

PROGRAM ACTIVITIES

LEVEL 2, 3 AND 4

- 1.1 Facility has a written program design approved by the regional center. [56013(a)]
(To be completed by Team Leader)
- 1.2 The activities and opportunities provided to each resident are consistent with program design. [56220(a) and 56051(a) (3)]
- 1.3 The activities and opportunities provided to each resident are consistent with IPP objectives. [56022(a) and 56051(a) (3)]
- 1.4 Residents participate in integrated age-appropriate activities either at the facility or in the community. [56013(a)]
- 1.5 Natural environments and materials are used in teaching skills to residents. [56013(a)]
- 1.6 The facility teaches skills and behaviors and provides opportunities to residents that are necessary for greater independence in the home or in the community. [56013(a)]
- 1.7 Residents are given the opportunity for recreation, social interaction and participation in community activities at least one time per week. [50510 and 56054(a)(3) and (5)]
- 1.8 The facility arranges for or provides residents with local transportation other than that which is required for attendance at day programs or schools. [56064(a)(4)]
- 1.9 Over a one-year period each resident demonstrates having acquired or maintained reasonable progress toward achieving skills that were identified as objectives on the IPP. [56022]
- 1.10 Staff makes an effort to establish positive relationships with residents' family members (56013)
- 1.11 Facility operates within the limitations of its license (56004)

- 2.3 When an IPP needs to be modified, staff brings this to the attention of the regional center and participates in a revision. [56022(a) (1)]
- 2.4 All staff persons responsible for carrying out a particular IPP are familiar with its objectives and methods of implementation. [56038(a) (1B) (2) (3C)]
- 2.5 Training techniques are consistent with the principle of least restrictive method. [56054(a)(4)]
- 2.6 The facility administrator or designee is available at all hours in response to any emergency involving a resident. [56054]
- 2.7 Communication and interaction between staff and residents reflect respect and caring. [56054(a) (4)]
- 2.8 Staff members communicate with individual residents via communication methods which are appropriate for them. [56054(a)(4)]
- 2.9 Staff members have knowledge about legal requirements for reporting resident abuse. [56038(a)(1G)]
- 2.10 The facility has a sample staff schedule and observed staffing is consistent with staff schedule. [56013(a)(5)]

LEVEL 2 ONLY

- 2.11 The facility provides a basic staffing level of no less than one direct care staff person per six residents at all times when residents are under the supervision of facility. [56004(b)(2A)]

LEVEL 3 ONLY

- 2.11 The facility provides a basic staffing level of no less than one direct care staff person for every three residents at all times when residents are under the supervision of facility staff. [56004(b)(2)]

LEVEL 4 ONLY

- 2.11 The facility provides a basic staffing schedule seven days per week during the time the residents are awake and under the supervision of the facility as follows:

4A, 4B - one direct care staff for up to three residents in the facility; ...

- 2.13 Consultant services are provided in accordance to the description of services designed to enhance the capabilities of residents with severe deficits in self-help skills, severe impairment in physical coordination and mobility and severely disruptive or self-injurious behavior. [56040(b)]
- 2.14 Consultants are individuals eligible for vendorization in accordance to Title 17, California Code of Regulations, Chapter 3, and Subchapter 2: Sections 54344, 54346, and 54348. (see checklist) [56040(c)(1-3)]
- 2.15 Consultants meet the qualifications specified in the facility's program design. [56040(d)]
- 2.16 All staff members responsible for carrying out a particular treatment plan objective are familiar with its objectives and methods of implementation. [56038(a)(2)]

RESIDENT AND THEIR RIGHTS

LEVEL 2, 3 AND 4

- 3.1 A statement of residents' rights is posted where it is easily accessible to residents and visitors. The statement includes a description of the procedures to be followed and lists the name, address and phone number of the Clients' Rights Advocate. [50520 and 56054(a)(3)]
- 3.2 Each resident is given instruction in his or her rights via communication methods which are appropriate for that resident. [56054(a)(3)]
- 3.3 There is no denial of residents' rights unless the facility follows the procedures specified in law (Title 17, Section 50530) for documenting, obtaining approval, and restoring rights. [50530, 50532, and 56054(a)(3)]
- 3.4 All residents are free from physical, sexual and emotional abuse. [56053(a)(3)]
- 3.5 At the time of admission and annually thereafter, the facility's house rules are explained to each resident or his/her representative via communication methods most appropriate. Explanation of these rules is documented as a Client Note. [50520, 56019(a)(2), and 56054(a)(3)]
- 3.6 At the time of admission, resident or his/her representative is informed of grievance procedure, via communication method most appropriate. This is documented as a Client Note. [56019(a)(2)]

