in Bathrooms
82e	C	V	NM	NA	Nonslip Surface
82f	C	V	NM	NA	Bathroom Items
82g	C	V	NM	NA	Towel, Washcloth, Toothbrush
83a	C	V	NM	NA	Kitchen Area
83b	C	V	NM	NA	Adaptive Eating Equipment
83c	C	V	NM	NA	Utensils Washed
84a	C	V	NM	NA	Laundry - Weekly
84b	C	V	NM	NA	Laundry - Storage
85a	C	V	NM	NA	In ground Pool
85b	C	V	NM	NA	Above ground Pool
86	C	V	NM	NA	Firearms

FIRE SAFETY

101	C	V	NM	NA	Unobstructed Egress
102	C	V	NM	NA	Two Exits/Fire Escape
103	C	V	NM	NA	Evacuation Procedures
104	C	V	NM	NA	Notification
105	C	V	NM	NA	Combustible Supplies
106	C	V	NM	NA	Furnaces Inspected
107	C	V	NM	NA	Portable Space Heaters
108a	C	V	NM	NA	Wood/Coal Stoves Inspected
108b	C	V	NM	NA	Wood/Coal Stoves Cleaned
109a	C	V	NM	NA	Fireplace Guards
109b	C	V	NM	NA	Fireplaces Cleaned
110a	C	V	NM	NA	Smoke Detector per Floor
110b	C	V	NM	NA	Smoke Detector – 15ft Bedrooms
110c	C	V	NM	NA	Common Areas
110d	C	V	NM	NA	UL or L&I Approved
110e	C	V	NM	NA	Interconnected Detectors
110f	C	V	NM	NA	Detectors – Hearing Impaired
110g	C	V	NM	NA	Inoperative Alarms
110h	C	V	NM	NA	Monitoring Process
111a	C	V	NM	NA	Fire Ext. Per Floor
111b	C	V	NM	NA	Fire Ext. – 3000 St. Ft.
111c	C	V	NM	NA	Fire Ext. - Kitchen
111d	C	V	NM	NA	UL/FMS Approval
111e	C	V	NM	NA	Fire Ext. Accessible
111f	C	V	NM	NA	Annual Inspection

112a	C	V	NM	NA	Fire Drills Per Month
112b	C	V	NM	NA	Normal Staff Conditions
112c	C	V	NM	NA	Fire Drill Records
112d	C	V	NM	NA	Evacuation
112e	C	V	NM	NA	Fire Drill Sleeping Hours
112f	C	V	NM	NA	Alternate Routes
112g	C	V	NM	NA	Fire Drills – Days/Times
112h	C	V	NM	NA	Meeting Place
112i	C	V	NM	NA	Detectors/Alarms Set Off
113a	C	V	NM	NA	Ind. Trained
113b	C	V	NM	NA	Doc. If No Training
113c	C	V	NM	NA	Training Records
114a	C	V	NM	NA	Smoking Safety Procedures
114b	C	V	NM	NA	Procedures Followed

INDIVIDUAL HEALTH

141a	C	V	NM	NA	Ind. Physical
141b	C	V	NM	NA	Physician Sign/Date
141c1	C	V	NM	NA	Medical History
141c2	C	V	NM	NA	General Physical
141c3	C	V	NM	NA	Immunizations Adults
141c4	C	V	NM	NA	Vision/Hearing Screen Adults
141c5	C	V	NM	NA	Immun. Screening Child.
141c6	C	V	NM	NA	TB Testing
141c7	C	V	NM	NA	Gyn. Exam
141c8	C	V	NM	NA	Mammogram
141c9	C	V	NM	NA	Prostate Exam
141c10	C	V	NM	NA	Communicable Disease
141c11	C	V	NM	NA	Health Maintenance
141c12	C	V	NM	NA	Physical Limits
141c13	C	V	NM	NA	Allergies, Cont. Meds
141c14	C	V	NM	NA	Emergency Information
141c15	C	V	NM	NA	Diet Instructions
141d	C	V	NM	NA	RN/LPN Sign Tests
142a	C	V	NM	NA	Dental Exam
142b	C	V	NM	NA	Dental if Meds.
142c	C	V	NM	NA	Dental Exam Records
142d	C	V	NM	NA	Teeth Cleaning
142e	C	V	NM	NA	Follow Up Dental Work
142f	C	V	NM	NA	Dental Hygiene Plan
142g	C	V	NM	NA	Plan Rewritten
142h	C	V	NM	NA	Plan in Ind. Record
143a	C	V	NM	NA	Refusal of Treatment
143b	C	V	NM	NA	Consent if Serious Condition
144	C	V	NM	NA	Health Services
145a	C	V	NM	NA	Hospital
145b	C	V	NM	NA	Method of Transportation
145c	C	V	NM	NA	Emergency Staffing

