

Name of Legal Entity: _____ Date of Inspection: _____

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

Address of Facility: _____ County: _____

Total Number of Rooms: _____ Bathrooms: _____ Toilets: _____ Sinks: _____

Person In Charge: _____ Signature & Time: _____

Circle the appropriate response to the regulation based on the characteristics of the location under review.

(C) Compliance – There were no violations cited for the regulation. **(V)** Violation- It was found that the location is not in compliance with the regulation. **(NA)** Non Applicable - The citation is not measured since, it is not a characteristic of the home (i.e. the home does not have a dishwasher, therefore citations 75a3, 75a4, 75a5 would be marked NA.)

GENERAL REQUIREMENTS

11	C	V	NA	Chapter 20
14a	C	V	NA	Occupancy Permit
14b	C	V	NA	Ann. Verification on File
15a	C	V	NA	Shelter / Handicapped Certif.
15b	C	V	NA	Min. Wage Cert.
15c	C	V	NA	Both Certificates
16	C	V	NA	Public Eat & Drink License
17	C	V	NA	Statement of Purpose
18a	C	V	NA	U.I. Reporting – 24hrs.
18b	C	V	NA	U.I. Reporting - Weekends
19a	C	V	NA	Abuse
19b	C	V	NA	Abuse Report 24hrs.
19c	C	V	NA	Investigate/Report/Changes
19d	C	V	NA	Report to Law Enforcement
20	C	V	NA	Accident Prevention Policy
21a	C	V	NA	Discrimination, Civil Rights
21b	C	V	NA	Civil Rights Policy
21b1	C	V	NA	Nondiscrim. Serv./Admission
21b2	C	V	NA	Phys. Access & Accommodations
21b3	C	V	NA	Lodge Civil Rights Complaints
21b4	C	V	NA	Orient. On Rights
22a	C	V	NA	Governing Body
22b	C	V	NA	No Financial Benefits
22c	C	V	NA	Conflict of Interest
22d	C	V	NA	Quarterly Meeting
22e	C	V	NA	Final Reports – Rev./Approve
22f	C	V	NA	An. Prog. Report – Rev./Appr.
23	C	V	NA	Sound & Ethical Practices

STAFFING

32a	C	V	NA	CEO Employed, Designee
32b1	C	V	NA	CEO - Admission/Discharge
32b2	C	V	NA	CEO - Safety of Clients
32b3	C	V	NA	CEO - Work Available
32b4	C	V	NA	CEO - Compliance with Regulations
32c	C	V	NA	CEO Qualifications
33a	C	V	NA	1:45 Program Specialist (PS)
33b1	C	V	NA	PS – Coordinate & Complete Assessment
33b2	C	V	NA	PS - Provide Assessment
33b3	C	V	NA	PS - Participated in ISP Development
33b4	C	V	NA	PS - Attend ISP Meeting
33b5	C	V	NA	PS - Plan Lead
33b6	C	V	NA	PS - Review ISP
33b7	C	V	NA	PS - Report Content Discrepancy
33b8	C	V	NA	PS - Implement ISP as written
33b9	C	V	NA	PS - Supervise, Monitor, Evaluate
33b10	C	V	NA	PS - Review, Sign, Date Monthly
33b11	C	V	NA	PS - Report Changes to Team
33b12	C	V	NA	PS - Review ISP w/ Ind.
33b13	C	V	NA	PS - Document Review of ISP
33b14	C	V	NA	PS - ISP Review to Team
33b15	C	V	NA	PS - Option to Decline
33b16	C	V	NA	PS - Recommend Revision
33b17	C	V	NA	PS - Coordinate Services Prov.
33b18	C	V	NA	PS - Coordinate Train. of DSW
33b19	C	V	NA	PS - Develop & Implem. Prov. Services
33c	C	V	NA	PS Qualifications
34a	C	V	NA	1 Production Manager (PM)
34b	C	V	NA	PM Responsibilities
34c	C	V	NA	PM Qualifications
35a	C	V	NA	1:15 Floor Supervision