- 3.10 Residents wear own clothing that is appropriate to their physical condition, age and to the climate. [50510 and 56054(a)(3)]
- 3.11 Residents are allowed to use bedrooms as places to be alone. [50510 and 56054(a)(3)]
- 3.12 Residents have access to all common areas of the residence except controlled storage areas. [50510 and 56054(a)(3)]

HEALTH AND SAFETY

LEVEL 2, 3 AND 4

- 4.1 Medical and dental evaluations and specialty care are obtained at regular intervals, depending upon each resident's age and condition, or as specified on the IPP. [56022(d) and 56054(a)(4)]
- 4.2 Residents who require adaptive devices (eyeglasses, hearing aids, dentures, wheelchairs) are given assistance in securing and maintaining these devices. [56054(a)(4)]
- 4.3 The regional center is notified promptly if a resident has been prescribed medication for behavior control. [56053]
- 4.4 The facility maintains a record of centrally stored medications (Licensing's Centrally Stored Medication and Destruction Record) which includes client name, physician, drug name, strength and quantity, date filled, prescription number, name of issuing pharmacy, expiration date, number of refills and instructions (if any). [56054(a) and T.22 80075]
- 4.5 Medication is kept in a safe and locked place that is not accessible to persons other than employees responsible for the supervision of the centrally stored medication. [56053 and T.22 80075]
- 4.6 Medication is dispensed as prescribed [56054 (a)(1)]
- 4.7 Residents are properly supervised during self-administration of medication. [56054(a)(1)]
- 4.8 Each resident displays good hygiene with regard to skin, nails, teeth, hair and clothing. [56054(a)(5)]
- 4.9 Residents are free from the presence of an individual exhibiting aggressive or assaultive behavior which is life-threatening to self or others. [56053(a)(5)]

- 4.12 All kitchen, food preparation and storage areas are kept clean, free of litter and rubbish and measures are taken to keep such areas free of rodents and other vermin. [56054(a) (1) and (5); T.22 80076]
- 4.13 All food is protected from contamination. [56054(a)(1) and T.22 80076]
- 4.14 All food is safe and of the quality and quantity necessary to meet the needs of the residents. [56054(a) (1) and T.22 80076]
- 4.15 Snacks are provided to all residents unless limited by dietary restrictions by a physician. [56054(a)(5) and T.22 80076]
- 4.16 Modified diets prescribed by a resident's physician as a medical necessity are provided. [56053(a)(4)]
- 4.16 The facility is equipped with first aid supplies and a current first aid manual. [56054(a) (1)]
- 4.17 The facility provides fire/disaster plan training for staff and residents, and conducts and documents these at least once every six months. [56054 (a) (1) 80023]
- 4.18 Vehicles used for transporting residents are properly maintained, equipped with seat belts and, if applicable, with car seats for children. [56054(a)(1)]

PHYSICAL ENVIRONMENT

LEVEL 2, 3 AND 4

- 5.1 The facility conditions do not pose a threat to the health and safety of any resident. [56053(a)(1)]
- 5.2 The facility is furnished, decorated and arranged to provide a homelike noninstitutional atmosphere including personalization of bedrooms [56013]
- 5.3 Each resident is provided with a closet space and a dresser or drawer space for his/her exclusive use. [50510 and 56054(a)(4)]
- 5.4 Each resident is provided with a comfortable bed with clean linens, mattress pad, blankets and a pillow. [56054(a)(3) and (5)]

- 5.9 Residents eat in the dining room or eating areas typically used by family or staff members. [56013(a) and 56054(a)(3)]

RESIDENT MONIES

LEVEL 2, 3 AND 4

- 6.1 The record of any resident's money handled by the facility includes documentation of:
- a) each resident's income;
 - b) disbursements made to the resident; and
 - c) expenditures made for the resident by facility staff. [56054(a)(7) and T.22 80026]
- 6.2 When cash is given to a resident, he or she signs or places his or her mark on a log specifying the cash amount. [56054(a)(7) and T.22 80026]
- 6.3 Receipts are retained for expenditures made for the resident by facility staff. [56054(a)(7) and T.22 80026]
- 6.4 A resident's money is used only by or for that resident and are appropriate expenditures. [56054(a)(7) and T.22 80026]
- 6.5 Residents' funds are kept separate from facility funds. [56054(a)(7) and T.22 80026]

RESIDENT RECORDS

LEVEL 2, 3 AND 4

At the facility:

- 7.1 Resident records are kept confidential in accordance with California Welfare and Institutions Code provisions. [56058(a) and WIC 4515]
- 7.2 A document file is maintained at the facility for each resident. The file includes, but is not limited to, the following information: resident's facility name and vendor number, social security number, recent picture, and physical description; the name, address and phone number of guardian or family member; dates of major illnesses; a record of medical/dental treatments; inoculation records; a record of allergies; an admission physical and diagnosis; a TB clearance; and the admission agreement; current IPP; Psychological and/or social evaluation; Client Profile or Annual Progress Report; signed consent for release of information (if applicable) and:
- . Client Notes;
 - . Quarterly Reports or Semi-Annual Progress Report; and
 - . Special Incident Reports.

