South Central Los Angeles Regional Center

for persons with developmental disabilities, inc.

2500 S. Western Ave., Los Angeles, CA 90007 (213) 744-7000 fax (213) 743-3026

ANNUAL ADULT DAY PROGRAM MONITORING TOOL

Review Date: Vendor #:		Part Two of the Monitoring:		
		Service Code:		
Name:		Administrator:		
Telephone #:		Name Of QA:		
Address:		License:		
Capacity:	Vacancy:	Adult:	Children:	
Type of Visit:		Begin:	End:	
Ambulatory #		□ Non-Ambulatory #		
Type Of Program:		Transportation As An Additional Component:		
Other:				
Program Hours:	Begin:	End:		
Office Hours:	Begin:	End:		

- 1. Community-based day programs vendors shall adopt and review, annually, a written internal grievance procedure for clients to W & I Code, section 4705
- 2. Licensed subcontractors are used to provide a portion of the direct service to consumers with unique needs with written approval of Regional Center

PROGRAM DESIGN [Title 17, 56712]

The program description shall include:

- 3. (a) the purpose and goals of service
- 3. (b) anticipated client outcome stated in measurable terms
- 3. (c) program curriculum pursuant to Title 17, 56742 or 56764
- 3. (d) description of training locations (centered-based, home, natural environment)
- 3. (e). client attendance policy (notify RC on client's 5th day of unplanned absence)
- 3. (f). staffing ratio pursuant to Title 17, 56756 or 56772
- 3. (g) direct service hours including weekly schedule

- 3. (h). staff training plan pursuant to Title 17, 56726, and 56774
- 3. (i) client entrance/exit criteria pursuant to Title 17, 56714 and 56746
- 3. (j) evaluating procedures used to determine client progress
- 4. A rate adjustment request which results from a program design change is submitted to RC prior to Dec. 1 of the current calendar year.

CLIENT PLACEMENT AND FUNDING PROCEDURES (Title 17, 56716, and 56718)

- 5. There is documentation that the client is making reasonable progress toward IPP objectives and should therefore maintain continued placement.
- 6. Client termination procedures are maintained pursuant to Title 17, 56718

CLIENT IPP DOCUMENTATION (Title 17, 56730)

- 7. The vendor shall provide documentation regarding IPP objectives for which the vendor is responsible within 30 days of receipt.
- 8. Written semiannual progress reports are submitted to RC/RSS Family.

PERSONNEL REQUIREMENTS (Title 17, 56722 and 56724)

- 9. Vendor provides a current job description for all personnel.
- 10. Each staff occupies no more than the equivalent of one full-time position.
- 11. Volunteers do not replace paid staff.

STAFF TRAINING (Title 17, 56726)

- 12. A written new employee orientation is implemented within two weeks of hire.
- 13. Ongoing staff training is provided at least annually.

PROGRAM RECORDS (Title 17, 56728)

- 14. Employee time sheets specifying each employee's shift hours
- 15. Employee payroll records
- 16. Client attendance, maintained daily, indicating the date of service.
- 17. All records used to complete the DS 1897 for rate determination.
- 18. All written approvals from RC or the Department required by these regulations (i.e. rate letters, vendorization letter).
- 19. Records are maintained for a period of five (5) years.

CLIENT RECORDS (Title 17, 56730)

The client case file shall include

- 20. (a) emergency and personal identification information
- 20. (b) a medical history including medications, allergies, medical conditions, infectious, contagious or communicable conditions, nutritional needs, immunization records.

20. (c) medical, psychological and social evaluations
20. (d) authorization for emergency medical treatment
20. (e) client rights
20. (f) IPP
20. (g) special incident reports
20. (h) case progress notes
20. (i) records are maintained on site for five years in a locked secured place after client termination
PROGRAM EVALUATION (Title 17, 56732)
21. (a) purpose of the evaluation
(a) purpose of the evaluation
(b) type of data to be collected and used
(c) frequency of data collection
(d) data collection and analysis methods
(e) description of distribution, and actions taken as a result of the evaluation
(f) written summary of evaluation is forwarded to RC, user RC's and DDS
PROGRAM CURRICULUM (Title 17, 56742 and 56764)
22. Activity Center, Adult Development Center, or Behavior Management Program is center-based and/or natural environments and has at least one of the training components specified:
Self-Advocacy
Self-Advocacy Employment Training
Employment Training
Employment Training Community Integration
Employment Training Community Integration Self Care 23. Social recreation program provides community integration and self-advocacy training as they relate to
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(m) home and community safety or provide supports necessary for a client to maintain a self-sustaining, independent living situation in the community.
25. Infant Development Program is center-based and includes intervention in all the following:
(a) physical development (b) cognitive development
(c) language and speech development
(d) psycho-social development
(e) self-help and feeding
STAFFING RATIO (Title 17, 56756 and 56772)
26. For activity centers, adult development centers, behavior management programs, and social recreational programs, the vendor may supplement direct care staff by one staff person, six hours/day, for every 10 non-mobile (persons confined to wheelchairs or gurneys) clients attending. A written request for supplemental staff has been submitted to RC and approved by DDS
27. Activity center direct care ratio is
(a) 1:8 (b) 1:7 (one two hr session/wk) (c) 1:6 (two two-hr sessions/wk) (d) Center is providing community integration or employment training in groups of 3 or less
28. Adult development center direct care ratio is
(a) 1:4
(b) 1:3 (two two-hr sessions/wk)
(c) Center is providing community integration or employment training in groups of 3 or less
29. Behavior management program direct care ratio is 1:3
30. Social recreation program direct care ratio is 1:10
31. Independent Living Program and Supported Living Program direct care ration is 1:1 / 1:2 / 1:3
32. Infant development program direct care ratio is $1:1 / 1:2 / 1:3$
ADDITIONAL REQUIREMENTS
33. The program maintains adequate liability insurance coverage
34. The program has a first aid and emergency disaster plan
35. The program's license is current and posted
36. Medication location is locked. Medication administration procedure (log sheet) is completed daily. Destruction log is completed for discontinued medications.
37. Facility has adequate kitchen and storage area for lunches.

QUALITY ENHANCEMENT:

Name of Supervisor: Kim Bowie Other If you are cited your signature below indicates your awareness of your appeal rights and acknowledgement of the meaning of these inadequacies. Corrections must be made within established time frame noted above. (56056) QAS has reviewed documentation with vendor SCLARC Facility Monitor Signature: Date: Telephone: Facility Representative Signature:

COMMENTS:

Facility Representative Initials if received Appeal Process: