

Developmental Services
Adult Day Training (ADT) Services
 Monitoring Checklist

Provider Number: _____

Provider Name: _____

Review Date: _____


Provider Address: _____



Reviewer Name: _____

District: _____

Location: _____

- Agency Provider Solo Provider Onsite Review Desk

Cite		Met	Not Met	N/A
<p>Explanation of Monitoring Tool Symbols/Codes</p> <p> Alert: Denotes a critical standard or cite relating to health, safety and rights. A deficiency requires a more intense corrective action and follow-up cycle.</p> <p>“W” Weighted Element: A “W” followed by 2.0 or 4.0 in the Cite column denotes elements that have a greater impact on the monitoring score.</p> <p>“R” Recoupment: An “R” in the Cite column denotes an element that is subject to recoupment of funds by the State if the element is “Not Met.”</p>				
<p>Standard: The provider successfully supports individuals to achieve desired goals and needed services through individualized training programs and meaningful daily routines and activities.</p>				
1 W2.0	The provider develops an individualized implementation plan (IP) for all consumers.			
2 W2.0	An individualized implementation plan (IP) is developed under the direction of the consumer.			
3	The IP identifies goal(s) and needs from the individual’s support plan and other pertinent sources appropriate to the individual.			
4	The IP identifies strategies and methods to assist the individual in meeting goal(s) as well as the data collection system to be used to assess success and achievement.			
5 NEW	The implementation plan includes a description of methods that the provider will use to ensure the individual makes an informed choice concerning the types of work and meaningful day activities (type of activities).			

Cite		Met	Not Met	N/A
6 W2.0	The IP is reviewed periodically to determine whether progress is being made and is updated to reflect new interests, goals, needs, or strategies to promote meaningful progress.			
7	The provider is tracking and acting on an individual's progress or lack of progress.			
8	The provider has taken action on the results reported through the person centered review process. <i>[Note: If there have been no person-centered reviews conducted with individuals for which this provider renders services and supports, score this element as "Not Applicable."]</i>			
As appropriate to the individual goals, needs, and interests:				
9	Services stress training in activities of daily living.			
10	Services stress training in self-advocacy.			
11	Services stress training in adaptive and social skills.			
12	Services are age and culturally appropriate.			
13 W2.0	Training activities and routine are meaningful to the individual and consistent with the support plan and approved cost plan.			
14	Off site ADT services teach specific job skills and other services directed at meeting specific employment objectives.			
15 W2.0	Facility-based and off-site programs pay individuals receiving ADT for performance of productive work; pay is commensurate with members of general work force doing similar work.			
16 W2.0	At least annually, providers conduct an orientation informing individuals of supported employment and other competitive employment opportunities in the community.			
Standard: The provider and all of the provider's staff are qualified to provide Adult Day Training services.				
17  W4.0	Level two background screenings are complete for all direct service employees.			
18  W4.0	All employees undergo background re-screening every 5 years.			
19	Managers or directors have no full time responsibility for providing services.			
20	Program director has bachelor's degree and two years related experience.			
21	Instructors (supervisors) have associate's degree and two years experience in related field.			
22	Direct service staff work under appropriate supervision.			

Cite		Met	Not Met	N/A
23 W2.0	Staffing ratio does not exceed ten (10) individuals per direct service staff for facility-based programs.			
24	Direct service staff must be at least 18 years of age and has a high school diploma or equivalent.			
Standard: The provider and the provider's staff meet training requirements for delivery of Adult Day Training services.				
25	The provider attends mandatory meetings and training scheduled by the Area office and/or Agency.			
26 W2.0	Independent vendors and agency staff receive training on responsibilities and procedures for maintaining health, safety and well being of individuals served.			
27	Independent vendors and agency staff receive training on medication administration and on supervising individuals in the self-administration of medication.			
28	Independent vendors and agency staff receive training on required documentation for service(s) rendered.			
29 NEW	Direct service staff has received training in the Agency's Direct Care Core Competencies Training.			
30	Independent vendors and agency staff receive training on responsibilities under the Core Assurances.			
31	Independent vendors and agency staff receive training on responsibilities under the requirements of specific services offered.			
32	Independent vendors and agency staff receive training on use of personal outcomes to establish a person-centered approach to service delivery.			
33 W2.0	Independent vendors and agency staff receive training specific to the needs or characteristics of the individual as required to successfully provide services and supports.			
34	Proof of current training and certification is available for all staff in Cardiopulmonary Resuscitation (CPR).			
35	Proof of current training is available for all staff in AIDS and infection control.			
36 W2.0	Staff attends eight (8) hours of annual in-service training related to implementation of individually tailored services.			
37	Proof of required training in recognition of abuse and neglect to include domestic violence and sexual assault, and the required reporting procedures is available for all independent vendors and agency staff.			
Standard: Services are provided at an intensity and duration necessary for successful support of the individuals served.				