STAFF HEALTH

151a	C	V	NM	NA	Staff Physicals
151b	C	V	NM	NA	Physician Sign/Date
151c1	C	V	NM	NA	General Physical
151c2	C	V	NM	NA	TB Testing
151c3	C	V	NM	NA	Communicable Disease
151c4	C	V	NM	NA	Medical Problems
152a	C	V	NM	NA	Communicable Disease Auth.
152b	C	V	NM	NA	Specific Precautions

152c C V NM NA Precautions Followed

MEDICATIONS

161a C V NM NA Original Containers
161b C V NM NA Meds. Locked
161c C V NM NA Refrigerated Meds. Locked
161d C V NM NA Storage Containers
161e C V NM NA Disposal of Meds.
162a C V NM NA Meds. Labels
162b C V NM NA Nonpres. – Original Labels
163a C V NM NA Use of Meds
163b C V NM NA Protocol Diag. Psych. Illness
163c C V NM NA Diag. Psych. Illness – Physician
163A C V NM NA Statement of Policy
164a C V NM NA Medication Logs
164b C V NM NA Logged Immediately
164c C V NM NA Meds. Records for SA
164A C V NM NA Statement of Policy
165 C V NM NA Doc. Of Med Errors
166 C V NM NA Adv. React. – Notification/Record
166A C V NM NA Statement of Policy
167a C V NM NA Meds. Administration
167b C V NM NA Meds. Admin. - Directions
168a C V NM NA Staff Training
168b C V NM NA Insulin Admin. Training/Injections
168c C V NM NA Instructor Certified
168d C V NM NA Practicum Annually
168e C V NM NA Training Documentation
169a1 C V NM NA SA – Recognize, Distinguish
169a2 C V NM NA SA – How Much Med.
169a3 C V NM NA SA – When Med.
169b C V NM NA SA – Insulin Measured

NUTRITION

171 C V NM NA Food Protected
172 C V NM NA 3 Meals Per Day
173 C V NM NA Quantity of Food
174 C V NM NA 4 Food Groups
175 C V NM NA Tables – 12 or Fewer Ind.
176 C V NM NA Food Returned

ASSESSMENT

181a C V NM NA Initial Assessment
181b C V NM NA Assess/Service Revised
181c C V NM NA Basis of Assessment
181d C V NM NA P.S. Sign Date
181e1 C V NM NA Strengths/Needs/Pref.
181e2 C V NM NA Likes/Dislikes/Interests
181e3i C V NM NA Functional Skills
181e3ii C V NM NA Communication
181e3iii C V NM NA Personal Adjustment
181e3iv C V NM NA Pers. Needs w/wo Assist.
181e4 C V NM NA Supervision Needs
181e5 C V NM NA Self Admin. Of Meds.
181e6 C V NM NA Poisons
181e7 C V NM NA Heat Sources
181e8 C V NM NA Evacuation
181e9 C V NM NA Functional/Med. Limits