STAFFING CONT ' D

35b	C	V	NA	Floor Sup Present
35c	C	V	NA	Floor Sup Responsibilities
35d	C	V	NA	Floor Sup Qualifications
36a	C	V	NA	1:10 Trainer
36b	C	V	NA	Trainer Responsibilities
36c	C	V	NA	Trainer Qualifications
37a	C	V	NA	1 Vocational Eval.(VE)
37b	C	V	NA	VE Responsibilities
37c	C	V	NA	VE Qualifications
38a	C	V	NA	PS & Floor Sup – 10+
38b	C	V	NA	Qualifications – 2 Staff
39a	C	V	NA	2 Staff Present – 10+
39b	C	V	NA	1 Staff Present – 10-
39c	C	V	NA	PS Qualifications – 20+
39d	C	V	NA	Unsupervised – if in ISP
39e	C	V	NA	Staff Qual./Ratio as in ISP
39f	C	V	NA	Unsupervised For Convenience
40a	C	V	NA	New Staff Orientation
40b	C	V	NA	24 Hrs. Staff Training
40c	C	V	NA	Training Records

PHYSICAL SITE

51	C	V	NA	Handicap Accommodations
52a	C	V	NA	80 Sq. Ft./Ind. – heavy work
52b	C	V	NA	60 Sq. Ft./Ind. – light work
52c	C	V	NA	Measurements
52d	C	V	NA	Separate Space
53	C	V	NA	Outside Walls - Hazards
54	C	V	NA	Combustible Materials
55a	C	V	NA	Trash Removed Weekly
55b	C	V	NA	Insects/Rodents
56	C	V	NA	Hot & Cold Water
57	C	V	NA	Indoor Temperature 65° - 90°
58	C	V	NA	Telephone
59	C	V	NA	Emergency Numbers Posted
60a	C	V	NA	First Aid Area
60b	C	V	NA	First Aid Equipment
60c	C	V	NA	First Aid Access to Staff
60d	C	V	NA	First Aid Contents
61	C	V	NA	Surfaces free of Hazards
62	C	V	NA	Sanitary Conditions
63	C	V	NA	Adequate Lighting
64	C	V	NA	Well Secured Handrails

PHYSICAL SITE (CONT'D)

65	C	V	NA	Stairs – Non-Skid Surfaces
66	C	V	NA	Landings
67	C	V	NA	Conditions Safe & Sanitary
68	C	V	NA	Hazardous Equip. Guards & Safe
69	C	V	NA	Protective Equip. Worn
70	C	V	NA	Equip. Special Signals
71a	C	V	NA	Ventilation
71b	C	V	NA	Toxic fumes/dust/odor
72a	C	V	NA	Aisles Unobstructed
72b	C	V	NA	Work Aisles 36 In. Wide
72c	C	V	NA	2 Staff Present – 10+
73	C	V	NA	Elevator Approved
74a	C	V	NA	Handicap Lavatories
74b	C	V	NA	1:30 Toilet Ratio
74c	C	V	NA	Men & Women Separate La
74d	C	V	NA	Lavatories Required Equip.
75a1	C	V	NA	Food Protection & Storage
75a2	C	V	NA	Food Temps
75a3	C	V	NA	Dishwasher for all Dishes
75a4	C	V	NA	Dishwasher Temp
75a5	C	V	NA	Dishwasher used per Instructions
75b	C	V	NA	Dining Area
75b1	C	V	NA	Dining Area Clean
75b2	C	V	NA	Dining Area – Tab & Chairs

FIRE SAFETY

81	C	V	NA	Unobstructed Exits
82(a)	C	V	NA	Emergency Evacuation Procedure
82(b)	C	V	NA	Fire Safety Inspection Or Notification
83(a)	C	V	NA	Operable Fire Alarm
83b	C	V	NA	Fire Alarms Checked Monthly, Doc.
83c	C	V	NA	Notifications For Repair 24 Hrs., Doc.
84a	C	V	NA	10 ABC Fire Extinguishers
84b	C	V	NA	Fire Extinguisher - 100 Ft.
84c	C	V	NA	10B Fire Extinguisher - Kitchen
84d	C	V	NA	Under 45 lbs. - Mounted
84e	C	V	NA	Over 45 lbs. – Wheeled Unit
84f	C	V	NA	Fire Extinguisher - Accessible
84g	C	V	NA	Fire Extinguisher – Inspection /Approv
85a	C	V	NA	Fire Drill every 90 days, Doc.
85b	C	V	NA	Fire Drills – Diff Times/Loc.
85c	C	V	NA	Fire Drills – Clients Evacuation
85d	C	V	NA	Fire Alarms Tested
86	C	V	NA	Signs, Exits marked, tactile, ¾"
87	C	V	NA	Fire Safety Training, Document.