7.5 Semi-Annual or Quarterly Reports provide a detailed account of resident's progress toward achievement of each IPP objective. Report is signed and dated by the person reporting. [56026(b)]

LEVEL 4 ONLY

7.6 Quarterly Report includes:

- a) summary of data collected for each client;
- b) identification of barriers to client progress and;
- c) actions taken in response to barriers. [56026(c)]

7.7 Quarterly Report is submitted to SC within 30 days of end of quarter. [56026(d)]

LEVEL 4 ONLY

7.8 The residents have on file a signed agreement documenting consent to physical containment, only when necessary [56054 (a)(3)]

7.9 The facility develops a treatment plan for each resident. [56013(d)]

7.10 The treatment plan relates to the skills, deficits, or behaviors that make the resident eligible for level 4 services. [56013(d)]

7.11 A treatment plan is developed within 30 days of the resident's admission to the facility. [56013(d)]

7.12 Objectives in the treatment plan are measurable and time limited. [56013(d)]

7.13 Treatment plan objectives that are related to behavioral excesses or deficits are based on an assessment that includes reference to antecedents, consequences, and functions of behavior. [56013(d)]

7.14 The treatment plan includes specific methods to be used for the accomplishment of specific objectives. [56013(d)]

FACILITY FILES

LEVEL 2, 3 AND 4

8.2 Personnel files contain:

- . Employee name;
- . Date of employment;
- . Home address and phone number;
- . Statement signed that they are at least 18 years old;
- . Past experience;
- . Educational background; and
- . Current Driver's License (if necessary)
- . Job duties. [56059(c)(4)] [T.22 80066]
- . Fingerprint submission and clearance as required by Title 22
- . Health/TB Clearance (as required by Title 22)
- . First Aid and CPR
- . Water Safety Certificate (if necessary)

TRAINING

LEVEL 2, 3 AND 4

- 9.1 Staff members receive on-the-job training as necessary to implement resident IPP's. [56038(a) (2)]
- 9.2 New staff members complete an on-site orientation within 40 hours of working with residents. The orientation addresses the following:
- . Facility's program design;
 - . Resident's IPPs;
 - . Clients' Rights Regulations;
 - . Assistance to residents with prescribed medications;
 - . Health and emergency procedures, including fire safety; and
 - . Identification and reporting of resident abuse. [56038(a) (1)]
- 9.3 Direct support staff have completed the first and second year DSP course required. [56033 (a)(1) or (2)]
- 9.4 Direct support staff complete additional training required by Section 56032 (d), if necessary [56033]
- 9.5 Facility Administrator has current CCL certification (GH, ARF, RCFE)

LEVEL 2 ONLY

- 9.6 The facility administrator and/or program director completes at least eight (8) hours per year of continuing education in one or more of the following areas as they relate to the

- 9.7 Direct care staff members complete at least eight (8) hours per year of continuing education in one or more of the following areas as they relate to planning and implementation of residential services for persons with developmental disabilities:**
- . Client services as described in program design;
 - . Promotion of clients' rights, health, safety, and social and physical integration; and
 - . The ID Team process.
- [56038(a)(3)(b)]

LEVEL 3 AND 4 ONLY

- 9.8 The facility administrator and/or program director completes at least twelve (12) hours per year of continuing education in one or more of the following areas as they relate to the administration and management of residential services for persons with developmental disabilities:**
- . Client services as described in program design;
 - . Promotion of clients' rights, health, safety and social and physical integration; and
 - . The ID Team process.
- [56037(a) (c) (2) (d) (2)]

- 9.9 Direct care staff members complete at least twelve (12) hours per year of continuing education in one or more of the following areas as they relate to planning and implementation of residential services for persons with developmental disabilities:**
- . Client services as described in program design;
 - . Promotion of clients' rights, health, safety, and social and physical integration; and
 - . The ID Team process.
- [56038(a) (3)(c)(d)(3)]

LEVEL 4 ONLY

- 9.10 Administrator/Direct care staff complete either P.A.R.T. or C.P.I. within 60 days of providing care to clients and maintain such certification current [56054 (a) (1)]**