

LICENSING INSPECTION INSTRUMENT

FOR

VOCATIONAL FACILITIES

CHAPTER 2390

**OFFICE OF MENTAL RETARDATION
DEPARTMENT OF PUBLIC WELFARE
COMMONWEALTH OF PENNSYLVANIA**

(Revised June 29, 2011)

This licensing Inspection Instrument (LII) is designed to measure compliance with Pennsylvania's Vocational Training Facilities Licensing Regulations, (55 Pa. Code CH. 2390).

SOURCE OF INSPECTION

Compliance with regulations can be measured through three methods; "Site" is direct observation during an inspection. "Records" is inspection of written information. "Interview" is asking the provider questions to determine compliance. If this instrument is being administered by the provider, the "Interview" questions should be directed to a Program Specialist at the facility. The most reliable method of measuring compliance is through "Site" observation; the second most reliable method is through "Records" inspection; the least reliable is through "Interview".

Column 2 of this manual identifies the method by which compliance is to be determined.

The inspector should hold private interviews with clients and direct care staff if practical. The inspector should observe client and staff interaction.

RECORDING

All recording of information is done on the scoresheet. The manual is to be used repeatedly.

1. If the facility is in compliance with the instrument item, circle the "C" on the scoresheet next to the corresponding instrument item in blue or black ink.
2. If the facility is not in compliance with the instrument item, circle the number on the scoresheet next to the corresponding item in blue or black ink.
3. If the instrument item is not applicable to the facility being inspected, draw a line through the entire item on scoresheet.
4. If an instrument item is not measured or not observed (e.g. the item could not be measured during your inspection), make no mark by that item on the scoresheet. Leave that item blank.
5. Use the last page of the scoresheet for any comments about a specific regulation or citation. Usually you will need to note specific comments on all numbered items.

For example, if you circle the item number on any ratio item (staff: clients, toilets: clients, etc), be sure to note the exact ratio you observed on the comment page.

6. If there is repeated non-compliance with the instrument item, note "RNC" to the left of the number of the instrument item.
7. If there is non-compliance with more than one area within any one scoresheet item (e.g. 64(a) – 2 handrails), the scoresheet item should still be counted only once. All areas of non-compliance should however be specified on the Licensing Inspection Summary (L.I.S.).

8. If there is one non-compliance area that could include two or more regulations (e.g. 111 and 121- Client Record), the non-compliance area should be cited only once on the scoresheet and the (L.I.S.) The most appropriate citation should be selected. It is possible that more than one non-compliance item may be cited.
9. Mark any non-compliance areas that are now in compliance by circling "C" in red ink. The final changes you have recorded, including the red corrections, will be the final inspection results that will be used to determine the licensure recommendation.

RECORD SAMPLING PROCEDURES

A minimum of ten percent of all staff records must be reviewed. However, at least 2 staff records must be reviewed. For staff records, select a sample of new hires, staff from various positions, and various length of employment.

A minimum sampling of client records for review shall be: 4 through 49 clients –10% but at least 2 records; 50 through 99 clients – 5 records; 100 through 149 clients – 8 records; 150 or more clients – 10 records. For client records, select a sample of clients for whom restrictive procedures are used, clients with complex medical conditions, and clients who were recently enrolled.

If there are concerns regarding compliance, additional records should be reviewed.

TIME LINES

"Annually" as used throughout this instrument means at least once every 12 months. In order to determine compliance with any regulation that is required annually (e.g. 14(b), 22 (f), 82 (b) etc.), the inspector should review the current year and previous year documentation. If the difference in time between the two documents is 12 months or less, compliance should be noted. An automatic 15 day flex or grace period will be allowed before non-compliance should be noted.

A 15 day flex or grace period will be automatically allowed for 156 (a) relating to three month ISP reviews.

NEW FACILITY

If the facility is new and is not yet serving clients, administer as many items that you can actually observe. For those items that cannot be observed, check the records or conduct an interview. It is essential that you administer and check as many items as possible in the instrument.

PROVISIONAL INSPECTIONS

Record the results of provisional inspections on a new scoresheet. If a partial inspection is done, record only those items measured. Note on the top of the scoresheet "Provisional Inspection".

OBJECTIVE OF VOCATIONAL FACILITIES

The primary objective of vocational facilities is to assist clients in the development of skills necessary for placement in a higher level vocational program and ultimately into competitive employment, or, to maintain existing employment services.

APPLICABILITY

A vocational facility is a premise in which rehabilitative or habilitative employment services, handicapped employment, or employment training is provided to one or more disabled adults for part of a 24 hour day. Vocational facilities that provide only employment training to disabled adults are under the scope of these regulations.

A disabled adult is a person who because of a disability requires special help or special services on a regular basis in order to function vocationally. Examples of disabled adults include persons who exhibit any of the following characteristics:

- A physical disability such as visual impairment, hearing impairment, speech or language impairment, or other physical handicap.
- Social or emotional maladjustment.
- A neurologically based condition such as cerebral palsy, autism or epilepsy.
- Mental Retardation.

These regulations apply to profit, nonprofit, publicly funded, and privately funded vocational facilities. These are the minimum requirements that must be met in order to obtain a certificate of compliance. A vocational facility must be individually inspected to obtain a certificate of compliance in order to operate. These regulations apply to vocational facilities providing service to one or more disabled clients.

Applicability of these regulations is not based upon whether clients are paid minimum wage. The regulations apply if disabled adults are receiving habilitative employment, rehabilitative employment, handicapped employment, or employment training in a non-integrated, sheltered setting. For example, a facility serving disabled adults in a sheltered setting (disabled adults are not integrated with other non-disabled workers) is considered a vocational facility under the scope of these regulations, even if clients are paid minimum or above minimum wage.

These regulations do not apply to any of the following:

- Vocational facilities or portions of vocational facilities operated by a public school district or intermediate unit.
- Vocational facilities operated by the Department of Public Welfare.
- The client's own home in which homebound employment is provided.
- Facilities providing vocational evaluation exclusively.
- Private industry settings if clients are integrated in work with other non-disabled employees at the work site.
- Approved private schools.
- Facilities serving exclusively drug and alcohol clients.
- Facilities licensed or approved by the Department's Office of Children, Youth and Families.

If clients work at a location other than the facility and the facility grounds, these regulations do not apply during the time clients are away from the facility. While clients are present at the facility, the regulations apply.

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GENERAL REQUIRMENTS

11	Records	<p>Is there a completed application for a certificate compliance on form PW-633?</p> <p>Explanation: This is required for both new facilities prior to issuance of the initial certificate of compliance and for existing facilities prior to renewal of a certificate of compliance.</p>
14(a)	Records	<p>Does the facility have a valid fire safety occupancy permit from the Department of Labor and Industry, or the local department of Public Safety in the cities of Scranton and Pittsburgh, or the local Department of Licensing and Inspection in Philadelphia County?</p> <p>Explanation: The Department of Labor and Industry's regulations are contained in Title 34 of the PA Code, Chapters 49 through 59, titled "Building Regulations for Protection from Fire and Panic".</p> <p>The Department of labor and Industry requires a D-0 occupancy if there are no hazardous materials at the facility. A D-H occupancy is required if there are hazardous materials at the facility. Examples of hazardous materials are listed in Title 34, Ch.59, §59.1 of the Department of Labor and Industry's regulations titled "D-H Hazardous Commercial, Industrial, Office Occupancy Group". If a facility with a D-0 (or D-3, D-4, or D-5 prior to May 19, 1984) occupancy classification changes their operations to working with hazardous materials that would fail under D-H classification, a plan submission and approval as D-H occupancy is required.</p> <p>In many cases if a facility currently has a B occupancy permit the facility will meet D-0 requirements. However, a B occupancy is not automatically acceptable instead of a D-0. The facility must have a letter from Labor and Industry stating that their B</p>

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14(a)	(Cont'd)	<p>occupancy permit is acceptable in place of the required D-0.</p> <p>For facilities with occupancy plans approved by the Department of Labor and Industry prior to May 19, 1984 (the date revised Fire and Panic Regulations were promulgated), D-1 through D-5 occupancies are acceptable.</p> <p>For facilities located in Scranton, Philadelphia, and Pittsburgh, the Department of Labor and Industry does not have jurisdiction. Facilities must contact the local Departments of Public Safety in Pittsburgh, Community Development in Scranton and Licensing and Inspection in 3 Philadelphia for their fire safety approval and applicable occupancy codes.</p> <p>If a building is adapted, remodeled, or altered after the initial fire safety occupancy certificate is issued, the facility shall have a new occupancy certificate or written approval if required from the Department of Labor and Industry, or the Departments of Public Safety in Pittsburgh, Community Development in Scranton or Licensing and Inspection in Philadelphia. This applies to changes such as partitioning, removal or addition of walls, and changing the direction of swing on doors. This does not apply to cosmetic or maintenance work such as carpeting, painting, window replacement, or a new roof, etc.</p> <p>If the inspector suspects possible problems with the building related to fire safety, the inspector must notify the appropriate fire safety agency (Labor and Industry or local fire safety departments in Scranton, Pittsburgh, and Philadelphia) in writing of the suspected problem or concern.</p>
14(b)	Records	<p>After initial issuance of the fire safety occupancy permit by the Department of Labor and Industry or the local Department of Public Safety in Pittsburgh, Community Development in Scranton, or Licensing and inspection in Philadelphia, does the provider have written annual verification on file that the fire</p>

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14(b)	(Cont'd)	<p>safety permit for the facility has not been withdrawn or restricted?</p> <p>Explanation: This written verification must be done at least annually. It is written statement by the provider that Labor and Industry, Public Safety, Community Development of Licensing and Inspection did not withdraw or restrict the facility's fire safety permit.</p>
15(a)	Records	<p>If only interstate commerce is involved, does the facility have a valid Federal Sheltered Workshop Certificate, or valid Individual Handicapped Workers Certificates for each client, issued by the Federal Wage and Hour Division, United States Department of Labor under applicable Federal regulations?</p> <p>Explanation: A facility is required to have a Federal certificate if interstate commerce is involved. Interstate commerce is involved if any portion of a product crosses or will ever cross state line. For example if a facility manufactures a portion of a product and ships the product back to the contractor and the contractor then ships the goods interstate, this is interstate commerce. The vast majority of vocational facilities are involved in interstate commerce.</p> <p>In order for work to be considered interstate commerce, the goods must be produced for interstate commerce. If raw materials from another state are used to make a product (e.g. wood from California used to make chairs), but the product (or portion of the product) will never cross state lines, this is <u>not</u> interstate commerce.</p> <p>If a worker engages in interstate commerce and intrastate commerce in the same work week, all hours worked in the work week are covered by Federal Wage and Hour.</p> <p>If some workers at the facility perform only interstate work and some workers perform only intrastate work, both Federal and State Wage and Hour</p>

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15(a)	(Cont'd)	<p data-bbox="727 281 1490 422">Certificates are required. Federal Wage and Hour coverage in a facility is based on the individual worker's engagement in or production for interstate commerce.</p> <p data-bbox="727 464 1490 642">Maintenance and custodial employees are covered by Federal Wage and Hour on an individual basis if the building for which they perform these functions is devoted to interstate commerce or to the production of goods for interstate commerce.</p> <p data-bbox="727 684 1490 751">Food service work in and of itself is not covered by Federal Wage and Hour.</p> <p data-bbox="727 793 1490 1005">Work simulation is not considered "work" by Federal Wage and Hour and need not be compensated. The output of the simulated work would be recycled and used again for simulated work or discarded. Work entering the stream of commerce would have to be paid.</p> <p data-bbox="727 1047 1490 1155">The amount of the operating budget of a facility is not relevant to whether Federal Wage and Hour is required.</p> <p data-bbox="727 1197 1490 1304">Non-profit facilities are certified under the Part 525 of the Federal regulations for Federal Sheltered Workshop Certificates.</p> <p data-bbox="727 1346 1490 1453">Profit facilities are certified under the Part 524 of the Federal regulations for Individual Handicapped Workers Certificates.</p> <p data-bbox="727 1495 1490 1707">Facilities should not be cited for noncompliance with §2390.15(a) or (c) if they have an expired federal Wage and Hour Certificate and can show you an application for renewed Federal Wage and Hour Certification that was dated prior to the expiration date of their Federal Wage and Hour Certificate.</p> <p data-bbox="727 1749 1490 1919">If the inspector suspects possible problems related to wage and hour for interstate commerce, the inspector must notify the Federal of Wage and Hour Division, U.S. Department of Labor in writing of the suspected problem or concern.</p>

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15(b)	Records	<p>If only intrastate commerce is involved, does the facility have a valid Special Certificate issued by the Bureau of Labor Standards, Pennsylvania Department of Labor and Industry, under The Minimum Wage Act of 1968?</p> <p>Explanation: This requirement applies only if all of the clients are not covered by Federal Wage and Hour because only commerce within Pennsylvania is involved. A state certificate is required only for client clients and periods of time not covered by the Federal Wage and Hour Certificate.</p> <p>An example of intrastate commerce is craft work that is produced and sold in Pennsylvania.</p> <p>Food service work is generally considered intrastate commerce.</p> <p>This requirement is not applicable for clients receiving minimum wage or above.</p> <p>This requirement is not applicable if the facility provides only training or evaluation and training.</p> <p>If the inspector suspects possible problems related to wage and hour for intrastate commerce, the inspector must notify the Bureau of Labor Standards in writing of the suspected problem or concern.</p>
15(c)	Records	<p>If both interstate and intrastate commerce are involved does the facilities have both Federal and State certificates as specified in 15(a) and 15(b)?</p> <p>Explanation: This requirement for both Federal and State Wage and hour certificates applies if:</p> <ul style="list-style-type: none">• some clients are involved in interstate commerce and some clients are involved in intrastate commerce <p>OR</p>

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REGULATION NUMBER	INSPECTION SOURCE	REGULATION
15(c)	(Cont'd)	<ul style="list-style-type: none"> • individual clients are involved in interstate commerce for one week and intrastate commerce another week. <p>A state certificate is required only for client clients and periods of time not covered by the Federal Wage and Hour Certificate.</p> <p>This requirement is not applicable for clients receiving minimum wage or above.</p> <p>This requirement is not applicable if the facility provides only training or evaluation and training.</p> <p>If the inspector suspects possible problems related to wage and hour the inspector must notify the Federal Division of Wage and Hour, U.S. Department of Labor and/or the Bureau of Labor Standards (as appropriate), in writing of the suspected problem or concern.</p>
16	Records	<p>If the facility prepares food for the public or serves food to the public, does the facility have a valid public eating drinking place license from the Department of Environmental Resources, or the local health department in locations for which the Department of Environmental Resources does not have regulatory authority?</p> <p>Explanation: D.E.R. issues a license for “Public Eating and Drinking Place” under 25 PA Code CH.151 if the facility serves food to the public. The public includes persons other than the clients and staff working at the facility. If the facility prepares or serves food to the public the facility needs the D.E.R. license. If the facility serves or prepares food for other businesses in the same building but not within the vocational facility, a D.E.R. license is required. If the facility operates a catering service or restaurant a D.E.R. license is required. Specific questions as to applicability of ch.151 should be referred to the local D.E.R. inspector.</p>

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16	(Cont'd)	<p>D.E.R. does not have jurisdiction over the entire Commonwealth. In the following areas, local health departments are responsible instead of D.E.R.:</p> <ul style="list-style-type: none"> • Philadelphia County • Allegheny County • Bucks County • Chester County • Erie County • Third class cities including –Allentown, Bethlehem, Harrisburg <p>Approximately 200 other specified cities, townships, and boroughs.</p> <p>Refer to list of areas which local health departments have jurisdiction.</p>
17	Records	<p>Does the facility have a written statement of purpose that includes a list and description of services provided, how the services relate to the needs of the clients, and conditions on the admission of clients or the provision of services?</p> <p>Explanation: Record as non-compliance if any one required component is not present in the written statement of purpose.</p>
18(a)(1)	Interview Records	<p>Is there an unusual incident report on file that was completed by the facility on DPW form MR8-7/88 for all serious events, including death of a client, injury or illness of a client requiring inpatient hospitalization or a fire requiring the services of a fire department?</p> <p>Explanation: DPW form MR8-7/88 must be used to report unusual incidents. No other form is acceptable. The facility may use a computerized replica of DPW for MR 8-7/88 if it is an exact duplication (same data content, location of data, headings, spacing, etc.). An attachment to the form or the back of the form may be used for additional information.</p>

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18(a)(1)	(Cont'd)	<p>Notification by FAX is acceptable in place of oral notification.</p> <p>“Requiring inpatient hospitalization” applies to injury <u>and</u> illness.</p> <p>“Injury or illness of a client requiring inpatient hospitalization” refers only to injuries or illnesses occurring while the client is at the facility or under the supervision of the facility.</p>
18(a)(2)	Records	If the unusual incident occurred during the week did the facility send copies of each unusual incident report to the Regional Office of Mental Retardation and the funding agency within 24 hours after the incident occurred?
18(b)	Records	If the unusual incident occurred during a weekend was the Regional Office of Mental Retardation and the funding agency notified within 24 hours after the incident occurred and the unusual incident report sent on the first business day following the incident?
19(a)	Interview Records Site	<p>Has there been any evidence of abuse of any client during the past 12 months?</p> <p>Explanation: Abusive acts against clients are prohibited. An abusive act is any action or omission of an action that willfully deprives a client of his/her rights or which may cause or causes physical injury or emotional harm to a client.</p> <p>Abusive acts include but are not limited to striking or kicking a client; neglect; rape; sexual molestation, sexual exploitation, or sexual harassment of a client; restraining a client that results in injury of the client; financial exploitation of a client, humiliating a client; and withholding regularly scheduled meals.</p> <p>Actions of one client to another client, including rape, sexual molestation, sexual exploitation, and intentional actions causing physical injury that require</p>

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19(a)	(Cont'd)	<p>medical attention by medical personnel at a medical facility, are considered abuse.</p> <p>Allegations of abuse received by a licensed facility must be reported on an unusual incident form in accordance with the procedures in the regulations, regardless of the location of the alleged abuse (e.g. even if the alleged abuse occurred at another licensed facility, while on vacation, or while living with or visiting friends or relatives, etc.). The licensed facility where the abuse allegedly occurred is also responsible for reporting the alleged unusual incident on an unusual incident form in accordance with the procedures in the regulations, upon receipt of the allegation.</p> <p>The licensed facility where the unusual incident occurred is responsible for conducting the investigation.</p> <p>Individuals may not always feel comfortable or safe reporting allegations of abuse to the facility or location where the incident occurred. It is therefore critical that all allegations of abuse be recorded immediately and forwarded to appropriate authorities for investigation.</p> <p>It is recommended, but not required, that the facility receiving the initial allegation:</p> <ol style="list-style-type: none">1. If appropriate, report the allegation to the licensed facility where the alleged abuse occurred.2. Follow-up with the County Office or Regional Office to be certain the alleged abuse was received and properly investigated. <p>Record as noncompliance if there is any founded evidence of abuse since the previous annual licensing inspection for which appropriate corrective action was not taken. If appropriate corrective action was taken, noncompliance should not be cited. If a report of abuse is investigated and determined to be unfounded, record as compliance.</p>

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REGULATION NUMBER	INSPECTION SOURCE	REGULATION
19(a)	(Cont'd)	If a report of abuse is still under investigation at the time of the inspection, record as noncompliance on the LIS and score sheet. At the conclusion of the investigation, withdraw the noncompliance if the abuse is determined to be unfounded or if appropriate corrective action was taken.
19(b)	Interview Record Site	Did staff or clients witnessing or having knowledge of an abusive act to a client report it to the chief executive officer or designee within 24 hours?
19(c)(1)	Records	<p>Did the chief executive officer or designee investigate all reports of abuse and prepare and send a report to the Regional Office of Mental Retardation and the funding agency within 24 hours of the initial report OR if the initial report occurs during a weekend were the regional Office of Mental Retardation and the funding agency notified within 24 hours after the initial report and was the abuse investigation report sent on the first business day following the initial report?</p> <p>Explanation: No standard abuse reporting form is required by the Department; however it is recommended that DPW form MR 8-7/88 be used.</p> <p>It is acceptable to complete and send a preliminary abuse report within 24 hours and later follow-up by completing and sending a more detailed final report after the investigation is completed.</p> <p>All reports of abuse, suspected abuse, and alleged abuse, whether founded or unfounded, must be reported.</p>
19(c)(2)	Records	Did all abuse investigation reports either support or deny the allegation and make recommendations for appropriate action?
19(c)(3)	Records Interview	Did the chief executive officer or designee implement changes immediately to prevent abuse in the future?

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REGULATION NUMBER	INSPECTION SOURCE	REGULATION
19(d)	Records Interview	<p>Were all incidents of criminal abuse reported immediately to law enforcement authorities?</p> <p>Explanation: Criminal abuse included crimes against the person such as assault and crimes against the property of the client such as theft or embezzlement.</p> <p>This regulation was written primarily with staff abuse in mind. There is no regulatory requirement to report criminal abuse by a client unless the abuse results in inpatient hospitalization of another person.</p> <p>Crimes must be reported even if all involved parties do not want to report to law enforcement authorities.</p>
20	Records	<p>Does the facility have a written accident prevention policy that includes the requirement for monthly inspection of the physical site, production process, and machines and equipment?</p> <p>Explanation: Record as non-compliance if any one required component is not present in the written accident prevention policy.</p>
21(a)(1)	Records Interview Site	<p>Is there any evidence of discrimination against a client because of race, color, religious creed, disability, handicap, ancestry, national origin, age, or sex?</p> <p>Explanation: Record as non-compliance if there is any evidence of discrimination.</p>
21(a)(2)	Records Interview Site	<p>Is there any evidence that any client was deprived of his her civil or legal rights?</p> <p>Explanation: Records as non-compliance if there is any evidence of deprivation of the client's civil or legal rights.</p>

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21(b)	Records	<p>Did the facility develop and implement civil rights policies and procedures that include: nondiscrimination in the provision of services, admissions, placement, facility usage, referrals, and communication with non- English speaking clients; program accessibility and accommodation for disabled clients; the opportunity to lodge civil rights complaints; and, orientation for clients on their rights to register civil rights complaints?</p> <p>Explanation: Record as non-compliance if any one required component is not present in the civil rights policies and procedures. Refer to 55 PA Code CH.20, Section 20.36 for the list of applicable civil rights laws. “Non-English speaking” may be addressed by ancestry and origin.</p>
22(a)	Records	<p>Does the facility have a governing body?</p> <p>Explanation: For County operated facilities, the advisory board or county commissioners is considered the governing body.</p>
22(b)	Records	<p>Does any members of the governing body receive financial benefit for services as a member of the governing body, except for expenses incurred while performing governing body functions?</p>
22(c)	Records	<p>Does each member of the governing body fully disclose conditions that may create a conflict of interest?</p>
22(d)	Records	<p>Does the governing body meet at least quarterly?</p>
22(e)	Records	<p>Does the governing body review and approve quarterly and annual financial reports?</p>

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22(e)	(Cont'd)	Explanation: Individual monthly or quarterly reports are acceptable instead of quarterly and annual reports.
22(f)	Records	Does the governing body review and approve the annual program report? Explanation: Individual monthly or quarterly reports are acceptable instead of an annual report.
23	Records	Does the facility establish sound and ethical bidding, contracting, and selling practices to reflect reasonable costs consistent with the economical and efficient operations of the facility? Explanation: A random sample of at least 1 contract and 1 bid should be selected by the inspector. The contract and bid should be compared against the agency's policy on contract rate setting and bidding practices. Record as on-compliance if the agency does not have a written policy on contract rate setting and bidding practices or if the sampled contract and bid do not comply with the agency's policy.

STAFFING

32(a)(1)	Records Interview	Is there at least one chief executive officer? Explanation: The term chief executive officer is not required. Other titles such as Program Director or Administrator may be used by the facility.
32(a)(2)	Records	Is there a person designated to be responsible for the chief executive officer's duties when the chief executive officer is not available?

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32(a)(2)	(Cont'd)	<p>Explanation: The regulations do not require the chief executive officers designee to meet the qualifications of the chief executive officer</p>
32(b)	Records Interview	<p>Is the chief executive officer responsible for the following:</p> <ul style="list-style-type: none">• general management of the facility,• admission and discharge of clients,• safety and protection of clients,• assuring that contract procurement activities occur and that work is available to clients,• compliance with this chapter. <p>Explanation: The chief executive officer must be ultimately responsible for these duties listed, however the chief executive officer may delegate specific duties to one more of his/her staff.</p> <p>A written job description is not required for licensing purposes, however if a job description is available it should be reviewed for the above responsibilities.</p> <p>Record as non-compliance if the chief executive officer is not responsible for one or more of the five duties listed.</p>
32(c)	Records	<p>Does the chief executive officer meet one of the following groups of qualifications:</p> <ul style="list-style-type: none">• A masters degree or above from an accredited college or university in Administration, Business, Special Education, Psychology, Public Health, Rehabilitation, Social Work, Speech Pathology, Audiology, Occupational Therapy, Therapeutic Recreation, or other human service field, which includes at least 15 credit hours in administration or human services; and 1 year work experience working directly with disabled persons, or 1 year work experience in administration or supervision; <p><u>OR,</u></p>

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32(c)	(Cont'd)	<ul style="list-style-type: none"> • A bachelor's degree from an accredited college or university in Administration, Business, Special Education, Psychology, Public Health, Rehabilitation, Social Work, Speech Pathology, Audiology, Occupational Therapy, Therapeutic Recreation, or other human services field; and 2 years work experience in administration or supervision, and 1 year experience working directly with disabled persons? <p>Explanation: Honorary degrees are not acceptable. "Human services" and "Human Service field" includes behavioral science, social science, program evaluation, human development, elementary and secondary education, early childhood, child development, medicine, sociology, nursing, rehabilitation, counseling, criminology, social or cultural anthropology and music therapy. It does not include religion, philosophy, political science, physical anthropology, or general anthropology.</p> <p>"Administration" includes accounting, business public administration, hospital administration, school administration, business administration, and management.</p> <p>"Credit hours in administration and/or human services" can be in administration, human services, or a combination of administration and human services.</p> <p>A bachelor's degree (in any major) from an accredited college or university, that includes at least 30 credits in human services or administration, may be substituted for a specific bachelor's degree.</p> <p>Work experience may be volunteer work or internships.</p> <p>These qualifications do not apply if the chief executive officer was serving as chief executive officer in this facility or agency prior to January 1, 1987. If the chief executive officer was hired or promoted prior to January 1, 1987, the qualifications specified under CH, 2390 as they existed at Title 55 of the PA Code on January 1, 1986 apply. The grandfather clause for</p>

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REGULATION NUMBER	INSPECTION SOURCE	REGULATION
32(c)	(Cont'd)	<p>staff persons who were employed or promoted prior to January 1, 1987 applies only to the agency for which the staff were employed as of January 1, 1987. Staff may transfer to other facilities within the same agency using the grandfather clause. However, the grandfather clause may not be used for a staff person to transfer to a new agency. If a staff person wishes to begin employment with a new agency, the qualifications for chief executive officer must be met.</p> <p>The grandparent clause for staff qualifications is applicable for staff even if there is a break in employment such as childbirth leave, leave of absence, or leaving for new employment and later returning to work at the facility. There is no time limitation on the length of the break in employment.</p> <p>Compliance with this requirement must be verified by reviewing actual college degrees or transcripts. Resumes are not acceptable documentation.</p>
33(a)	Records Site	<p>Is there at least one Program Specialist for every 45 clients available when clients are present at the facility?</p> <p>Explanation: This requirement applies to the Program Specialist to client workload. Program Specialists may not have more than 45 clients in their total workload, including clients in other programs (such as adult day care, community residential/rehabilitation, family support services, minimal supervision, supported employment, mobile work forces, etc.) clients working at off grounds work sites, and part- time clients.</p> <p>A part- time client counts as 1 client; no prorating is permitted.</p> <p>If a Program Specialist is responsible for the same client in both day and residential programs, the client should be counted only once for purposes of the Program Specialist's caseload.</p>

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REGULATION NUMBER	INSPECTION SOURCE	REGULATION
33(a)	(Cont'd)	<p>Clients who are on a waiting list, on furlough, or placed in competitive employment do not count in the total workload.</p> <p>This requirement mandates that Program Specialists be available at all times but not necessarily physically present at the facility at all times.</p> <p>If there are fewer than 45 clients in the facility, at least one Program Specialist is required.</p> <p>This requirement does not apply to handicapped employment.</p>
33(b)		<p>Explanation: Compliance with 33b can be measured by reviewing an agency policy, job description, or training record that is signed by the Program Specialist and that includes this responsibility. (This explanation is to cover 2390.33(b)1-19. If more than one item between 33(b)1-19 is cited use 33(b) only).</p>
33(b)(1)	Records Interview	<p>Is each Program Specialist counted in the ratio in 33(a) responsible for the coordination or completion of assessments?</p> <p>Explanation: If an assessment is not completed cite 2390.151a. Cite this regulation if the Program Specialist was not informed of the responsibility.</p>
33(b)(2)	Records Interview	<p>Is each Program Specialist counted in the ratio in 33(a) responsible for providing the assessment for the development of the ISP, ISP Annual Update, and all ISP revisions as required under 2390.151f</p> <p>Explanation: Cite this regulation if the Program Specialist was not informed of the responsibility. Cite regulation 2390.151(f) if the assessment was not provided.</p>

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REGULATION NUMBER	INSPECTION SOURCE	REGULATION
33(b)(3)	Records Interview	<p>Is each Program Specialist counted in the ratio in 33(a) responsible for participating in the development of the ISP, ISP Annual Update and all ISP revisions?</p> <p>Explanation: Cite this regulation if the Program Specialist was not informed of the responsibility.</p>
33(b)(4)	Records Interview	<p>Is each Program Specialist counted in the ratio in 33(a) responsible for attending the ISP meetings?</p> <p>Explanation: Cite this regulation if the Program Specialist was not informed of the responsibility.</p>
33(b)(5)	Records Interview	<p>Is each Program Specialist counted in the ratio in 33(a) responsible for fulfilling the role as Plan Lead as applicable under 2390.152(b)-(c), 2390.156(f) and (g)?</p> <p>Explanation: Cite this regulation if the Program Specialist was not informed of the responsibility.</p>
33(b)(6)	Record Interview	<p>Is each Program Specialist counted in the ratio in 33(a) responsible for reviewing the ISP, annual update and all ISP revisions for consistent accuracy?</p> <p>Explanation: Cite this regulation if the Program Specialist was not informed of the responsibility.</p>
33(b)(7)	Record Interview	<p>Is each Program Specialist counted in 33(a) responsible for reporting content discrepancies to the Supports Coordinator as applicable and Plan Team members?</p> <p>Explanation: Cite this regulation if the Program Specialist was not informed of the responsibility and/or if the Program Specialist did not report</p>

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REGULATION NUMBER	INSPECTION SOURCE	REGULATION
33(b)(8)	Records Interview	<p>Is each Program Specialist counted in the ratio in 33(a) responsible for implementing the ISP as written?</p> <p>Explanation: Cite this regulation if the Program Specialist was not informed of the responsibility.</p>
33(b)(9)	Records Interview	<p>Is each Program Specialist counted in the ratio in 33(a) responsible for supervising, monitoring, and evaluating services?</p> <p>Explanation: Cite this regulation if the Program Specialist was not informed of the responsibility.</p>
33(b)(10)	Records Interview	<p>Is each Program Specialist counted in the ratio in 33(a) responsible for reviewing, signing, and dating the monthly documentation of an client's participation and progress toward outcomes.</p> <p>Explanation: Cite this regulation if the Program Specialist was not informed of the responsibility.</p>
33(b)(11)	Records Interview	<p>Is each Program Specialist counted in the ratio in 33(a) responsible for reporting a change related to the client's needs to the supports coordinator as applicable, and plan team members?</p> <p>Explanation: Cite this regulation if the Program Specialist was not informed of the responsibility and/or if the Program Specialist did not report need changes relative to outcomes and findings to the Supports Coordinator.</p>
33(b)(12)	Records Interview	<p>Is each Program Specialist counted in the ratio in 33(a) responsible for reviewing the ISP with the client as required under 2390.156 (relating to ISP review and ISP Revision)?</p> <p>Explanation: Cite this regulation if the Program Specialist was not informed of the responsibility</p>