181e10 C V NM NA Lifetime Med History
181e11 C V NM NA Psych. Eval.
181e12 C V NM NA Recommendations
181e13i C V NM NA Progress - Health
181e13ii C V NM NA Motor/Communication
181e13iii C V NM NA Daily Living
181e13iv C V NM NA Personal Adjustment
181e13v C V NM NA Socialization
181e13vi C V NM NA Recreation
181e13vii C V NM NA Financial Independence
181e13viii C V NM NA Manage Pers. Property
181e13ix C V NM NA Community Integration
181e14 C V NM NA Water/Swim Safety
181f C V NM NA Copy to SC/Team

ISP

182a C V NM NA One Plan
182b C V NM NA P.S. Plan Lead
182c C V NM NA Lead Dev. & Imp. Plan
182d1 C V NM NA Revision per current assess.
182d2 C V NM NA Developed w/in 90 days
182d3 C V NM NA HCSIS form
182d4 C V NM NA Invitation to PT w/in 30 days
182d5 C V NM NA Copies

ISP CONTENT

183 1 C V NM NA Services & Outcomes
183 2 C V NM NA Increase Commun. Involv.
183 3 C V NM NA Current Status & Eval. Method
183 4 C V NM NA Ind. w/o Supervision
183 5 C V NM NA Soc. Emotional Environ.
183 6 C V NM NA Restrictive Procedures
183 6i C V NM NA Assess. cause/ant. of Behav.
183 6ii C V NM NA Protocol to assess
183 6iii C V NM NA Method/Timeline to Elim. Pro.
183 6iv C V NM NA Intervention/Redirect.
183 7i C V NM NA Residential Independence
183 7ii C V NM NA Community Involvement
183 7iii C V NM NA Vocational Programming
183 7iv C V NM NA Competitive Comm. Integ.

ISP DEVELOPMENT PARTICIPATION

184a C V NM NA Plan Team Participation
184a1i C V NM NA Individual
184a1ii C V NM NA P.S. or F.L.S.
184a1iii C V NM NA DSW Serv.
184a1iv C V NM NA Others Ind. Chooses
184a2i C V NM NA Medical Professionals
184a2ii C V NM NA Additional DSW
184a2iii C V NM NA Ind. Parent/Guard./Adv.
184b C V NM NA Min. 3 Team Members
184c C V NM NA Sign/Date

ISP IMPLEMENTATION

185a C V NM NA Implementation by Start
185b C V NM NA Implemented as Written

ISP REVIEW & REVISION

186a	C	V	NM	NA	P.S. ISP Review
186b	C	V	NM	NA	P.S./Ind. Sign/Date
186c1	C	V	NM	NA	Monthly Review
186c2	C	V	NM	NA	Review Spec. to Loc.
186c3	C	V	NM	NA	Document Change in need
186c4i	C	V	NM	NA	Deletion per Accomplishment
186c4ii	C	V	NM	NA	Medical Professionals
186c4iii	C	V	NM	NA	Additional DSW
186c5	C	V	NM	NA	PS Revised Assessment
186d	C	V	NM	NA	Min. 3 Team Members
186e	C	V	NM	NA	Sign/Date
186f	C	V	NM	NA	Implementation by
186g	C	V	NM	NA	Implemented as
187	C	V	NM	NA	5 Copies to team

PROVIDER SERVICES

188a	C	V	NM	NA	Residential Home Assist.
188b	C	V	NM	NA	Community Life
188c	C	V	NM	NA	Serv. Specified in ISP
188d	C	V	NM	NA	Age/Functionality Appro.

DAY SERVICES

189a	C	V	NM	NA	Day Services Provided
189b1	C	V	NM	NA	Phys. Approved
189b2	C	V	NM	NA	Team Approved
190a1	C	V	NM	NA	Rec/Soc at Res. Home
190a2	C	V	NM	NA	Rec/Soc Away
189b	C	V	NM	NA	Time Away from Home
189c	C	V	NM	NA	Doc. Of Rec/Soc.