HEALTH

101	C	V	NA	Communicable Disease
102	C	V	NA	First Aid Tech. Staff Cert, Doc.
103	C	V	NA	Emergency Medical Plan
103 1	C	V	NA	Source of Health Care
103 2	C	V	NA	Method of Transportation
103 3	C	V	NA	Staffing Plan
104 1	C	V	NA	Contact info - Emerg. Contacts
104 2	C	V	NA	Contact info – Health Care
104 3	C	V	NA	Consent for Medical Treatment
104 4	C	V	NA	Med Info – Diag/Treatment

ADMISSION AND PLACEMENT

111a	C	V	NA	Preadmission Interview
111b	C	V	NA	Notified 30 days, Reasons Y/N
111c	C	V	NA	Kept on File for 3 years
112a	C	V	NA	Client Orientation, Doc. Record
112b	C	V	NA	Written Info, Signed, Record
113a	C	V	NA	Arrangemnt for Placement Serv.
113b	C	V	NA	Placement Serv. – Staff Resp.
113c1	C	V	NA	Placement Serv. – Employ. Info
113c2	C	V	NA	Placement Serv. - Notifications
113c3	C	V	NA	Placement Serv. – Client Prep
113c4	C	V	NA	Placement Serv. – Client’s Ability
113c5	C	V	NA	Placement Serv. – Follow up
113d	C	V	NA	Doc. – Competitive Employment
113e	C	V	NA	Placement Serv. - Components

CLIENT RECORDS

121	C	V	NA	Records at Facility, 3 yrs.
122	C	V	NA	Confidential & Locked
123	C	V	NA	Name, sex, DOB, etc.
124 1	C	V	NA	Name & Address
124 2	C	V	NA	Name, Phone Num. of Phys.
124 4	C	V	NA	Written Consent
124 5	C	V	NA	Physical Exam
124 6	C	V	NA	Assessment
124 7	C	V	NA	Voc. Evaluation
124 8i	C	V	NA	Invite – Initial Meeting
124 8ii	C	V	NA	Invite – Ann. Update
124 8iii	C	V	NA	Invite – ISP Review Meeting
124 9i	C	V	NA	Sign Sheet – Initial ISP
124 9ii	C	V	NA	Sign Sheet – Ann. Update
124 9iii	C	V	NA	Sign Sheet – ISP Review
124 10	C	V	NA	Current ISP
124 11	C	V	NA	Doc of ISP review/revise

CLIENT RECORDS (CONT'D)

124 11i	C	V	NA	ISP Review Sign Sheet
124 11ii	C	V	NA	Recs to revise ISP
124 11iii	C	V	NA	ISP Revision
123 11iv	C	V	NA	Notice PT may decline
123 11v	C	V	NA	Req. from PT not to rec.
124 12	C	V	NA	Restrictive Procedures
124 13	C	V	NA	Unusual Incident Reports
124 15	C	V	NA	Psychological Evaluation
124 16	C	V	NA	Vocational Evaluations
125	C	V	NA	Record Policy
126a	C	V	NA	Client/Parent/Guard. Access
126b	C	V	NA	Facility Responsible
127	C	V	NA	Written Consent – Release Info

HANDICAPPED EMPLOYMENT

142	C	V	NA	Applicable Requirements
143a	C	V	NA	Work Perform. Revise Comp.
143b1	C	V	NA	WPR – Quality & Control
143b2	C	V	NA	WPR – Changes in Prod.
143b3	C	V	NA	WPR – Up Move / Comp. Employ
143b4	C	V	NA	WPR – Work related prob.
143c	C	V	NA	WPR – Copy Provided
144	C	V	NA	1:20 Floor Ratio

ASSESSMENT

151a	C	V	NA	Initial – 1 year PR/60 days
151b	C	V	NA	PS Recommend Service
151c	C	V	NA	Assessment
151d	C	V	NA	PS Sign & Date
151e1	C	V	NA	Strengths, Needs, Pref.
151e2	C	V	NA	Likes, Dislikes, Interests
151e3i	C	V	NA	Acquisition of Vocational Skills
151e3ii	C	V	NA	Communication
151e3iii	C	V	NA	Personal Adjustment
151e3iv	C	V	NA	Needs with, w/o assist
151e4	C	V	NA	Supervision
151e5	C	V	NA	Ability to Self-Administer Medications
151e6	C	V	NA	Avoid Poisons
151e7	C	V	NA	Know of Heat Sources
151e8	C	V	NA	Evacuation in Fire
151e9	C	V	NA	Documentation Of Disability
151e10	C	V	NA	Lifetime Med.
151e11	C	V	NA	Psych Evaluation
151e12	C	V	NA	Rec. Training, Etc.