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REGULATION NUMBER	INSPECTION SOURCE	REGULATION
33(b)(13)	Records Interview	<p>Is each Program Specialist counted in the ratio in 33(a) responsible for documenting the review of the plan as required under 2390.156 (relating to ISP 3 month review and ISP Revision)?</p> <p>Explanation: Cite this regulation if the Program Specialist was not informed of the responsibility.</p>
33(b)(14)	Records Interview	<p>Is each Program Specialist counted in the ratio in 33(a) responsible for providing documentation of the plan review to the supports coordinator as applicable, and plan team members as required under 2390.156(d)?</p> <p>Explanation: Cite this regulation if the Program Specialist was not informed of the responsibility.</p>
33(b)(15)	Records Interview	<p>Is each Program Specialist counted in the ratio in 33(a) responsible for informing plan team members of the option to decline the ISP review documentation as required under 2390.156(e)?</p> <p>Explanation: Cite this regulation if the Program Specialist was not informed of the responsibility.</p>
33(b)(16)	Records Interview	<p>Is each Program Specialist counted in the ratio in 33(a) responsible for recommending a revision to a service or outcome in the ISP as required under §2390.156(c)(4)?</p> <p>Explanation: Cite this regulation if the Program Specialist was not informed of the responsibility.</p>
33(b)(17)	Records Interview	<p>Is each Program Specialist counted in the ratio in 33(a) responsible for coordinating the services provided to an client?</p> <p>Explanation: Cite this regulation if the Program Specialist was not informed of the responsibility.</p>

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REGULATION NUMBER	INSPECTION SOURCE	REGULATION
33(b)(18)	Records Interview	Is each Program Specialist counted in the ratio in 33(a) responsible for coordinating the training of direct service workers in the content of Health and Safety needs relevant to each client?
33(b)(19)	Records Interview	<p>Is each Program Specialist counted in the ratio in 33(a) responsible for developing and implementing provider services as required under 2390.158 (relating to Provider Services)?</p> <p>Explanation: Cite this regulation if the Program Specialist was not informed of the responsibility</p>
33(c)	Records Interview Site	<p>Does <u>each</u> Program Specialist counted in the ratio in 33(a) have one of the following groups of qualifications:</p> <ul style="list-style-type: none"> • A master's degree or above from an accredited college or university in Special Education, Psychology, Public Health, Rehabilitation, Social Work, Speech Pathology, Audiology, Occupational Therapy, Therapeutic Recreation or other human services field. • A bachelor's degree from an accredited college or university in one of the fields listed above; and 1 year experience working directly with disabled persons. • An associate's degree or completion of a two year program from an accredited college or university in one of the fields listed above and 3 years experience working directly with disabled persons. • A license or certification by the State Board of Nurse Examiners, the State Board of Physical Therapists Examiners, or the Committee on Rehabilitation Counselor Certification or be a licensed psychologist or registered occupational

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REGULATION NUMBER	INSPECTION SOURCE	REGULATION
33(c)	(Cont'd)	<p>therapist; and 1 year experience working directly with disabled persons.</p> <p>Explanation: Record as non-compliance if one or more of the Program Specialists required to meet the 1:45 ratio do not meet these qualifications. Specify the Program Specialist(s) who is (are) not qualified on the comment page</p> <p>Honorary degrees are not acceptable. A degree in “human service field” includes behavioral science, social science, program evaluation, human development, elementary or secondary education, early childhood, child development, medicine, sociology, nursing, rehabilitation, counseling, criminology, social or cultural anthropology and music therapy. It does not include religion, philosophy, political science, administration, physical anthropology or general anthropology.</p> <p>A bachelor’s degree (in any major) from an accredited college or university, that includes at least 30 credits in human services, may be substituted for a specific bachelor’s degree.</p> <p>Work experience may be volunteer work or internships.</p> <p>A two year program means a total of at least 60 credits, with at least 15 of those credits in human services.</p> <p>These qualifications do not apply if the Program Specialist was serving as Program Specialist, rehabilitation/program director, or client program manager in this facility or agency prior to January 1, 1987. If the Program Specialist was hired or promoted prior to January 1, 1987, the qualifications for program director or client program manager specified under CH. 2390 as they existed at Title 55 of the PA Code on January 1, 1986 apply.</p> <p>This grandfather clause for staff persons who were employed or promoted prior to January 1, 1987 applies only to the agency for which the staff were</p>

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REGULATION NUMBER	INSPECTION SOURCE	REGULATION
34(c)	(cont'd)	<p>employed as of January 1, 1987. Staff may transfer to other facilities within the same agency using the grandfather clause. However, the grandfather clause may not be used for a staff person to transfer to a new agency. If a staff person wishes to begin employment with a new agency, the qualifications for Program Specialist must be met.</p> <p>The grandparent clause for staff qualifications is applicable for staff even if there is a break in employment such as childbirth leave, leave of absence, or leaving for new employment and later returning to work at the facility. There is no time limitation on the length of the break in employment.</p> <p>Compliance with this requirement must be verified by reviewing actual college degrees or transcripts. Resumes are not acceptable documentation.</p>
34(a)	Records	<p>Is there at least one production manager available when clients are present at the facility?</p> <p>Explanation: This requirement does not mandate that the production manager be physically present at the facility at all times.</p>
34(b)	Records Interview	<p>Is the production manager responsible for the following:</p> <ul style="list-style-type: none"> • job flow, • job scheduling, and, • provision of sufficient amount of work within the facility? <p>Explanation: A written job description is not required for licensing purposes, however if a job description is available it should be reviewed for the above responsibilities.</p> <p>Record as non-compliance if the production manager is not responsible for one or more of the three duties listed.</p>

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REGULATION NUMBER	INSPECTION SOURCE	REGULATION
34(c)	Records	<p>Does the production manager meet one of the following groups of qualifications:</p> <ul style="list-style-type: none">• A bachelor's degree or above from an accredited college or university in Business or Engineering• An associate's degree or its equivalent from an accredited college or university in Business or Engineering; and 2 years work experience in industrial work, OR• A high school diploma or a general education development certificate; and 4 years work experience in industrial work, which includes at least 2 years supervisory experience. <p>Explanation: At least 60 credits, with at least 15 of those credits in Business or Engineering is considered equivalent to an associate's degree.</p> <p>Work experience may be volunteer work or internships.</p> <p>These qualifications do not apply if the production manager was serving as production manager in this facility or agency prior to January 1, 1987. If the production manager was hired or promoted prior to January 1, 1987, the qualifications for production manager specified under CH. 2390 as they existed at Title 55 of the PA Code on January 1, 1986 apply.</p> <p>This grandfather clause for staff persons who were employed or promoted prior to January 1, 1987 applies only to the agency for which staff were employed as of January 1, 1987. Staff may transfer to other facilities within the same agency using the grandfather clause. However, the grandfather clause may not be used for a staff person to transfer to a new agency. If a staff person wishes to begin employment with a new agency, the qualifications for production manager must be met.</p>

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REGULATION NUMBER	INSPECTION SOURCE	REGULATION
34(c)	(Cont'd)	<p>The grandparent clause for staff qualifications is applicable for staff even if there is a break in employment such as childbirth leave, leave of absence, or leaving for new employment and later returning to work at the facility. There is no time limitation on the length of the break in employment.</p> <p>Compliance with this requirement must be verified by reviewing actual college degrees or transcripts. Resumes are not acceptable documentation.</p>
35(a)	Site	<p>Is there at least 1 floor supervisor for every 15 clients when clients are present at the facility?</p> <p>Explanation: This ratio <u>does not</u> apply during client breaks, client lunch times, and before and after scheduled client work hours.</p> <p>This ratio is based on the actual number of clients present at any one time and not on the licensed capacity of the facility.</p> <p>This particular requirement (35(a)) requires only that 1 floor supervisor for every 15 clients be at the facility (not necessarily with the clients). For example, if an observation is made that there is a 1:12 ratio in one room and a 1:18 ratio in another room, this is a violation of 35(b), not 35(a).</p> <p>This requirement does apply during staff vacations, sick leave, training, meetings, deliveries, ISP reviews, etc.</p> <p>This requirement does not apply for handicapped employment clients.</p> <p>This requirement does not apply while clients are in a training program under the direct supervision of the trainer. If clients are in a training program but working or training under the direct supervision of the floor</p>

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REGULATION NUMBER	INSPECTION SOURCE	REGULATION
35(a)	(Cont'd)	<p>supervisor, the training clients must be counted in the floor supervisor ratio. This requirement does not apply for clients who are in a custodial or gardening work or training program.</p> <p>Non-disabled adults who work at the facility under the supervision or direction of a floor supervisor do not count in computing the 1:15 ratio.</p>
35(b)	Site	<p>Are the floor supervisors required in the ratio (specified in 35(a)) physically present with the clients when clients are present at the facility?</p> <p>Explanation: This does not apply during client breaks, client lunch times, and before and after scheduled client work hours.</p> <p>"Physically present with the clients" means in the same room with the clients at all times except for the times listed in paragraph #1 under explanation. One floor supervisor cannot float between 2 or more rooms, unless clients can be observed from one room to the other.</p> <p>An exception to this requirement is permitted while floor supervisors are attending staff training, meetings, ISP reviews, etc. as long as:</p> <ul style="list-style-type: none">• Staff remains at the facility• The exception occurs for no longer than 1 hour per day, and,• The ratio of floor supervisors physically present with clients does not fall below 1:30 <p>This requirement does not apply for clients who are in a custodial or gardening work or training program.</p>
35(c)	Records Interview	<p>Are all floor supervisors counted in the ratio responsible for the daily supervision of clients while clients are engaged in work activities?</p>

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REGULATION NUMBER	INSPECTION SOURCE	REGULATION
35(c)	(Cont'd)	<p>Explanation: A written job description is not required for licensing purposes, however if a job description is available it should be reviewed for the above responsibilities.</p> <p>Record as a noncompliance if any floor supervisor counted in the ratio is not responsible for the specified duty.</p>
35(d)	Records	<p>Does <u>each</u> floor supervisor counted in the 1:15 ratio meet one of the following groups of qualifications:</p> <ul style="list-style-type: none"> • Thirty credit hours from an accredited college or university, • A high school diploma and 1 year work experience in industry or rehabilitation, OR, • A general education development certificate, and 1 year work experience in industry or rehabilitation? <p>Explanation: Record as non-compliance if any floor supervisor counted in the ratio does not meet the minimum qualifications.</p> <p>Industry includes any type of business including office work, manufacturing, restaurant work, grocery store work, etc.</p> <p>Work experience may be volunteer work or internships.</p> <p>These qualifications do not apply if the floor supervisor was serving as floor supervisor in this facility or agency prior to January 1, 1987. If the floor supervisor was hired or promoted prior to January 1, 1987, the qualifications for floor supervisor specified under CH. 2390 as they existed at Titled 55 of the PA Code on January 1, 1986 apply.</p> <p>This grandfather clause for staff persons who were employed or promoted prior to January 1, 1987 applies only to the agency for which staff were employed as of January 1, 1987. Staff may transfer to other facilities within the same agency using the grandfather clause. However, the grandfather clause may not be used for</p>

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REGULATION NUMBER	INSPECTION SOURCE	REGULATION
35(d)	(Cont'd)	<p>a staff person to transfer to a new agency. If a staff person wishes to begin employment with a new agency, the qualifications for floor supervisor must be met.</p> <p>The grandparent clause for staff qualifications is applicable for staff even if there is a break in employment such as childbirth leave, leave of absence, or leaving for new employment and later returning to work at the facility. There is no time limitation on the length of the break in employment.</p> <p>Compliance with this requirement must be verified by reviewing actual college degrees or transcripts. Resumes are not acceptable documentation.</p>
36(a)	Records	<p>If a facility provides training, is there a minimum of one trainer for every 10 clients who are currently in the training program?</p> <p>Explanation: Training is occupational training that follows a specific curriculum and is designed to teach skills for a specific occupation in the competitive labor market; or, personal and work adjustment training that is designed to develop appropriate worker traits and teach an understanding of the expectations of a work environment to enable the client to progress into a higher level rehabilitation program or into competitive employment.</p> <p>This ratio is based on the actual number of clients present who are in the training program at any one time.</p> <p>The trainer must be at the facility at all times clients are in the training program.</p> <p>If some of the training clients are receiving work training under the direct supervision of the floor supervisor, the 1:15 floor supervisor ratio applies, as well as the 1:10 trainer ratio. Non-disabled adults who work at the facility under the supervision or direction of a trainer do not count in computing the 1:10 ratio.</p>

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REGULATION NUMBER	INSPECTION SOURCE	REGULATION
36(a)	(Cont'd)	Non-disabled adults who work at the facility under the supervision or direction of a trainer do not count in computing the 1:10 ratio.
36(b)	Records Interview	<p>Are all trainers counted in the 1:10 ratio responsible for instructing client clients in specific job skills, interpersonal skills, work attitudes, and/or work habits?</p> <p>Explanation: A written job description is not required for licensing purposes, however if a job description is available it should be reviewed for the above responsibilities.</p> <p>Record as non-compliance if any trainer counted in the ratio is not responsible for the duties listed.</p>
36(c)	Records	<p>Do all trainers counted in the 1:10 ratio meet one of the following groups of qualifications:</p> <ul style="list-style-type: none"> • A bachelor's degree or above from an accredited college or university in Education, Rehabilitation, or a related field, • An associate's degree from an accredited college or university in education, Rehabilitation, or a related field; and 2 years work experience in teaching, training, or a rehabilitation related field, • A license or certification as a tradesperson in the area for which training is being provided, <p><u>OR,</u></p> <ul style="list-style-type: none"> • Four years work experience as a tradesperson in the area for which the training is being provided? <p>Explanation: Work experience may be volunteer work or internships.</p> <p>Work experience as a tradesperson can be in any type of work as long as the type of work is in the area for which training is being provided.</p> <p>“Related field” includes rehabilitation counseling, rehabilitation education, business administration,</p>

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REGULATION NUMBER	INSPECTION SOURCE	REGULATION
36(c)	(Cont'd)	<p>industrial administration, psychology, industrial engineering, occupational therapy, and therapeutic recreation. These qualifications do not apply if the trainer was serving as occupational trainer or work adjustment trainer in this facility or agency prior to January 1, 1987. If the trainer was hired or promoted prior to January 1, 1987, qualifications for occupational or work adjustment trainer specified under CH. 2390 as they existed at Title 55 of the PA Code on January 1, 1986 apply.</p> <p>This grandfather clause for staff persons who were employed or promoted prior to January 1, 1987 applies only to the agency for which staff was employed as of January 1, 1987. Staff may transfer to other facilities within the same agency using the grandfather clause. However, the grandfather clause may not be used for a staff person to transfer to a new agency. If a staff person wishes to begin employment with a new agency, the qualifications for trainer must be met.</p> <p>The grandparent clause for staff qualifications is applicable for staff even if there is a break in employment such as childbirth leave, leave of absence, or leaving for new employment and later returning to work at the facility. There is no time limitation on the length of the break in employment.</p> <p>Compliance with this requirement must be verified by reviewing actual college degrees or transcripts. Resumes are not acceptable documentation.</p>
37(a)	Records Interview	<p>If the facility provides vocational evaluation, is there at least one vocational evaluator?</p> <p>Explanation: This requirement does not mandate that the vocational evaluator be physically present at the facility at all times.</p> <p>This requirement applies only if vocational evaluation is provided at the facility and by the facility. This is not applicable if vocational evaluation is purchased from another agency or not provided at the facility.</p>