RESTRICTIVE PROCEDURES

192	C	V	NM	NA	Policy
193a	C	V	NM	NA	Retribution/Convien.
193b1	C	V	NM	NA	Anticipate/Least Restrictive
193b2	C	V	NM	NA	Less Restrict. Techs. Failed
194a	C	V	NM	NA	Review Committee
194b	C	V	NM	NA	Committee Composition
194c	C	V	NM	NA	Review Time Frame
194d	C	V	NM	NA	Record of Meetings
195a	C	V	NM	NA	Plan Prior to Use
195b	C	V	NM	NA	Development of RPP
195c	C	V	NM	NA	Revision of RPP
195d	C	V	NM	NA	Approval of RPP
195e1	C	V	NM	NA	RPP – specific behav.
195e2	C	V	NM	NA	RPP - Outcome
195e3	C	V	NM	NA	RPP – Methods to Modify
195e4	C	V	NM	NA	RPP – Types of Procedures
195e5	C	V	NM	NA	RPP – Target Date
195e6	C	V	NM	NA	RPP – Time Limits
195e7	C	V	NM	NA	RPP – Physical Problems
195e8	C	V	NM	NA	RPP – Person Responsible
195f	C	V	NM	NA	RPP - Implementation
195g	C	V	NM	NA	RPP – Copies in Ind. Rec.
196a	C	V	NM	NA	Positive App. Training
196b	C	V	NM	NA	Specific RP Training
196c	C	V	NM	NA	Experienced Use of RP
196d	C	V	NM	NA	Doc. Of Training

197	C	V	NM	NA	Seclusion
198	C	V	NM	NA	Aversive Conditioning
199b	C	V	NM	NA	Chemical Restraints
199c1	C	V	NM	NA	Phys. Examine, Order
199c2	C	V	NM	NA	Re-admin. – Phys. Order
199d1	C	V	NM	NA	Vital Signs
199d2	C	V	NM	NA	Physical Needs - CR
199e	C	V	NM	NA	PRN Meeting
199j	C	V	NM	NA	Training for Ind.
199k	C	V	NM	NA	Documentation of CR
200b	C	V	NM	NA	Mechanical Restraint
200c1	C	V	NM	NA	Exceed 2 hrs.
200c2	C	V	NM	NA	Physician Notified
200c3	C	V	NM	NA	15 min. checks
200c4	C	V	NM	NA	Physical Needs - MR
200c5	C	V	NM	NA	Removed 10mins per 2hrs.
200c6	C	V	NM	NA	Training for Ind.
200c7	C	V	NM	NA	Documentation - MR
201a	C	V	NM	NA	Funds, Property
201b	C	V	NM	NA	Payment for Damages
202b	C	V	NM	NA	MR Necessary
202c	C	V	NM	NA	Least Restrictive Procedure
202d	C	V	NM	NA	30 min./2hrs.
203b	C	V	NM	NA	Exclusion Necessary
203c	C	V	NM	NA	Least Restrictive Procedure
203d	C	V	NM	NA	60 min./2hrs.
203e	C	V	NM	NA	4x/24hrs.
203f	C	V	NM	NA	Continual Monitoring
203g	C	V	NM	NA	40 sq. ft./7ft room
203h	C	V	NM	NA	Open Door or Window
203i	C	V	NM	NA	Lighted, Ventilated
204	C	V	NM	NA	Emergency Use
205	C	V	NM	NA	RP Records
206	C	V	NM	NA	Notice to Day Service