ASSESSMENT

151e13i	C	V	NA	Motor & Comm. Skills
151e13ii	C	V	NA	Socialization
151e13iii	C	V	NA	Vocational Skills
151e13iv	C	V	NA	Assess 30 days prior
151f	C	V	NA	Assess 30 days prior

ANNUAL UPDATE / RENEWAL ISP

152a	C	V	NA	Plan Lead
152b	C	V	NA	Lead Develop/Implement
152c	C	V	NA	Initial Plan Developed
152d1	C	V	NA	Likes/Dislikes/Interests
152d2	C	V	NA	Revise Assessment
152d3	C	V	NA	Functional Skills
152d4	C	V	NA	Communication
152d5	C	V	NA	Personal Adjustment

ISP CONTENT

153 1	C	V	NA	Services & Outcomes
153 2	C	V	NA	Services to Increase Skills
153 3	C	V	NA	Current Status & Eval. Method
153 4	C	V	NA	Supervision
153 5	C	V	NA	S.E.E. Plan
153 6i	C	V	NA	Restrictive Procedure Plan
153 6ii	C	V	NA	Assess Causes of Behavior
153 6iii	C	V	NA	Protocol for Intervention
153 6iv	C	V	NA	RP Timeline
153 7i	C	V	NA	Advance in Voc. Programs
153 7ii	C	V	NA	Advance in Competitive Employ.

ISP PARTICIPATION

154a	C	V	NA	Team Participation
154a1i	C	V	NA	Individual
154a1ii	C	V	NA	PS for Fam Living Specialist
154a1iii	C	V	NA	Direct Service Worker
154a1iv	C	V	NA	Others Ind. Chooses
154a2i	C	V	NA	Medical Professional
154a2ii	C	V	NA	Additional DSW
154a2iii	C	V	NA	Parent/Guardian/Advocate
154b	C	V	NA	Min. 3 members
154c	C	V	NA	Sign & Date Attendance

ISP IMPLEMENTATION

155a	Implementation by Start
155b	Implemented as Written

ISP REVIEW & REVISION

156a	C	V	NA	Quarterly Review
156b	C	V	NA	PS/Ind. Sign/Date
156c1	C	V	NA	Monthly Review
156c2	C	V	NA	Entire ISP Review as app.
156c3	C	V	NA	Document Change in need
156c4i	C	V	NA	Deletion per Accomplishment
156c4ii	C	V	NA	Add an Outcome/Service
156c4iii	C	V	NA	Modify an Outcome/Serv.
156c5	C	V	NA	Revise Assessment
156d	C	V	NA	Quarterly Rev. to SC/Team
156e	C	V	NA	Notification to Decline Rev.
156f	C	V	NA	30Day Invite to Revision Meeting
156g	C	V	NA	Change Effective by Start
157	C	V	NA	Copies to team, 30 days

PROVIDER SERVICES

158a	C	V	NA	Home Provide Services
158b	C	V	NA	Home Provide Community Life
158c	C	V	NA	Services as Specified
158d	C	V	NA	Age Appropriate

VOCATIONAL EVALUATION

159 1	C	V	NA	Vocational Evaluation
159 2	C	V	NA	Copy of Evaluation in Record
159 3i	C	V	NA	Current Level of Voc. Function
159 3ii	C	V	NA	Employment Objective
159 3iii	C	V	NA	Voc. Interest of Client
159 3iv	C	V	NA	Level of Pers.& Soc. Adj.
159 3v	C	V	NA	Client Work Attitudes
159 3vi	C	V	NA	Client Fatigue Level
159 3vii	C	V	NA	Ability to rec. Return & Carry out Instr.
1593viii	C	V	NA	Recomm. Area of Train. or Placement
159 4	C	V	NA	Informed of Results of Evaluation
159 4i	C	V	NA	Receipt of Evaluation
159 4ii	C	V	NA	Evaluation In Client Record