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REGULATION NUMBER	INSPECTION SOURCE	REGULATION
37(b)	Records Interview	<p>Is the vocational evaluator responsible for written evaluations of clients?</p> <p>Explanation: A written job description for vocational evaluators is not required for licensing purposes; however, if a job description is available it should be reviewed for the above responsibility.</p>
37(c)	Records Interview	<p>Does the vocational evaluator meet one of the following groups of qualifications:</p> <ul style="list-style-type: none"> • A master's degree or above from accredited college or university in Vocational Evaluation or a related field; OR, • A bachelor's degree from an accredited college or university in Evaluation, Special Education, Psychology, Public Health Rehabilitation, Speech Pathology, Audiology, Occupational Therapy, Therapeutic Recreation, or other human services field; and 1 year work experience in evaluation, education, industrial arts, industrial engineering, occupational therapy, rehabilitation counseling, or a related field. <p>Explanation: Work experience may be volunteer work or internships.</p> <p>“Related field” includes vocational education, industrial arts, distributive education, business education rehabilitation counseling, rehabilitation education, business administration, industrial administration, psychology, industrial engineering, occupational therapy, and therapeutic recreation.</p> <p>These qualifications do not apply if the vocational evaluator was serving as vocational evaluator in this facility or agency prior to January 1, 1987. If the vocational evaluator was hired or promoted prior to January 1, 1987, the qualifications for vocational evaluator specified under CH. 2390 as they existed at Title 55 of the PA Code on January 1, 1986 apply.</p> <p>This grandfather clause for staff persons who were employed or promoted prior to January 1, 1987 applies only to the agency for which staff were employed as of</p>

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REGULATION NUMBER	INSPECTION SOURCE	REGULATION
37(c)	(Cont'd)	<p>January 1, 1987. Staff may transfer to other facilities within the same agency using the grandfather clause. However, the grandfather clause may not be used for a staff person to transfer to a new agency. If a staff person wishes to begin employment with a new agency, the qualifications for vocational evaluator must be met.</p> <p>The grandparent clause for staff qualifications is applicable for staff even if there is a break in employment such as childbirth leave, leave of absence, or leaving for new employment and later returning to work at the facility. There is no time limitation on the length of the break in employment.</p> <p>Compliance with this requirement must be verified by reviewing actual college degrees or transcripts. Resumes are not acceptable documentation.</p>
38(a)	Records	<p>Are the positions of Program Specialist and floor supervisor filled by two different staff when 10 or more clients are present at the facility?</p> <p>Explanation: This requirement does not apply during vacations, sick leave, attendance at meetings, and other unanticipated staff absences. However, neither ratio (1:15 floor supervisors and 1:45 Program Specialists) can be exceeded (e.g. cannot have more than 45 clients in Program Specialist workload or more than 15 clients in floor supervisor workload). The qualifications of Program Specialist must be met.</p>
38(b)	Records	<p>If one person is assigned to two or more required staff positions are the more stringent staff qualifications met?</p> <p>Explanation: Following is the level of stringency for the staff positions from most stringent qualifications to least stringent qualifications:</p>

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REGULATION NUMBER	INSPECTION SOURCE	REGULATION
38(b)	(Cont'd)	<ul style="list-style-type: none"> • Chief Executive Officer • Program Specialist and Vocational Evaluator • Production Manager and Trainer • Floor Supervisor <p>If one person fills 2 (or more) positions, the ratio requirements for both positions must be met. (eg. if Program Specialist and Trainer <u>cannot</u> have 45 clients in Program Specialist workload and 10 clients in training.)</p>
39(a)	Site Records Interview	<p>Are at least two staff present at the facility whenever 10 or more clients are present at the facility?</p> <p>Explanation: Two staff must be present whenever 10 or more clients are present including lunch times, breaks, and before and after scheduled work hours. The staff may be in any staff position including a bookkeeper maintenance staff, assistant director, secretary, etc. and need not be physically present with the clients at all times.</p>
39(b)	Site Records	<p>Is at least one staff person present at the facility whenever fewer than 10 clients are present at the facility?</p> <p>Explanation: One staff must be present whenever fewer than 10 clients are present including lunch times, breaks, and before and after scheduled work hours. The staff may be in staff positions including a bookkeeper, maintenance staff, assistant director, secretary, etc. and need not be physically present with the clients at all times.</p>
39(c)	Site Records	<p>If 20 or more clients are present at the facility is there at least one staff present at the facility at all times who meets the qualifications of Program Specialist?</p>

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REGULATION NUMBER	INSPECTION SOURCE	REGULATION
39(c)	(Cont'd)	<p>Explanation: This requirement applies during lunch time, breaks, and before and after scheduled work hours if there are 20 or more clients at the facility.</p>
39(d)	Records Interview Site	<p>If the client is left unsupervised, does the ISP support the client being left unsupervised?</p> <p>Explanation: This regulation is meant to ensure that the supervision provided to a client or clients is consistent with the level of supervision identified in their ISP's. A client should not be left unsupervised for staff convenience.</p>
39(e)	Records	<p>Do the staff counted in (a) have the credentials identified in the ISP? (i.e. if a person requires 1:1 support by a credentialed person. Does the staffing ration support this level of support?)</p> <p>Explanation: A review of the client's ISP should be completed to identify any specific credentials (experience, degree, or training) needed.</p>
39(f)	Records Interview Site	<p>Is a client ever left unsupervised solely for the convenience of staff?</p>
40(a)	Records	<p>Does the facility provide orientation for staff relevant to their appointed positions and instruction to staff in the daily operation of the facility and policies and procedures of the agency?</p> <p>Explanation: This requirement applies for all staff hired after the effective date of the new regulations.</p>
40(b)	Records	<p>Do all staff have at least 24 hours training relevant to vocational or human services annually?</p>

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REGULATION NUMBER	INSPECTION SOURCE	REGULATION
40(b)	(Cont'd)	<p>Explanation: This applies only to those staff in positions required by this chapter (e.g. Chief Executive Officer, Program Specialist, Production Manager, Floor Supervisor, Trainer, Vocational Evaluator).</p> <p>College courses can be counted towards the 24 hours training if the course work is relevant to vocational or human services. When counting college courses, actual number of classroom hours should be counted toward the 24 hours of training. All full-time staff must have at least 24 hours of training each year. Part-time staff who work 40 hours or more hours per month must have at least 24 hours of training per year. Staff who work less than 40 hours per month are exempt from the training requirement. A staff person must be employed for 12 months before this requirement applies to them.</p> <p>A <u>formal</u> training program with required reading (articles or books) in the human services field, supplemented by either a post-test or a follow-up training session to test the student's learning, is acceptable as training. Hours should be counted as reading time plus testing/training time.</p> <p>Staff meetings may be counted as training, if the training provided at the meeting is documented.</p> <p>Examples of acceptable training includes training in fire safety, public health, first aid, nutrition, health and sanitation, programming, management, supervision, administration, and the agency's policies and procedures.</p> <p>Orientation training may be counted as training.</p> <p>The annual training year shall be established in writing by the facility. The facility shall notify the appropriate Regional Office of Mental Retardation in writing of the dates the facility chooses to use as their training year. This must be a 12 month period. Once</p>

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REGULATION NUMBER	INSPECTION SOURCE	REGULATION
40(b)	(Cont'd)	established, the facility's training year cannot be altered. If the facility does not notify the appropriate Regional Office, the licensing inspector will inspect the facility using "12 months prior to the regular license inspection date" as the facility's training year. New staff must have at least 24 hours of training within 12 months from their date of hire. A new facility must meet this requirement within 12 months of initial operation.
40(c)	Records	Are records of orientation and training, including dates held and staff attending, kept on file?

PHYSICAL SITE

51	Site	<p>If the facility serves physically handicapped clients, are accommodations such as ramping and wide doorways made to ensure the maximum physical accessibility feasible for entrance to, movement within, and exit from the facility, based upon each client's physical characteristics?</p> <p>Explanation: Reference ANSI Standards for recommendations if questions arise regarding maximum physical accessibility.</p>
52(a)(c)(d)	Site	<p>Is there at least 80 square feet of indoor floor space for each client while engaged in heavy assembly or heavy packaging work, heavy assembly or heavy packaging training, manufacturing, loading, and shipping?</p> <p>Explanation: Indoor floor space shall be measured wall to wall, including space occupied by equipment, temporary storage and furnishings. Space occupied by bathrooms, dining areas, loading docks, kitchens, offices, training rooms, and first aid rooms shall not be included unless it is documented that such space is used for work or work training for at least 50% of</p>

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REGULATION NUMBER	INSPECTION SOURCE	REGULATION
52(a)(c)(d)	(Cont'd)	<p>each program day. Hallways any permanent storage space shall not be included.</p> <p>The indoor floor space square footage requirements apply to each separate work, training, and program area and room within the facility. The total licensed capacity is determined based on the sum total of the individual capacities of each separate area and room. Despite the total licensed capacity of the facility, each room and area of the facility has an individual capacity that may not be exceeded.</p> <p>When measuring space, all workers, both people with and without disabilities, must be counted. While the regulations do not apply to the workers without disabilities, those workers must be counted for purposes of applying this requirement in order to provide adequate protection for people with disabilities. This is not applicable for facility staff.</p> <p>When measuring indoor floor space, all client program and client training space should always be counted in the total floor space, even if it is used less than 50% of the time.</p> <p>Heavy assembly work, heavy packaging work, heavy assembly training, heavy packaging training, manufacturing, loading, and shipping are determined based upon the amount of unoccupied floor space that is available for the client to work and move about. The amount of floor space that is occupied by supplies and equipment is considered in determining heavy work or training. If there are large pieces of equipment or large supplies in the room or area, the space will require 80 square feet of floor space. Some examples of types of work requiring 80 square feet include: conveyor belt work, furniture refinishing, printing machine work, packaging into large boxes, industrial sewing machine work, microfilming with large microfilming equipment, assembly work with large supplies, woodworking, metal cutting, food service, reupholstering, processing of donated clothing, stacking large cartons, loading trucks, etc.</p>

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REGULATION NUMBER	INSPECTION SOURCE	REGULATION
52(a)(c)(d)	(Cont'd)	<p>If there is a combination of light and heavy work or training in any work, training, or program area (e.g. both light and heavy work or training in one area at the same time OR light work or training for a portion of the year and heavy work or training for a portion of the year), the more stringent requirement of 80 square feet of indoor floor space for each client applies for that room or area.</p> <p>It is acceptable to apply 80 square feet to one end of a large room and 60 square feet to the other end of a large room if the work areas are separate and distinct areas.</p> <p>If there is a custodial work crew that cleans throughout the facility, the indoor square footage requirements do not apply for those clients while they are performing custodial duties.</p> <p>Custodial work clients are not counted as part of the licensed capacity while they are performing custodial duties.</p> <p>If the same space is used simultaneously for vocational clients and adult day care clients, the space should be pro-rated according to the number of vocational vs. adult day care clients. This square footage requirement applies to the amount of pro-rated space used by vocational clients.</p> <p>If the same space is used exclusively by vocational clients for a portion of the day and by adult day care clients for the rest of the day, the square footage specified in these regulations applies only for the portion of the day vocational clients use the space. The space should be included in the facility's total capacity, however the capacity for the shared space must continue to be met at all times.</p> <p>This requirement does not apply to rooms used for counseling, support groups, ISP conferences, and large group assembly (on an occasional basis).</p>

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REGULATION NUMBER	INSPECTION SOURCE	REGULATION
52(b)(c)(d)	Site	<p>Is there at least 60 square feet of indoor floor space for each client while engaged in light assembly or light packaging work, light assembly or light packaging training, classroom training, or non-vocational day programming?</p> <p>Explanation: Indoor floor space shall be measured wall to wall, including space occupied by equipment, temporary storage and furnishings. Space occupied by bathrooms, dining areas, loading docks, kitchens, offices, training rooms, and first aid rooms shall not be included unless it is documented that such space is used for work or work training for at least 50% of each program day. Hallways and permanent storage space shall not be included.</p> <p>The indoor floor space square footage requirements apply to each separate work, training, and program area and room within the facility. The total licensed capacity is determined based on the sum total of the individual capacities of each separate area and room. Despite the total licensed capacity of the facility, each room and area of the facility has an individual capacity that may not be exceeded.</p> <p>When measuring space, all workers, both people with and without disabilities, must be counted. While the regulations do not apply to the workers without disabilities, those workers must be counted for purposes of applying this requirement in order to provide adequate protection for people with disabilities.</p> <p>When measuring indoor floor space, all client program and client training space should always be counted in the total floor space, even if it is used less than 50% of the time.</p> <p>Light assembly work, light packaging work, light assembly training, light packaging training, classroom training, and non-vocational day programming are</p>

VOCATIONAL FACILITIES LICENSING INSPECTION INSTRUMENT

REGULATION NUMBER	INSPECTION SOURCE	REGULATION
52(b)(c)(d)	(Cont'd)	<p>determined based upon the amount of unoccupied floor space that is available for the client to work and move about. The amount of floor space that is occupied by supplies and equipment is considered in determining light work or training. If there is a large amount of open floor space in the room or area with supplies, equipment, or storage, the space will require 60 square feet of floor space. Some examples of types of work requiring 60 square feet include: hand sewing at tables, assembly and packaging work with small amount of supplies and storage, bulk mailing work at tables with small amount of supplies and storage, domestic sewing machine work with small amount of supplies and storage, etc.</p> <p>If there is a combination of light and heavy work or training in any work, training, or program area (e.g. both light and heavy work or training in one area at the same time OR light work or training for a portion of the year and heavy work or training for a portion of the year), the more stringent requirement of 80 square feet of indoor floor space for each client applies for that area or room.</p> <p>It is acceptable to apply 60 square feet to one end of a large room and 80 square feet to the other end of a large room if the work areas are separate and distinct areas.</p> <p>If there is a custodial work crew that cleans throughout the facility, the indoor square footage requirements do not apply for those clients while they are performing custodial duties. Custodial work clients are not counted as part of the licensed capacity while they are performing custodial duties.</p> <p>If the same space is used simultaneously for vocational clients and adult day care clients, the space should be pro-rated according to the number of vocational vs. adult day care clients. This square footage requirement applies to the amount of pro-rated space used by vocational clients.</p>

VOCATIONAL FACILITIES LICENSING INSPECTION INSTRUMENT

REGULATION NUMBER	INSPECTION SOURCE	REGULATION
52(b)(c)(d)	(Cont'd)	<p>If the same space is used exclusively by vocational clients for a portion of the day and by adult day care clients for the rest of the day, the square footage specified in these regulations applies only for the portion of the day vocational clients use the space. The space should be included in the facility's total capacity, however the capacity for the shared space must continue to be met at all times.</p> <p>This requirement does not apply to rooms used for counseling, support groups, ISP conferences, and large group assembly (on an occasional basis.)</p>
53	Site	<p>Are outside walkways free from ice, snow, leaves, equipment, and other hazards?</p> <p>Explanation: Facilities should not be cited for non-compliance with this regulation if snow and ice are not removed during or immediately after a snowstorm.</p>
54	Site	<p>Are all combustible supplies and equipment utilized safely, stored in a fire retardant cabinet or closet, and stored away from heating sources?</p> <p>Explanation: Mowers, snow blowers, and other gasoline and oil powered equipment that is emptied of fuel are not considered combustible.</p>
55(a)	Site Interview Records	<p>Is trash removed from the premises at least once per week.</p> <p>Explanation: "Premises" means the building and the property on which the building is located.</p>
55(b)	Site	<p>Is the facility visibly free from evidence of infestation of insects or rodents?</p>
56	Site	<p>Does the facility have hot and cold running water that is suitable for drinking purposes, in bathrooms and kitchen areas?</p>

VOCATIONAL FACILITIES LICENSING INSPECTION INSTRUMENT

REGULATION NUMBER	INSPECTION SOURCE	REGULATION
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REGULATION NUMBER	INSPECTION SOURCE	REGULATION
56	(Cont'd)	Explanation: If the facility is not connected to a public water system, an annual water analysis and written water analysis report by a Department of Environmental Resources certified laboratory, documenting that water is suitable for drinking purposes is required.
57	Site	Does indoor temperature go below 65°F or exceed 90°F? Explanation: These indoor temperature requirements do not apply for storage warehouses where the clients do not work and for loading docks.
58	Site	Does the facility have an operable, non coin operated telephone? Explanation: This is required for emergency purposes. The telephone does not necessarily need to be accessible to clients.
59	Site	Are telephone numbers of the nearest hospital, police department, fire department, ambulance, and poison control center posted by each telephone? Explanation: This applies to all telephones in the facility with outside lines.
60(a)	Site	Does the facility have a first aid area that is separate from the work area? Explanation: While a separate first aid room is preferable, a first aid area separated from the work area by partitions or curtains is acceptable. The first aid area must be designated and used exclusively for first aid purposes.
60(b)	Site	Does the first aid area have a bed or cot, a blanket, and a first aid kit?