INDIVIDUAL RECORDS

211a	C	V	NM	NA	Ind. Emergency Info
211b1	C	V	NM	NA	Contact Info: Emerg. Person
211b2	C	V	NM	NA	Contact Info: Consent Person
211b3	C	V	NM	NA	Contact Info: Physician
211b4	C	V	NM	NA	Copy of most recent Phys. Exam
212a	C	V	NM	NA	Separate Records
212b	C	V	NM	NA	Entries legible, dated & signed
213 1i	C	V	NM	NA	Name, sex, DOA, DOB, SSN
213 1ii	C	V	NM	NA	Race/ht/wt/hair/eye/mark
213 1iii	C	V	NM	NA	Means of Communication
213 1iv	C	V	NM	NA	Religion
213 1v	C	V	NM	NA	Next of Kin
213 1vi	C	V	NM	NA	Current, Dated Photo.
213 2	C	V	NM	NA	Unusual Incident Reports
213 3	C	V	NM	NA	Physical Exams
213 4	C	V	NM	NA	Dental Exams
213 5	C	V	NM	NA	Dental Hygiene Plans
213 6	C	V	NM	NA	Assessments
213 7i	C	V	NM	NA	Invite to Initial ISP
213 7ii	C	V	NM	NA	Invite to Annual Update
213 7iii	C	V	NM	NA	Invite to Revision Meeting
213 8i	C	V	NM	NA	Sig. Sheet for Initial Meeting
213 8ii	C	V	NM	NA	Sig. Sheet for Annual Update

213 8iii	C	V	NM	NA	Sig. Sheet for Revision Meeting
213 9	C	V	NM	NA	Copy of Current ISP
213 10	C	V	NM	NA	Documentation of ISP
213 10i	C	V	NM	NA	ISP Review Sign. Sheet
213 10ii	C	V	NM	NA	ISP Revisions
213 10iv	C	V	NM	NA	Notice to decline ISP info
213 10v	C	V	NM	NA	ISP Review Requests
213 11	C	V	NM	NA	ISP Discrepancies
213 12	C	V	NM	NA	Restrictive Procedure Docs
213 13	C	V	NM	NA	Psych. Evaluation
213 14	C	V	NM	NA	Rec./Social Activities prov.
214a	C	V	NM	NA	Record info kept at home
214b	C	V	NM	NA	Current copies at home
214c	C	V	NM	NA	Kept in home/admin office
215a	C	V	NM	NA	Information kept 4yrs.
215b	C	V	NM	NA	Record kept 4 yrs.
216a	C	V	NM	NA	Records Locked
216b	C	V	NM	NA	Access to Records
217	C	V	NM	NA	Release of Info

SEMI-INDEPENDENT LIVING

271(1)	C	V	NM	NA	Evacuation
271(2)	C	V	NM	NA	Intermittent Training
271(3)	C	V	NM	NA	18 yrs. Or Older
272	C	V	NM	NA	Doc. Of Abilities
274a	C	V	NM	NA	1 staff available
274b	C	V	NM	NA	Fire Safety Instruction

9 OR MORE INDIVIDUALS

232	C	V	NM	NA	Awake Staff
233	C	V	NM	NA	Sewage System
234	C	V	NM	NA	Indoor Living Furniture
235	C	V	NM	NA	Elevators, Ramps
236	C	V	NM	NA	Evacuation Procedures
237a	C	V	NM	NA	Exit Signs
237b	C	V	NM	NA	Direction of Travel
237c	C	V	NM	NA	Exit Sign Letters
238a	C	V	NM	NA	Separate Laundry
238b	C	V	NM	NA	Laundry Entrance
239a	C	V	NM	NA	Dining Area
239b	C	V	NM	NA	Dining Tables – 12 Ind.
240a	C	V	NM	NA	Dishwater
240b	C	V	NM	NA	Hot Water Temp.
240c	C	V	NM	NA	Manufacturer's Instruct.
241a	C	V	NM	NA	Food-Covered Containers
241b	C	V	NM	NA	Food-Proper Temp.
242	C	V	NM	NA	Returned Food
243a	C	V	NM	NA	Menus Prepared
243b	C	V	NM	NA	Menus-Accessible Day 1
243c	C	V	NM	NA	Menu Changes
243d	C	V	NM	NA	Menus Followed
243e	C	V	NM	NA	Written Menus
244	C	V	NM	NA	Bedrooms – 200ft. Bath
245b	C	V	NM	NA	Tub/Shower – 9-14
245c	C	V	NM	NA	Tub/Shower – 15+
245d	C	V	NM	NA	Bathroom- Phys. Dis.

EMERGENCY PLACEMENT

251b	C	V	NM	NA	Physical Exam w/in 31 days
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