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REGULATION NUMBER	INSPECTION SOURCE	REGULATION
60(c)	Site	Does each floor of the facility have a first aid kit accessible to staff?
60(d)	Site	Do all first aid kits contain at least antiseptic, an assortment of adhesive bandages, sterile gauze pads, tweezers, tape, and scissors? Explanation: Record as non-compliance if one or more of the items is not included inside the first aid kit.
61	Site	Are all floors, walls, ceilings and other surfaces in good repair and free of visible hazards?
62	Site	Are sanitary conditions maintained in all bathrooms, kitchens, dining areas, and first aid areas?
63	Site	Are all rooms, hallways, stairways, outside steps, porches, and ramps adequately lighted to assure client safety and avoid accidents?
64	Site	Do all stairways, outside steps, porches, and ramps have well-secured handrails? Explanation: This requirement does not apply if there are only one or two steps. This requirement applies for ramps of any length or grade. This does not apply for vehicle ramps.
65	Site	Do all interior stairs have a nonskid surface? Explanation: All stairs, including tile, marble, and wooden steps, must have non-skid surfaces. Non-skid surfaces include carpeting, rubber strips, non-skid wax, etc.

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REGULATION NUMBER	INSPECTION SOURCE	REGULATION
66	Site	Are landings provided beyond each interior and exterior door that opens onto a stairway?
67	Site	Are conditions safe and sanitary while handling supplies, packaging products, and carrying out work and training functions?
68	Site	Does all hazardous equipment that is likely to cause physical injury to clients have guards and safety devices?
69	Site	<p>Is personal protective equipment worn by clients if work presents a safety risk to the clients?</p> <p>Explanation: Examples of required personal protective equipment are gloves for handling hot materials, goggles or safety glasses to protect eyes from debris, masks if there are toxic fumes or noxious odors, protective shoes if heavy objects are handled, etc.</p>
70	Site	Does equipment have magnified or otherwise modified visual, auditory, and tactile signals if necessary for the client using the equipment?
71(a)	Site	<p>Are all work areas, dining areas, kitchens, and bathrooms ventilated by operable windows or mechanical ventilation?</p> <p>Explanation: Fans that cause forced air circulation are acceptable as a means of mechanical ventilation.</p>
71(b)	Site	If production results in toxic fumes, excessive dust, or odor, is the area adequately ventilated by a mechanical exhaust system?
72(a)	Site	Are all passageways and work aisles unobstructed at all times?

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REGULATION NUMBER	INSPECTION SOURCE	REGULATION
		<p>Explanation: This includes all doors, hallways, and paths of egress within the entire facility and all walkways within the work area.</p>
72(b)	Site	<p>Are all work aisles at least 36 inches wide?</p> <p>Explanation: The 36 inches may encompass the 4 inches of visible line markings required in 72c. The space occupied by chairs while the client is seated and by the client while the client is standing and working, must not be within the 36 inch aisles.</p> <p>Work aisles include any walkway within the work or training areas. If a client must pass by only 1 or 2 persons to get into a main aisle, that area used by the client is considered a work station and not a work aisle.</p> <p>This requirement applies to work areas only. It does not apply to dining areas, kitchens, gymnasiums, classroom training rooms, etc.</p>
72(c)(1)	Site	<p>Are all work aisles marked with visible lines that are at least 2 inches wide?</p> <p>Explanation: The 2 inch visible lines are <u>not</u> in addition to the 36 inch aisle width.</p> <p>Work aisles must be marked on both sides, unless one side is a wall.</p> <p>This requirement applies to all major work aisles and stable work aisles within the work area. It does not apply to minor side aisles that are reestablished frequently for better work flow.</p> <p>This requirement applies to work areas only. It does not apply to dining areas, kitchens, gymnasiums, training areas, etc.</p>
72(c)(2)	Site	<p>If one or more visually handicapped clients are served, are all work aisles marked with tactile guides?</p>

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REGULATION NUMBER	INSPECTION SOURCE	REGULATION
72(c)(2)	(Cont'd)	<p>Explanation: “Visually handicapped” includes both visually impaired (visual acuity of not better than 20/60 in the better eye with best correction or a rapidly progressive eye pathology) and legally blind (visual acuity of not better than 20/200 in the better eye with best correction or a visual field subtending to an angle not greater than 20 OU-both eyes).</p> <p>Tactile guides are not required for persons who have partial vision and can see well enough to move about the facility without physical or tactile assistance.</p> <p>Examples of tactile floor guides are yellow sand paint on the aisle lines, a full aisle width non-slip rubber mat or sand texture paint, bar tiles, or aisle perimeter appliqués with raised lines or dots with self stick backing. Also acceptable are unobstructed work aisles that can be negotiated by hand or long cane trailing of desks, tables, walls, etc. or by use of a dog guide.</p> <p>This requirement applies to all major work aisles and stable work aisles within the work area. It does not apply to minor side aisles that are reestablished frequently for better work flow.</p> <p>This requirement applies to work areas only. It does not apply to dining areas, kitchens, gymnasiums, training areas, etc.</p>
73	Site	<p>If an elevator is present in the facility, is there a valid certificate of operation from the Department of Labor and Industry?</p> <p>Explanation: All elevators throughout the Commonwealth are licensed by the Department of Labor and Industry. Passenger elevators are inspected four times per year. Freight elevators are inspected two times per year. Licenses are valid for a period of one year.</p>

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REGULATION NUMBER	INSPECTION SOURCE	REGULATION
74(a)	Site	For facilities with physically handicapped clients, is there at least one lavatory for men and one lavatory for women constructed so that physically handicapped clients have access and use?
74(a)	(Cont'd)	<p>Explanation: At a minimum, only one lavatory for men and one lavatory for women (constructed for physically handicapped clients) for the entire facility is required. The regulations do not require lavatories equipped for physically handicapped clients on each floor.</p> <p>When counting toilet facilities, all workers, both people with and without disabilities, must be counted. While the regulations do not apply to the workers without disabilities, those workers must be counted for purposes of applying this requirement in order to provide adequate protection for people with disabilities.</p> <p>For detailed information on recommended bathroom construction, refer to the excerpt from the American National Standards Institute (ANSI) "Specifications for making buildings and facilities accessible to be useable by physically handicapped people "(1980).</p>
74(b)	Site	<p>Is there at least one toilet for every 30 clients served at any one time?</p> <p>Explanation: Staff do not count when determining the required number of toilets.</p> <p>When counting toilet facilities, all workers, both people with and without disabilities, must be counted. While the regulations do not apply to the workers without disabilities, those workers must be counted for purposes of applying this requirement in order to provide adequate protection for people with disabilities.</p> <p>If other persons outside of the vocational facility (e.g. other businesses in same building) use the bathrooms, deduct 1 toilet for every 30 other persons (approximately), and then compute the toilet ratio.</p>

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REGULATION NUMBER	INSPECTION SOURCE	REGULATION
		Staff bathrooms may be counted if bathrooms are used by and accessible to clients.
74(b)	(Cont'd)	Toilet ratios do not apply separately by client gender. Urinals cannot be counted as toilets.
74(c)	Site	<p>If the facility serves 10 or more clients at any one time, are there separate lavatories for men and women?</p> <p>Explanation: When counting toilet facilities, all workers, both people with and without disabilities, must be counted. While the regulations do not apply to the workers without disabilities, those workers must be counted for purposes of applying this requirement in order to provide adequate protection for people with disabilities.</p>
74(d)	Site	<p>Does each lavatory have a sink, wall mirror, soap, toilet paper, and, client clean paper or cloth towels or air hand dryer?</p> <p>Explanation: Record as non-compliance if any one lavatory does not have all of the required equipment.</p>
75(a)(1)	Site	<p>Is all food protected from contamination and stored in containers which prevent penetration of insects and rodents while the food is being stored, prepared, served, and transported?</p> <p>Explanation: This is applicable only if the facility provides meals or snacks for clients or if there is a food service training program in the facility.</p>
75(a)(2)	Site	<p>Is cold food kept below 45°F, hot food kept above 140°F, and frozen food kept below 0°F?</p> <p>Explanation: This is applicable only if the facility provides meals or snacks for clients or if there is a food service training program in the facility.</p>

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REGULATION NUMBER	INSPECTION SOURCE	REGULATION
75(a)(3)	Site	Are all utensils used for eating, drinking, preparation and serving of food or drink washed after each use by a mechanical dishwasher?
75(a)(3)	(Cont'd)	<p>Explanation: This is applicable only if the facility provides meals or snacks for clients or if there is a food service training program in facility. This is not applicable if disposable utensils are used.</p> <p>Other methods such as the use of compartment sinks that are used in compliance with sanitation standards of the Department of Environmental Resources are acceptable instead of mechanical dishwashers.</p>
75(a)(4)	Site	<p>Do all mechanical dishwashers use hot water temperatures exceeding 140°F in the wash cycle and 180°F in the final rinse cycle or are they of a chemical sanitizing type approved by the National Sanitation Foundation?</p> <p>Explanation: This is applicable only if the facility provides meals or snacks for clients or if there is a food service training program in the facility.</p>
75(a)(5)	Site Interview	<p>Are all mechanical dishwashers operated in accordance with the manufacturer's Instructions?</p> <p>Explanation: This is applicable only if the facility provides meals or snacks for clients or if there is a food service training program in the facility.</p> <p>Manufacturer's instructions should be listed on the back panel of the dishwasher.</p>
75(b)	Site	<p>Does the facility have a dining area for lunches and breaks?</p> <p>Explanation: The dining area may be used as a work or training area during times other than lunch and breaks.</p>

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REGULATION NUMBER	INSPECTION SOURCE	REGULATION
75(b)(1)	Site	Is the dining area clean?
75(b)(2)	Site	Does the dining area have a sufficient number of tables and chairs to accommodate the maximum number of clients scheduled for lunch or break?
FIRE SAFETY		
81	Site	Are stairways, hallways, and exits from rooms and from the facility unobstructed?
82(a)	Site	<p>Are written emergency evacuation procedures including at a minimum client and staff responsibilities, means of transportation in an emergency, emergency shelter location, and an evacuation diagram specifying directions for egress in the event of an emergency posted in all work areas?</p> <p>Explanation: Record as non-compliance if any required component of the procedures is not present or if all the procedures are not posted in a prominent location in all work areas.</p>
82(b)	Records	<p>Is there written documentation that the facility had an on-site fire safety inspection by the local fire department or other fire safety authority within the past year OR is there written notification to the local fire department or other fire safety authority of the address of the facility and the number and disabilities of the clients served within the past year?</p> <p>Explanation: Other fire safety authorities include sources such as a fire protection engineer, a state certified fire protection instructor, a college instructor in Fire Science, County fire schools, volunteer fire persons trained by county or state fire school, (need written documentation of the source, date, and type of</p>

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REGULATION NUMBER	INSPECTION SOURCE	REGULATION
		training provided), and fire safety insurance investigators who inspect for fire safety for the insurance company.
83(a)	Site	<p>Is there an operable fire alarm system that is audible throughout the facility?</p> <p>Explanation: There must be a fire alarm system that is operable and audible throughout the facility. The fire alarm system may be either manual or automatic. At a minimum, the fire alarm system may be either: a) automatic smoke detectors throughout the facility.</p> <p>OR</p> <p>b) a manual fire alarm pull-box system. Use of a public address system or a bull horn does not constitute a fire alarm system.</p>
83(b)(1)	Records Interview	<p>Does a person, trained in the operation of the equipment, check the fire alarm monthly?</p> <p>Explanation: This can be done by a staff person who is trained in equipment operation; the person does not need to be trained by a fire safety authority.</p>
83(b)(2)	Records	Is there a written record showing the date the fire alarm was checked, the name of the person checking the alarm, and whether the was operative?
83(c)(1)	Records Interview	If the fire alarm is inoperative is notification for repair made within 24 hours of the check and the repairs completed within 48 hours of the check?
83(c)(2)	Records	Is there a written procedure for fire safety monitoring in the event that a fire alarm is inoperative?
84(a)	Site	Is there at least one fire extinguisher with a minimum 10 pound ABC rating per each 1,500 square feet of

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REGULATION NUMBER	INSPECTION SOURCE	REGULATION
84(a)	(Cont'd)	<p>indoor floor area on each floor, including the basement?</p> <p>Explanation: If one floor has less than 1,500 square feet, one fire extinguisher is still required.</p> <p>The correct way to refer to a 10ABC extinguisher is a 1A 10BC extinguisher. A 2A 10BC extinguisher or a 4A 60BC extinguisher is also acceptable instead of a 10ABC (1A 10BC) extinguisher.</p> <p>The "ABC" refers to the class of fire on which the extinguisher is effective.</p> <ul style="list-style-type: none"> • A Is used for a fire where ordinary combustible materials are involved (Paper, Wood, etc.). • B Is used for a fire which involves flammable liquids (Gas, Grease, etc.). • C Is used for electrical fires.
84(b)	Site	<p>Is there a fire extinguisher with a minimum 10 Pound ABC rating located within 100 feet of any point in the work area?</p> <p>Explanation: Work area includes all areas used by clients. It includes all training, counseling, evaluation, production work areas, etc. It also includes storage areas if the area is ever accessible to clients.</p>
84(c)	Site	<p>Is there a fire extinguisher with minimum 10B rating located in each kitchen?</p> <p>Explanation: This applies to all kitchens even if food is not prepared at the facility.</p>
84(d)	Site	<p>Are all fire extinguishers weighing under 45 pounds mounted on the wall so that the extinguishers are visible to staff and clients?</p>
84(e)	Site	<p>Are all fire extinguishers weighing over 45 pounds on a wheeled unit and visible to staff and clients?</p>

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REGULATION NUMBER	INSPECTION SOURCE	REGULATION
84(f)	Site	Are all fire extinguishers easily accessible to staff and clients?
84(g)	Site	<p>Were all fire extinguishers inspected and approved by the local fire department or other fire safety authority within the past year?</p> <p>Explanation: The date of the inspection must be on the extinguisher.</p> <p>All types of extinguishers require annual inspections.</p> <p>Annual inspections may not be done by maintenance staff unless the person is certified as a fire safety authority.</p>
85(a)(1)	Records	During the past year was a fire drill held at least every 90 calendar days?
85(a)(2)	Records	Is there a written fire drill record of the date, hypothetical location of fire, and the amount of time it took for evacuation?
85(b)(1)	Records	During the past year were fire drills held at different times of the day?
85(b)(2)	Records	During the past year were the hypothetical locations of the fire different for each drill?
85(c)	Records Site Interview	<p>During the past year did all clients evacuate the entire building during each fire drill?</p> <p>Explanation: All clients must evacuate the entire building or to a fire safe area designated in writing within the past year by a fire safety expert. A fire safe area is an area that is accessible from the facility by two different routes and that is separated from other</p>

VOCATIONAL FACILITIES LICENSING INSPECTION INSTRUMENT

REGULATION NUMBER	INSPECTION SOURCE	REGULATION
85(c)	(Cont'd)	<p>areas of the building by a minimum of 1-hour rated wall and door assemblies. Two fire safe areas in different directions of travel from the facility are acceptable.</p> <p>The fire safety expert may not be an employee of the facility or of the legal entity of the facility (for purposes of 85(c).</p> <p>Evacuation of the entire building means to ground level outside the building. Evacuation to a fire escape is not acceptable.</p> <p>Time to evacuate begins when the fire alarm is sounded</p> <p>Fire safety expert is a local fire department, fire protection engineer, college instructor in fire science, county or state fire school, volunteer fire person trained by a county or state fire school, or an insurance company loss control representative.</p> <p>If there are questions concerning evacuation of individuals, an actual fire drill should be observed by the inspector.</p>
85(d)	Records Site Interview	<p>During the past year were fire alarms tested by setting off the alarm during each fire drill?</p> <p>Explanation: The actual fire alarm must be tested and used during each drill.</p>
86(1)	Site	Are there signs bearing the word " EXIT " in plain legible letters at all exits?
86(2)	Site	If the exit or way to reach the exit is not immediately visible to the clients, is access to exits marked with readily visible signs indicating the direction of travel?

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REGULATION NUMBER	INSPECTION SOURCE	REGULATION
86(3)	Site	<p>Are exit sign letters at least 6 inches in height with the principal strokes of letters not less than 3/4 inch wide?</p>
86(4)	Site	<p>Are there tactile exit markings if one or more visually handicapped clients are served?</p> <p>Explanation: Examples of tactile exit markings include the international raised symbol of a star on a metal plaque cemented to the door jamb on either side of the door opening (see ANSI Standards for proper height), a textured material applied around the door knob or behind the push bar to designate exit doors from other doors, or floor or wall tiles. A different textured marking should be used to identify hazardous openings from other types of openings and exits.</p>
87	Records	<p>Is there a written record showing that all staff, and clients as appropriate, were instructed upon initial admission or initial employment and reinstructed annually in general fire safety and in the use of fire extinguishers?</p> <p>Explanation: Films, tapes, and other training packages are acceptable as training sources if they are developed by a fire safety authority, and if the material contains current fire safety techniques.</p> <p>Staff persons who present the fire safety film or tape must also attend annual fire safety training.</p> <p>"Upon initial admission" means within 31 calendar days after client admission. "Upon initial employment" means prior to or the first day of staff hire.</p> <p>All staff, including part-time staff, must be trained in the use of extinguishers and in general fire safety. All staff includes all employees of the facility including persons in staff positions not required by the</p>

VOCATIONAL FACILITIES LICENSING INSPECTION INSTRUMENT

REGULATION NUMBER	INSPECTION SOURCE	REGULATION
87	(Cont'd)	<p>regulations (e.g. clerical, procurement specialist, custodial, financial manager, etc.).</p> <p>All clients, including part-time clients, must be trained in general fire safety.</p> <p>If it is not appropriate for a particular client to receive training in the use of extinguishers due to medical or behavioral problems, there must be written documentation stating why the client is not appropriate for extinguisher training.</p>

HEALTH

101	Site	<p>Are staff, clients, or volunteers with symptoms of a communicable disease of a serious nature, such as strep throat, conjunctivitis, hepatitis, tuberculosis, or other medical problems which might interfere with the health of others as determined by a physician, ever permitted to be present at the facility, without written authorization from a licensed physician?</p> <p>Explanation: Record as non-compliance if any staff, clients, or volunteers with a serious communicable disease are present at the facility without written authorization from a licensed physician.</p> <p>Written authorization must be from a licensed physician (not a nurse or physician's assistant).</p> <p>If a licensed physician states in writing that an individual with a serious communicable disease is no longer contagious or if the physician specifies in writing certain health precautions that must be taken in order to reduce or eliminate contamination of clients, the individual may be present at the facility if the physician's written orders are carefully followed.</p> <p>Serious diseases also include hepatitis carriers.</p>
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VOCATIONAL FACILITIES LICENSING INSPECTION INSTRUMENT

REGULATION NUMBER	INSPECTION SOURCE	REGULATION
102	Records	<p>Is there at least one staff person certified within the past 3 years in first aid techniques, present at all times clients are at the facility?</p> <p>Explanation: There must be written documentation of the certification.</p> <p>Since there will be occasions that the designated first aid person will not be present, the inspector should review records for at least one back-up person who is certified.</p> <p>A registered nurse or licensed practical nurse on staff meets this requirement.</p> <p>Red Cross first aid certification meets this requirement. Colleges, high schools, and scouts often offer first aid training and the certificate is issued by Red Cross.</p> <p>CPR certification (e.g. Red Cross, American Heart Association) in conjunction with general first aid certification, meets this requirement.</p> <p>First aid training provided by a registered nurse or licensed practical nurse is not acceptable unless the nurse is authorized to issue first aid certificates by a recognized first aid source.</p> <p>If a specific certificate expires earlier than 3 years (e.g. CPR is issued for 1 year), the certificate must be renewed in accordance with the requirements of the certification agency (as opposed to every 3 years).</p>
103	Records	<p>Does the facility have a written emergency medical plan listing the hospital or source of health care that will be used in an emergency, the method of transportation to be used, and the staffing plan during the emergency?</p> <p>Explanation: Record as non-compliance if anyone or more of the above three items is not present in the emergency medical plan.</p>

VOCATIONAL FACILITIES LICENSING INSPECTION INSTRUMENT

REGULATION NUMBER	INSPECTION SOURCE	REGULATION
104	Site	Is emergency information for clients readily accessible?
104(1-4)	Site	<p>Does emergency medical information for each client include:</p> <ul style="list-style-type: none">• The name, address and telephone number of parents or legal guardian if applicable, and a designated person to be contacted in case of an emergency.• The name and telephone number of a physician or source of health care• written consent from the client, parent or guardian for emergency medical treatment, and,• medical information pertinent to diagnosis and treatment in case of emergency? <p>Explanation: Record as non-compliance if any one or more of the four areas listed are not present for any client.</p>

ADMISSION AND PLACEMENT

111(a)	Records Interview	<p>Did each client who applied for admission within the past year have a pre-admission interview?</p> <p>Explanation: Inspect the record for at least one client who has applied for admission within the past year.</p> <p>There is no time limit on when the preadmission interview must occur.</p>
111(b)(1)	Records	<p>Was the client notified in writing within 30 calendar days following the preadmission interview of acceptance or non-acceptance for services?</p> <p>Explanation: Inspect the record for at least one client who has applied for admission within the past year.</p>

VOCATIONAL FACILITIES LICENSING INSPECTION INSTRUMENT

REGULATION NUMBER	INSPECTION SOURCE	REGULATION
111(b)(1)	(Cont'd)	The written admission notice must be done within 30 calendar days after the pre-admission interview (not necessarily prior to the persons start date or placement).
111(b)(2)	Records	<p>If the client was accepted, did the notification specify the service for which the client is accepted OR if the client was not accepted, did the notification specify the reasons for the decision?</p> <p>Explanation: Inspect records for at least one client who has applied for admission within the past year.</p>
111(c)	Records	<p>Does the facility keep dates of interviews and notifications of admission and denial of admission on file for 3 years?</p> <p>Explanation: This requirement is not effective prior to the effective date of the regulations promulgated on August 28, 2010.</p>
112(a)(1)	Records Interview	Upon admission, are clients informed of the facility and or the services offered?
112(a)(2)	Records	Is the date of the orientation entered in the client's record?
112(b)(1)	Records Interview	Upon admission are clients given written information outlining working hours, benefits, leave policy, civil rights policies and procedures, and grievance procedures?
112(b)(2)	Records	Is there a written statement in the client's records signed by the client verifying that the written admission information was explained to the client?

VOCATIONAL FACILITIES LICENSING INSPECTION INSTRUMENT

REGULATION NUMBER	INSPECTION SOURCE	REGULATION
113(a)	Records	<p>Does the facility provide or make arrangements for placement services in order to move clients into a higher level vocational program or into competitive employment?</p> <p>Explanation: This requirement does not apply for handicapped employment clients.</p> <p>Competitive employment is a job in a regular work setting with an employee-employer relationship, in which a disabled adult is hired to do a job that other non-disabled employee also do.</p> <p>If the facility arranges for placement services through another agency, the facility must maintain documentation to show compliance with 113(a) through 113(c).</p>
113(b)	Records Interview	<p>Is there a staff person responsible for placement services?</p> <p>Explanation: This requirement does not apply for handicapped employment clients.</p>
113(c)(1)	Records	<p>Do placement services include information from prospective employers about the abilities required for the job?</p> <p>Explanation: This requirement does not apply for handicapped employment clients.</p>
113(c)(2)	Records	<p>Do placement services include notification of the client about a proposed placement?</p> <p>Explanation: This requirement does not apply for handicapped employment clients.</p>

VOCATIONAL FACILITIES LICENSING INSPECTION INSTRUMENT

REGULATION NUMBER	INSPECTION SOURCE	REGULATION
113(c)(3)	Records	<p>Do placement services include client participation in determining the appropriateness of the proposed placement?</p> <p>Explanation: This requirement does not apply for handicapped employment clients.</p>
113(c)(4)	Records	<p>Do placement services include information provided to the employer about the client's abilities and special needs?</p> <p>Explanation: This requirement does not apply for handicapped employment clients.</p> <p>This requirement is not in conflict with the Americans with Disabilities Act of 1990. This requirement relates to the client's <u>abilities</u> to perform essential functions of a job and special accommodations the client may need. Disclosing information regarding the nature or severity of a client's disability is in conflict with the Americans with Disabilities Act of 1990.</p>
113(c)(5)	Records	<p>Do placement services include follow-up activities with the client and the employer for at least 60 calendar days after the placement occurs to determine if the placement is suitable, permanent, and that rehabilitation needs have been met?</p> <p>Explanation: This requirement does not apply for handicapped employment clients.</p>
113(d)	Records	<p>For a client placed in competitive employment, does the facility document in the client's record the client's place of employment, job title, date of hiring, rate of pay, and follow-up activities?</p> <p>Explanation: This requirement does not apply for handicapped employment clients.</p>

VOCATIONAL FACILITIES LICENSING INSPECTION INSTRUMENT

REGULATION NUMBER	INSPECTION SOURCE	REGULATION
113(e)	Records	<p>Is there a written record of placement service components specified in section 113?</p> <p>Explanation: This requirement does not apply for handicapped employment clients.</p>
CLIENT RECORDS		
121(1)	Records	<p>Is there a client record for each client?</p>
121(2)	Records	<p>Are all entries in clients' records legible, dated, and signed by the person making the entry?</p> <p>Explanation: Initials by the person making the entry are acceptable; actual signature is not required.</p>
122(1)	Records	<p>Are client records kept at the facility while the client is being served?</p> <p>Explanation: Client records may not be kept at the main agency; records must be at the facility. An exception to this requirement is if an agency building and the facility is located on the same piece of property (not across the street or down the block); if the agency and facility are located on the same piece of property client records may be kept at the agency building.</p>
122(2)	Records Interview	<p>Are client records kept for at least 3 years following the client's departure?</p> <p>Explanation: Client payroll checks are subject to appropriate Wage and Hour regulations relating to length of record retention.</p>
123	Records Interview	<p>Are client records kept confidential and locked when unattended?</p>

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REGULATION NUMBER	INSPECTION SOURCE	REGULATION
124		<p>Explanation: Record as non compliance if any record sampled is missing any of the required components. Note which component(s) is (are) missing on the score sheet. If more than one item between 124(1) – (16) is found to not be in compliance use 124 only.</p> <p>"Record" in section 2390.124 (1)-(14) refers to the physical or electronic file maintained by the provider and that the provider identifies as their primary record for the client</p> <p>Presence or absence of information as required below is based on the information contained in that record.</p>
124(1)	Records	<p>Does each client's record include the name, sex, admission date, birth date and place, social security number, and dates of entry, transfer, and discharge?</p> <p>Explanation: Use of sampling procedures and inspect a sample of the records.</p>
124(2)	Records	<p>Does each client's record include the name, address, and telephone number of parents or legal-guardian, and a designated person to be contacted in case of an emergency?</p> <p>Explanation: Use of sampling procedures and inspect a sample of the records.</p>
124(3)	Records	<p>Does each client's record include the name and telephone number of a physician or source of health care?</p> <p>Explanation: Use of sampling procedures and inspect a sample of the records.</p>

VOCATIONAL FACILITIES LICENSING INSPECTION INSTRUMENT

REGULATION NUMBER	INSPECTION SOURCE	REGULATION
124(4)	Records	<p>Does each client's record include the written consent from the client (or parent or guardian, if appropriate) for emergency medical treatment?</p> <p>Explanation: Use of sampling procedures and inspect a sample of the records.</p>
124(5)	Records	<p>Does each client's record include a copy of a physical exam?</p> <p>Explanation: The client record is to contain a physical exam. This physical exam can be a copy of an exam obtained by a home licensed under 6400 or 6500. If the provider is unable to get a physical exam, an explanation of the steps taken to obtain the physical should be in the record.</p>
124(6)	Records	<p>Does each client's record include copies of completed assessments as required under 2390.151?</p>
124(7)	Records	<p>Does each client's record include copies of vocational evaluations, if applicable?</p> <p>Explanation: If a recommendation for a vocational evaluation is recorded or the ISP indicates that one has been completed, a copy of the completed evaluation should be in the record.</p>
124(8)(i)	Records	<p>Does each client's record include copies of the invitation to the initial ISP meeting?</p>
124(8)(ii)	Records	<p>Does each client's record include copies of the invitation to the Annual ISP Update meeting?</p>
124(8)(iii)	Records	<p>Does each client's record include copies of the invitation to the ISP revision meeting?</p>

VOCATIONAL FACILITIES LICENSING INSPECTION INSTRUMENT

REGULATION NUMBER	INSPECTION SOURCE	REGULATION
124(9)(i)	Records	Does each client's record include signed and completed copies of the signature sheet for the initial ISP meeting?
124(9)(ii)	Records	Does each client's record include signed and completed copies of the signature sheet for the ISP annual update meeting?
124(9)(iii)	Records	Does each client's record include signed and completed copies of the signature sheet for the ISP plan revision meeting?
124(10)	Records	Does each client's record include a copy of the client's current ISP?
124(11)(i)	Records	Does each client's record include documentation of ISP reviews and ISP revisions under § 2390.156 (relating to ISP review and revision), including the ISP review signature sheets?
124(11)(ii)	Records	Does each client's record include recommendations to revise the ISP? Explanation: If at any point, including during a review of the ISP the Program Specialist identifies a need to revise the ISP, they need to notify the Plan Lead /SC of that need. Written documentation of that communication needs to be kept in the client's record.
124(11)(iii)	Records	Does each client's record include current ISP revisions? Explanation: Recommendations to revise the ISP will not always result in revision to the ISP. Revisions to the plan will be determined by the Plan Team. If a recommendation to revise the ISP is made and results in a decision to revise the ISP, is there documentation that the meeting was held and that a copy of the revised ISP is in the record.

VOCATIONAL FACILITIES LICENSING INSPECTION INSTRUMENT

REGULATION NUMBER	INSPECTION SOURCE	REGULATION
124(11)(iv)	Records	Does each client's record include notices that the ISP team member may decline the ISP review documentation?
124(11)(v)	Records	Does each client's record include requests from the ISP team member(s) to not receive the ISP review documentation? Explanation: This request is not expected annually, once the request is made, it remains valid until the ISP team member indicates otherwise. The Plan Lead and/or SC cannot decline ISP review documentation.
124(12)	Records	Does each client's record include documentation when a content discrepancy, annual update revision was completed under 2390.156?
124(13)	Records	Does each client's record include a restrictive procedure protocol and restrictive procedure records, if applicable? Explanation: The protocol needs to be current to the needs of the client as described in the ISP.
124(14)	Records	Does each client's record include unusual incident reports related to the client? Explanation: Copies of unsubstantiated and non-founded reports of abuse, as well as founded reports, must be kept; unsubstantiated and non-founded reports may be kept in a separate file and not in the client's record.
124(15)	Records	Does each client's record include copies of psychological evaluations, if applicable?

VOCATIONAL FACILITIES LICENSING INSPECTION INSTRUMENT

REGULATION NUMBER	INSPECTION SOURCE	REGULATION
124(15)	(Cont'd)	Explanation: If a recommendation for a psychological evaluation is recorded or the ISP indicates that one has been completed a copy of the completed evaluation should be in the record.
124(16)	Records	Is there a copy of vocational evaluators that are required under 2390.159 (relating to vocational evaluations).
125	Records	Is there a written policy governing access to, duplication of and dissemination of information from the records that also designates staff authorized to have access to the files?
126(a)	Records	<p>Does a client, and the parent or guardian if the client is under 18 years of age or if the client is legally incompetent, have access to the records and to information in the records?</p> <p>Explanation: If the interdisciplinary team documents in writing, that disclosure of specific information constitute a substantial detriment to the client or that disclosure of specific information will reveal the identity of persons or breach the confidentiality of persons who have provided information upon an agreement to maintain their confidentiality, that specific information identified may be withheld.</p> <p>The client, and the client's parent, guardian or advocate, may be excluded from the team making this decision to withhold information if appropriate. This is necessary to protect the client from disclosing information that may be detrimental to the client, or disclosing information that the client does not want disclosed. If the client, client's parent, guardian, or advocate is on the team making the decision, they obviously will have access to that information.</p>
126(b)	Records	Is the client's record kept as the property of the

VOCATIONAL FACILITIES LICENSING INSPECTION INSTRUMENT

REGULATION NUMBER	INSPECTION SOURCE	REGULATION
	Interview	facility whose responsibility is to secure the information against loss, defacement, tampering, or use by unauthorized persons and are client records removed from the facility's jurisdiction and safekeeping only in accordance with a court order, subpoena, or statute?
127	Records Interview	Is written consent of the client (or parent or guardian, if the client is adjudicated incompetent) obtained for the release of information, including photographs, to persons not otherwise authorized by law to receive it?
127	(Cont'd)	<p>Explanation: New written consent is needed for each separate incidence when information is released, except for persons authorized by law or regulation to access information.</p> <p>Advocates, with the exception of Pennsylvania Protection and Advocacy representatives, do not have access to records without the client's consent. For information about access to records by Pennsylvania Protection and Advocacy, refer to OMR Bulletin #00-94-19, issued August 22, 1994 titled "Site Visits and Access to Records by Pennsylvania Protection and Advocacy, Inc."</p> <p>In accordance with 55 Pa, Code §4210.122, county mental retardation program and base service unit staff have access to the client's record without written consent.</p>

HANDICAPPED EMPLOYMENT

141	Records	For all clients in handicapped employment, is there written documentation prepared <u>within the past year</u> , signed by at least the chief executive officer or designee, the floor supervisor, and the client, stating that rehabilitation, habilitation, and ongoing training services are not necessary in order for the client to work at the facility?
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REGULATION NUMBER	INSPECTION SOURCE	REGULATION
		<p>Explanation: Handicapped employment is a vocational program in which the individual client does not require rehabilitation, habilitation, or ongoing training in order to work at the facility.</p>
142		<p>Explanation: If there is written documentation, signed by each interdisciplinary team member, stating that training, rehabilitation and habilitation services are not necessary in order for a specific client to function vocationally, § 2390.143 and § 2390.144 (relating to work performance review; and</p>
142	(Cont'd)	<p>handicapped employment floor supervisor), are applicable for that client.</p>
143(a)	Records	<p>For clients in handicapped employment, is there a written work performance review completed within the past year in the client's file?</p> <p>Explanation: A work performance review is an assessment of the client's skill level.</p>
143(b)(1)	Records	<p>Do work performance reviews Handicapped employment include for the clients in quantity and quality of work?</p> <p>Explanation: Use of sampling procedures and inspect a sample of the records.</p>
143(b)(2)	Records	<p>Do work performance reviews for clients in handicapped employment include changes in productivity since last review if any?</p> <p>Explanation: Use of sampling procedures and inspect a sample of the records.</p>
143(b)(3)	Records	<p>Do work performance reviews for clients in handicapped employment include the potential for</p>

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REGULATION NUMBER	INSPECTION SOURCE	REGULATION
		upward movement into a higher level rehabilitation program or into competitive employment? Explanation: Use of sampling procedures and inspect a sample of the records.
143(b)(4)	Records	Do work performance reviews for clients in handicapped employment include particular work related problems, if any? Explanation: Use of sampling Procedures and inspect a sample of the records.
143(c)	Records	Was the client in handicapped employment provided with a copy of his or her work performance review? Explanation: Use of sampling procedures and inspect a sample of the records.
144	Site Records	Is there at least one floor supervisor for every 20 handicapped employment clients when handicapped employment clients are present in the facility? Explanation: All floor supervisors counted in the 1:20 ratio must be physically present at the facility at all times clients are present at the facility. Floor supervisors do not necessarily need to be physically present with the clients at all times. If handicapped employment clients are integrated with non-handicapped employment clients, the floor supervisor ratio requirements specified in number 35 must be met for all the clients.

DEVELOPMENT OF THE PLAN, UPDATES, AND REVISIONS

151(a)	Records	Does each client have a written assessment within 1 year prior to or 60 calendar days after admission to the facility, with an updated assessment annually thereafter?
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REGULATION NUMBER	INSPECTION SOURCE	REGULATION
151(a)	(Cont'd)	<p>Explanation: A team meeting is not required to develop or conduct the assessment. The admission date is the client's first day at the facility. Trial visits do not count as part of the 60 calendar days. If an client is admitted to a facility operated by a new legal entity, a new assessment must be done. In the event of a merger or takeover where there is no significant change in program staff, services or location, documentation should support that the assessments were reviewed for accuracy to the current situation and if necessary, updated. If a client moves from one home to another within the same agency, the assessment can be transferred with the client. No new assessment is required. The Program Specialist under this chapter is required to ensure that assessments are completed prior to ISP meeting. (Initial, Annual, & Plan Revision). The Program Specialist can also attach other supporting documents as needed to provide all the information required in this section. The Licensing representative should review the copies of the assessment information the Program Specialist provided to the SC/ Plan Lead to ensure that the information provided fulfills the requirements of this section.</p>
151(b)	Records	<p>When recommendations are made to revise a service or outcome in the ISP under 2390.156(c)(4), are assessments updated or completed?</p> <p>Explanation: The Program Specialist is not required to complete all portions of the assessment. The Program Specialist is responsible to coordinate the overall assessment to make sure all components are included and reflect the client's current status, supporting the need for the recommended change in service or outcome.</p>

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REGULATION NUMBER	INSPECTION SOURCE	REGULATION
151(c)	Records	<p>Are the assessments based on assessment instruments, interviews, progress notes and observations?</p> <p>Explanation: The ISP is a document that is written collaboratively with the contributions and input of the planning team and incorporates information provided and services and supports as agreed upon during the plan meetings.</p>
151(d)	Records	Does the Program Specialist sign and date the assessment?
151(e)		<p>THE ASSESSMENT SHALL INCLUDE THE FOLLOWING INFORMATION:</p> <p>Explanation: All items in 151(e),(1)-(15) must be in the assessment. Attachments to the assessment are permitted.</p>
151(e)(1)	Records	Does each assessment include functional strengths, needs, and preferences of the client?
151(e)(2)	Records	Does each assessment include the likes, dislikes and interest of the client, including vocational and employment interests?
151(e)(3)(i)	Record	Does the client's assessment contain the client's current level of performance and progress in the acquisition of vocational functioning skill?
151(e)(3)(ii)	Records	Does the client's assessment contain the client's current level of performance and progress in communication, including ability to receive, retain, and carry out instructions?

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REGULATION NUMBER	INSPECTION SOURCE	REGULATION
151(e)(3)(iii)	Records	<p>Does the client's assessment contain the client's current level of performance and progress in personal adjustment?</p> <p>Explanation: Personal adjustment refers to the person's ability to successfully interact with peers, within the community and with support staff.</p>
151(e)(3)(iv)	Records	<p>Does the client's assessment contain the client's current level of performance and progress in meeting own personal needs with or without assistance from others?</p> <p>Explanation: Examples of personal needs activities include eating and personal hygiene.</p>
151(e)3(iv)	(Cont'd)	<p>Consider during the review, if the assessment identifies where additional supports are needed, the supports, the services, and level of services identified and provided through the ISP? For example: if the client requires 1:1 supports for specific areas, does the assessment support that need? The assessment may include support needs during a specific activity or for a specific length of time. The assessment must address the client's needs both at the facility and in the community.</p>
151(e)(4)	Records	<p>Does each assessment include the client's need for supervision?</p> <p>Explanation: Consider during the review, if the assessment identifies where additional supervision is needed and if the services and level of services are identified and provided through the ISP? For example: if the client requires 1:1 supports for specific areas, does the assessment support that need? The assessment may include support needs during a specific activity or for a specific length of time. The assessment must address the client's needs both at the facility and in the community.</p>

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REGULATION NUMBER	INSPECTION SOURCE	REGULATION
151(e)(5)	Records	<p>Does each assessment include the client's progress toward self-administration of medications if the client is not able to self-administer medications?</p> <p>Explanation: For clients for whom self-administration is not a foreseeable outcome, a statement explaining this is acceptable.</p>
151(e)(6)	Records	<p>Does each assessment include the client's ability to safely use or avoid poisonous materials? This regulation applies even if poisonous materials are kept locked or made inaccessible to clients.</p>
151(e)(7)	Records	<p>Does each assessment include the client's understanding of the danger of heat sources and ability to sense and move away from heat sources quickly? This regulation applies even if all heat sources exceeding 120°F within the facility are insulated.</p>
151(e)(7)	(cont'd)	
151(e)(8)	Records	<p>Does each assessment include the client's ability to evacuate in the event of a fire?</p>
151(e)(9)	Records	<p>Does each assessment include the client's disability, including functional and medical limitations?</p> <p>Explanation: This item of the assessment does not need to include documentation of the criteria used to complete the assessment.</p>
151(e)(10)	Records	<p>Does each assessment include a lifetime medical history?</p> <p>Explanation: Attempts must be made to compile a lifetime medical history. If medical information is not available, documentation of research attempts to acquire this information must be available.</p>

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REGULATION NUMBER	INSPECTION SOURCE	REGULATION
		Once a history is completed, new significant medical information may be added to the original history each year.
151(e)(11)	Records	<p>Does each assessment include the most recent psychological evaluation for the client, if applicable?</p> <p>Explanation: If a psychological evaluation was completed since the last assessment, then the assessment should be updated to reflect the current information</p>
151(e)(12)	Records	Does each assessment include recommendations for specific areas of vocational training or placement and competitive community-integrated employment?
151(e)(13)(i)	Records	Does the annual assessment include the client's progress and growth in the area of health?
151(e)(13)(ii)	Records	Does the annual assessment include the client's progress and growth in the areas of motor and communication skills?
151(e)(13)(iii)	Records	<p>Does the annual assessment include the client's progress and growth in the area of personal adjustment?</p> <p>This is a duplicate of 153(e)(3)(iii). Cite that regulation instead of this regulation.</p>
151(e)(13)(iv)	Records	Does the annual assessment include the client's progress and growth in the area of socialization?
151(e)(13)(v)	Records	Does the annual assessment include the client's progress and growth in the area of vocational skills?

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REGULATION NUMBER	INSPECTION SOURCE	REGULATION
151(f)	Records	Is there documentation that the client and all plan team members were informed of the results of the assessment at least 30 calendar days prior to the ISP, ISP Annual Update meeting or ISP Plan Revision?
152(a)	Records	<p>Does each client have only one current ISP that covers all licensed programs supporting the client?</p> <p>Explanation: Any information required in the Annual ISP, ISP Update or Plan revision must be maintained or referenced in the ISP. This should not mean that all information must be recorded in the ISP, but that all information related to compliance must be identified, including references to other documents, i.e. assessments, used to support the plan and fulfill the requirements. If the client is supported by more than one ODP licensed setting, the ISP must cover all services.</p>
152(b)	Records	Does the client receive services through an SCO? If yes, 2390.152 (b), (c) & (d) are not applicable.
152(c)	Records	<p>Is the Program Specialist fulfilling the role as the Plan Lead?</p> <p>Explanation: The role and responsibilities of the Plan Lead are separate from the role of Program Specialist. The Program Specialist, acting as the Plan Lead is responsible for facilitating the development and implementation of the plan. Facilitation and implementation refers to the Plan Lead ensuring that the ISP process is completed as described under 2390.152, 2390.156(f) and (g). The Plan Lead, acting in the role of the Program Specialist for the program they are licensed under:</p> <ul style="list-style-type: none"> • <u>IS</u> responsible for ensuring the supports and services are implemented as described in the plan for the program they are licensed under.

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		<ul style="list-style-type: none"> • <u>IS NOT</u> responsible for ensuring the supports and services are implemented as described in the plan for programs the client participates in that are licensed under other chapters. This remains the responsibility of the Program Specialists that are licensed under those chapters.
152(d)(1)	Records	<p>Is the Plan Lead ISP developed initially, updated annually and revised based upon the client's current assessment as required under §§ 2380.181, 2390.151, 6400.181 and 6500.151 (relating to assessments)?</p> <p>This applies only to ISPs developed by a plan lead. If the ISP was developed by an SCO, then cite 2390.33(b)(2).</p> <p>If during the subsequent review of the ISP, the Program Specialist identifies errors or omissions, of this information in the completed ISP, the Program Specialist must document their communication with the SC/ Plan Lead to resolve these errors or omissions.</p>
152(d)(1)	(cont'd)	
152(d)(2)	Records	<p>Does the Plan Lead develop ISPs for each client based on the client assessment within 90 calendar days of the client's admission date.</p> <p>Explanation: An ISP is required for clients who are retired. The ISP should include goal areas such as hobbies, community activities and client interests. "ISPs developed based on the assessment" means that the assessment must be done prior to the ISP within 1 year prior to or within 90 days of admission date. The assessment and the ISP must be completed as two separate processes. The admission date is the date the client starts at the facility.</p>
152(d)(3)	Records	<p>Did the Plan Lead document the ISP on the Department designated form that is located in HCSIS or in the Department's web site?</p>

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152(d)(4)	Records	<p>If the Program Specialist is fulfilling the role of plan lead, copies of the invitation sent to team members should be contained in the record. If the Program Specialist is not the Plan Lead, a copy of the invitation received from the Plan Lead or SC should be contained in the record.</p> <p>Explanation: Invitations are sent by the Plan Lead or the Supports Coordinator. The client's record should contain copies of the invitations sent to plan team members. All Plan Team members have a responsibility to report to the Plan Lead or SC if the invitations sent out do not include all identified Plan Team members. During a licensing inspection the Department will request copies (or carbon copies) sent within the past year and identifying all invited Plan Team members. The Department does not mandate a timeframe for agency record retention, except for retention of client records as specified in §2380.175 (relating to record retention).</p>
152(d)(5)	Records	<p>Is there supporting documentation that copies of the plan, plan annual update, and plan revision were sent as required under § 2390.157 (relation to copies of the plan, plan annual update and plan revision)?</p>

PLAN CONTENT

153	Records	<p>Explanation: The ISP is a document that is written collaboratively with the contributions and input of the planning team and incorporates information provided and services and supports as agreed upon during the plan meetings. The Program Specialist role under this chapter and section is to ensure that the information contained in the ISP is accurate and reflects the services and supports provided by the program licensed under this chapter. The Licensing representative should review the ISP, ISP Annual Update and ISP Revision to ensure that the ISP</p>
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		includes and supports the services being provided. If a provided service or support is not included in the Plan, the Licensing representative should review the documentation to ensure the Program Specialist has communicated with the SC/ Plan Lead to resolve the errors or omissions. Monitoring compliance with the implementation of these services and actions is addressed in §2390.155 (a) & (b).
153(1)	Records	<p>Does the ISP, ISP Annual Update and ISP Revision include services provided to the client and expected outcomes chosen by the client and the client's ISP team?</p> <p>Explanation: The outcomes should be specific to the assessed needs of the client. Appropriate services to meet the health and safety aspects of those needs and the expressed or perceived desires of the client are identified.</p>
153(2)	Records	<p>Are there services or supports specifically identified in the ISP, ISP Annual Update and ISP Revision to promote a higher level of vocational programming or into competitive community-integrated employment?</p> <p>Explanation: The services and supports provided to an client, must include, where appropriate, clientized activities specific to client preferences and assessed needs that promote increased vocational programming, involvement, participation, comfort, and independence.</p> <p>Answers the question, "What is it that the person wants to do and what is being done to help support and encourage this?"</p>
153(3)	Records	<p>Does the ISP describe the current status of the client, related to the outcome? Does the ISP describe how progress toward the outcome will be determined?</p> <p>Explanation: The method of evaluation should support the specific action step(s) identified in the ISP and the timeframes related to the expected outcome.</p>

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		Information regarding current status may be contained in the Outcome section of the ISP under "Relevant Assessments Linked to Outcome" or other areas of the ISP. Progress in an outcome can be contained in the "How will you know progress is being made towards this outcome?" section of the ISP or other areas of the ISP.
153(4)	Records	Does the client's current assessment state that the client may be without direct supervision? Does the client's plan include an expected outcome which requires the achievement of a higher level of independence? If yes, to either of these questions, the ISP, ISP Annual Update and ISP Revision must include a protocol and schedule outlining specified periods of time for the client to be without direct supervision.
153(4)	(cont'd)	<p>Explanation: The protocol and schedule can be summarized in the ISP, ISP Annual Update and ISP Revision, but must identify where the detailed protocol and schedule can be located. This regulation includes supervision needs in the facility, on the premises of the facility. Direct supervision in the facility means the staff person is in the facility or on the premises of the facility. Direct supervision in the community means the staff person is at least within visual proximity of the client and available to provide support as needed. The plan may specify a time period of any length or during a specific activity/activities.</p> <p>Clients with enhanced supervision needs would also need a protocol and schedule targeted to reduce need for this intensive level of staffing.</p>
153(5)	Record	Does each ISP, ISP Annual Update and ISP Revision include information regarding a protocol to address the social, emotional and environmental needs of the client, if a medication is prescribed to treat symptoms of a diagnosed psychiatric illness?

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		<p>Explanation: The Social, Emotional, and Environmental Needs Protocol should be data entered in the behavior support section of the ISP. If the entire protocol cannot be completed in the behavioral support plan section this should be indicated. The rest of the protocol and the plan, if applicable, should be within the individual record.</p> <p>The Social, Emotional and Environmental Support Plan may be a hard copy that should be maintained in the client's file. If a medication is prescribed to treat a diagnosed psychiatric illness, there should be a plan for Social, Emotional, and Environmental support. The ISP should include those who should be trained in the application of the Social, Emotional, and Environmental Support Plan prior to working with the client, the documentation requirements of the plan, and the job title responsible for collecting the information.</p>
153(6)	Records	<p>Does the ISP, ISP Annual Update and ISP Revision include the use of restrictive procedures? If so, does the ISP include information regarding the protocol for the elimination of the use of these procedures, including information regarding their use and the underlying causes of the behavior that led to the use of restrictive procedures?</p> <p>Explanation: The ISP does not have a specific place or space to include all the information listed below. This information can be contained in a separate document but the location of the document must be identified in the ISP, ISP Annual Update and ISP Revision and that document must include the information required in sections (i) - (v), including a review of restraint data.</p>
153(6)(i)	Records	<p>Does the ISP include an assessment to determine the causes or antecedents of the behavior?</p> <p>Explanation: The assessment can be part of the annual assessment as required in 2390.151 or a separate assessment to determine cause or</p>

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		antecedent. Information regarding the completion of these assessments should be included in the Psychosocial Information section of the ISP, ISP Annual Update and ISP Revision.
153(6)(ii)	Records	Does the ISP include information regarding the protocol for addressing the underlying causes or antecedents of the behavior? Explanation: The protocol should address all causes or antecedents identified through the assessment as required in 2390.153 (6)(i).
153(6)(iii)	Records	Does the ISP include information regarding the method and timeline for eliminating the use of the restrictive procedure?
153(6)(iv)	Records	Does the ISP include information regarding the procedures for intervention or redirection without utilizing restrictive procedures?
153(7)(i)	Records	Does the ISP, ISP Annual Update and ISP Revision include information regarding the assessment of the client's potential to advance in vocational programming?
153(7)(ii)	Records	Does the ISP, ISP Annual Update and ISP Revision include information regarding the assessment of the client's potential to advance in their vocational programming towards Competitive Community-Integrated Employment?

PARTICIPATION IN PLAN DEVELOPMENT

154(a)	Records	Does documentation support that the Team Members identified in 2390.154 (a)(1)(i) and 2390.154(a)(2)(i-ii) as applicable, participated in the development of the ISP, ISP Annual Update and ISP Revisions?
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Explanation: Participation includes but is not limited to: Supporting, collecting and sharing of information with other team members related to the development, implementation and evaluation of the supports and services identified in the ISP, ISP Annual Update and ISP Revisions.

Attendance and participation in the ISP, ISP Annual Update, and ISP Revision meetings.

Maintaining ongoing communication with the ISP Team members, including the Supports Coordinator/ Plan Lead to evaluate the effectiveness of the ISP and revise the ISP as needed to support the Outcomes identified in the ISP.

Documentation to support this requirement could include the ISP sign-in sheet, and communications with the other team members relative to the plan meeting.

Documentation should include communication with the Plan Lead/SC identifying the absence of Plan Team members required under this section.

154(a)(1)(i)	Records	Does the documentation support that the Plan Team includes the client?
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154(a)(1)(ii)	Records Interview	Does the documentation support that the Plan Team includes a Program Specialist or Family Living Specialist as applicable from each provider delivering a service to the client?
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Explanation: Every effort should be made for the identified Program Specialist/ Family Living Specialist to attend and participate in the ISP, ISP Annual Update, and ISP revision meetings. In the event that the Program Specialist is unable to attend a specific ISP meeting, a proxy representative can be identified. The proxy representative must have the qualifications of a Program Specialist as specified in 2390.33(c).

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		<p>To ensure effective development of the ISP, ISP Annual Update, or ISP Revision:</p> <ul style="list-style-type: none"> • The proxy representative should have similar or greater decision making authority within the licensed facility. • Documentation should support the availability and review of relevant information with the proxy representative, so that he/she can properly represent the program.
154(a)(1)(iii)	Record	<p>Does the Plan Team include a Direct Service Worker that works with the client and any other person the client invites?</p> <p>Explanation: Every effort should be made for the identified Direct Service Workers who work with the client to attend and participate in the ISP, ISP Annual Update, and ISP revision meetings.</p>
154(a)(1)(iv)	Records Interview	<p>Does the Plan Team include any other people the client chooses to invite?</p>
154(a)(2)	Records	<p>Does the Plan Team include the following people if they have a role in the client's life?</p> <ul style="list-style-type: none"> • Medical, nursing, behavior management, speech, occupational or physical therapy specialists • Additional direct service workers who work with the client from each provider delivering services to the client. • Client's parent, guardian, or advocate <p>Explanation: The people listed above are optional team members. This area would only be cited if they play a role in the client's life but were not offered the opportunity to be a team member. Notifications to these people could be used to indicate that these people were contacted.</p>

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154(b)	Records Interview	<p>Are at least 3 ISP team members, in addition to the client, if the client chooses to attend, present for the ISP, ISP Annual Update, and ISP revision meetings?</p> <p>Explanation: The Program Specialist for the program licensed under this chapter (as well as any Program Specialist from other programs the client participates in that are licensed under Chapters 2380, 2390, 6400, & 6500 should attend the ISP meetings. The client can choose to invite others to attend the meeting. The client may choose not to attend their ISP meetings.</p>
154(c)	Records	<p>Do the ISP team members who attend the ISP, ISP Annual Update, and ISP Revision meetings sign and date the ISP signature sheet?</p> <p>Explanation: Signature indicates attendance.</p>
155(a)	Records Interview	<p>Is there supporting documentation that the services identified in the ISP were implemented by the ISP's start date?</p> <p>Explanation: The ISP may indicate that some services may not start until sometime after the ISP Start Date. In these cases, documentation should support that the service(s) were implemented by the start date of that specific service.</p>
155(b)	Records Interview	<p>Is the ISP implemented as written?</p> <p>Explanation: Does the provider's documentation support that the services/ supports provided are in line with the services and supports identified in the ISP and within the service limits, as identified in the ISP? The provider is responsible for designing and implementing specific strategies, programs and/ or procedures to support the Outcome/Action Steps identified in the ISP. These strategies, programs and/ or procedures are not included in the ISP but should</p>

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		<p>support the Outcome and action plans that are identified in the ISP and linked to the specific service(s). This supplementary information is necessary to ensure appropriate service delivery and should reflect the assessed needs, identified measures of progress, and service limits identified in the ISP. Documentation should be kept to track the progress/ effectiveness of these procedures in supporting the Outcome and action plan.</p> <p>Based on progress (or lack of progress), the provider is able to adapt the procedures as necessary to meet the needs of the client and to improve success and/or request an ISP Review if an adjustment/ revision to the ISP may be needed.</p> <p>The role of the Licensing is to review the implementation procedures and documentation of the provider to ensure implementation and demonstrated progress related to the Outcome and action steps.</p>
156(a)	Records	<p>Are additional reviews held when the client's needs change which impact the services as specified in the current ISP is identified?</p> <p>Explanation: Meetings with the entire team are not required to be held. The three month period starts from the date of the last review, therefore 4 reviews over the course of one year is a minimum standard. The ISP Annual Update and the ISP Revision meeting may count as a review as long as it is documented that the entire ISP is reviewed.</p>
156(b)	Records	<p>Is the ISP 3 month review signed by the Program Specialist and the client?</p>
156(c)(1)	Records	<p>Does each review include the monthly documentation of the client's participation and progress during the prior 3 months toward ISP outcomes that are supported by the services provided by the provider licensed under this chapter?</p>

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		<p>Explanation: If progress is not noted for a significant period of time there should be documentation supporting either a revision to the method(s) used by the program to support the outcome and/or a recommendation to the SC/ Plan Lead if a revision or new outcome is needed for the ISP.</p>
156(c)(2)	Records	Does each review include a review of each section of the ISP specific to the facility licensed under this chapter?
156(c)(3)	Records	Is there documentation of change in need, if applicable?
156(c)(4)(i)	Records	Is there supporting documentation that the Program Specialist made recommendations to the Supports Coordinator/ Plan lead regarding the deletion of an Outcome or service, when needed?
156(c)(4)(ii)	Records	Is there supporting documentation that the Program Specialist made recommendations to the Supports Coordinator/ Plan lead regarding the addition of an Outcome or service, when needed?
156(c)(4)(iii)	Records	Is there supporting documentation that the Program Specialist made recommendations to the Supports Coordinator/ Plan lead regarding the modification of an outcome or service, when needed?
156(c)(5)	Records	<p>Is there documentation to support that when the Program Specialist recommends a revision of a service or outcome that a revised assessment was completed?</p> <p>Explanation: This is not a requirement to complete an entire new assessment, but to review and revise (as appropriate) the existing assessments as required under § 2390.151(b)</p>

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REGULATION NUMBER	INSPECTION SOURCE	REGULATION
156(d)	Records	<p>Is there documentation to support that the Program Specialist provided the ISP Review documentation and recommendations, if applicable to the SC/Plan Lead and Plan Team members within 30 days of the ISP Review meeting?</p> <p>Explanation: The documentation provided can be a summary of the data and information reviewed. If a recommendation to revise a service our outcome is made, the review information should support the recommendation.</p>
156(e)	Records	<p>Is there documentation to support that the Program Specialist notified the Plan Team members of the option to decline the ISP Review documentation?</p> <p>Explanation: The Supports Coordinator/ Plan Lead cannot decline the ISP Review Documentation. A documented declination of the ISP Review Documentation remains in effect until/unless the team member subsequently requests the ISP Review Documentation.</p>
156(f)	Records	<p>Is the Program Specialist acting as the Plan Lead? Was there a recommendation to revise a service or outcome in the ISP made? If yes to both, did the Program Specialist, acting as the plan lead send an invitation for an ISP Revision Meeting to the Plan team, within 30 days of receipt of that recommendation?</p> <p>Explanation: The requirement only applies when the Program Specialist is acting as the Plan Lead as defined in §§ 2380.182(B) AND (C), 2390.152(B) AND (C), 6400.182(B) AND (C), 6500.152(B) AND (C).</p>
156(g)	Records	<p>Does the documentation support that the revised service or outcome in the ISP was implemented by the Outcome start date and as written?</p>

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157	Records	<p>Is the Program Specialist acting as the Plan Lead? Is there documentation to support that the Program Specialist, acting as the Plan Lead, provided a copy of the ISP, including signature sheet, to the team members within 30 days after the ISP, ISP Annual Update, and ISP Revision meetings?</p> <p>Explanation: The requirement applies when the Program Specialist is acting as the Plan Lead as defined in §§ 2380.182(B) AND (C), 2390.152(B) AND (C), 6400.182(B) AND (C), 6500.152(B) AND (C). If the Program Specialist is not the Plan Lead and the ISP was not distributed within the 30 calendar days, documentation supporting the attempts of the Program Specialist to obtain a copy from the Plan Lead/SC should be reviewed.</p>
158(a)	Record	<p>Does documentation support that the facility provides services including work experience and other vocational training designed to develop the skills necessary for promotion into a higher level of vocational programming or competitive community-integrated employment?</p>
158(b)	Records	<p>Does documentation support that the facility provides opportunities and support to the client for participation in community life, including competitive community-integrated employment?</p> <p>Explanation: The provider under this chapter would be expected to provide and document how they support and encourage the client to participate and interact as part of the community. Activities need not specify a precise schedule or frequency.</p> <p>This is not intended to be a requirement for a specific outcome targeted to community integration, but that the supports and services provided through the ISP by all ODP programs include and incorporate support and encouragement for the client to more fully participate in their community.</p>

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158(c)	Record	<p>Does the home or facility provide services as specified in the ISP?</p> <p>Explanation: Does the provider's documentation support that the services/supports provided are in line with the services and supports identified in the ISP and within the service limits, as identified in the ISP? The provider is responsible for designing and implementing specific strategies, programs and/or procedures to support the Outcome/ Action Steps identified in the ISP. These strategies, programs and/or procedures are not included in the ISP but should support the Outcome and action plans that are identified in the ISP and linked to the specific service(s). This supplementary information is necessary to ensure appropriate service delivery and should reflect the assessed needs, identified measures of progress, and service limits identified in the ISP. Documentation should be kept to track the progress/ effectiveness of these procedures in supporting the outcome and action plan. Based on progress (or lack of progress), the provider is able to adapt the procedures as necessary to meet the needs of the client and to improve success and/or request an ISP Review if an adjustment/ revision to the ISP may be needed. Non-compliance in this area should be recorded in 2390.155(b).</p>
158(c)	(cont'd)	
158(d)	Record	Does the facility provide services that are age and functionally appropriate to the client?
159(1)	Records Interview	<p>Are all vocational evaluations performed by the vocational evaluator?</p> <p>Explanation: This applies only if the facility provides vocational evaluation. Vocational evaluation is the use of planned activities, systematic observation, and testing to accomplish a formal assessment of a client, including an identification of program needs, potential for employment, and identification of employment</p>

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		objectives. The vocational evaluator may delegate some evaluation activities; however, the evaluator is ultimately responsible for the evaluation. Since vocational evaluations are not required by the regulations, there are no time frames for completion.
159(2)	Records	<p>Is there a copy of the written evaluation in the client's record?</p> <p>Explanation: This applies only if the facility provides vocational evaluation.</p>
159(3)(i)	Records	<p>Does the written evaluation include the client's current level of vocational functioning?</p> <p>Explanation: This applies only if the facility provides vocational evaluation.</p>
159(3)(ii)	Records	<p>Does the written evaluation include the employment of the client?</p> <p>Explanation: This applies only if the facility provides vocational evaluation.</p>
159(3)(iii)	Records	<p>Does the written evaluation include the vocational interests of the client?</p> <p>Explanation: This applies only if the facility provides vocational evaluation.</p>
159(3)(iv)	Records	<p>Does the written evaluation include the client's level of personal and social adjustment?</p> <p>Explanation: This applies only if the facility provides vocational evaluation.</p>
159(3)(v)	Records	<p>Does the client's current vocational evaluation include the client's work attitude?</p>

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REGULATION NUMBER	INSPECTION SOURCE	REGULATION
		Explanation: This applies only if the facility provides vocational evaluation.
159(3)(vi)	Records	Does the client's current vocational evaluation include the client's fatigue levels? Explanation: This applies only if the facility provides vocational evaluation.
159(3)(vii)	Records	Does the written evaluation include the client's ability to receive, retain, and carry out instructions? Explanation: This applies only if the facility provides vocational evaluation.
159(3)(viii)	Records	Does the written evaluation include recommendations for specific areas of training or placement?
159(3)(viii)	(cont'd)	Explanation: This applies only if the facility provides vocational evaluation.
159(4)	Records	Is there documentation in the client's record that the client and the client's parent, guardian or advocates, as applicable, are informed of the results of the results of the evaluation? Explanation: This applies only if the facility provides vocational evaluation.
159(4)(i)	Records	Is there a signed statement that the client and the client's parent, guardian or advocate, as applicable, are informed of the results of the evaluation? Explanation: This applies only if the facility provides vocational evaluations.
159(4)(ii)	Records	Is there a signed statement in the client's record that the client and the client's parent, guardian or advocate, as applicable, are informed of the results of the evaluation?

VOCATIONAL FACILITIES LICENSING INSPECTION INSTRUMENT

REGULATION NUMBER	INSPECTION SOURCE	REGULATION
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Explanation: This applies only if the facility provides vocational evaluations.