Cite		Met	Not Met	N/A
38	Services are rendered at a time mutually agreed to by the individual and provider.			
39 W2.0	In facility-based ADT individuals spend a minimum of four hours in specific training or program activities designed to meet individual needs and personal goals defined in the support plan(s).			
40	Services are provided in a designated adult day training center or other training sites in the community as agreed to by the individual and provider.			
41	Providers of incidental transportation comply with program requirements			
Standard: The provider maintains sufficient reimbursement and monitoring documentation to verify service delivery and to evaluate each individual's services and supports.				
<i>Note: Score based on the presence or absence of the required documentation.</i>				
42 R	Provider has at a minimum an individual implementation plan.			
43 R	The IP is developed, at a minimum, within 30 days of new service initiation, or within 30 calendar days of service authorization effective date when services are being continued.			
44	Provider has at a minimum supporting data (notes) to the implementation plan.			
45 R NEW	Provider has at minimum, copies of service log(s).			
46 R	Provider has at a minimum a monthly summary of an individual's progress toward achieving support plan outcomes for the period being reviewed.			
47 R	Provider has at a minimum an annual report.			
48	Provider has at a minimum results of the annual satisfaction survey.			
49	Provider has at a minimum performance data on the Projected Service Outcomes.			
Standard: Provider bills for services as authorized.				
50 R	ADT services are limited to the amount, duration and scope of the service described on the individual's support plan, current approved cost plan and service authorization.			
51 R	The provider bills for adult day training as defined and specified in the DS Waiver Services Medicaid Coverage and Limitations handbook.			

Cite		Met	Not Met	N/A
Standard: The provider meets projected service outcomes established for service delivery.				
52	The provider has established a systematic method to collect projected service outcome data.			
53	The provider reviews data periodically and corrective measures are put in place if the data indicates that the goal is not being achieved.			
54 W2.0	Individuals receiving services demonstrate an increase in abilities consistent with their support plan.			
55 W2.0	Individuals served who have a stated support plan goal to be employed in the community, have been provided with specific information, opportunities for exploration, and the necessary support to make progress towards this goal on supported employment or other competitive employment opportunities.			
56 NEW	Individuals served who have a stated support plan goal to be involved in the community in another type of arrangement such as volunteer work have been provided with specific information, opportunities for exploration, and necessary support to make progress towards the goal.			
57 W2.0	All Individuals served who have responded to the annual satisfaction survey are satisfied with the services based on the results or the provider has addressed any concerns raised during the survey			
58 W2.0	Individuals achieve goals on their support plan throughout the year			
59 W2.0	Individuals demonstrate freedom of choice, including being informed about rights and service options (i.e., more inclusive programs, supported employment, etc.).			

Cite		Met	Not Met	N/A
<p>If the provider is not rendering services to individuals that have problems with behavior such as those that follow, score the elements in this section Not Applicable.</p> <p>Types of Problems with Behavior:</p> <p>Actions of the individual which, without behavioral, physical, or chemical intervention</p> <ol style="list-style-type: none"> 1. Have resulted in self-inflicted, detectable, external or internal damage requiring medical attention or are expected to increase in frequency, duration, or intensity resulting in self-inflicted, external or internal damage requiring medical attention. 2. Have occurred or are expected to occur with sufficient frequency, duration or magnitude that a life-threatening situation might result, including excessive eating or drinking, vomiting, ruminating, eating non-nutritive substances, refusing to eat, holding one's breath, or swallowing excessive amounts of air. 3. Have resulted in external or internal damage to other people that require medical attention or are expected to increase in frequency, duration or intensity resulting in external or internal damage to other persons that requires medical attention. 4. Have resulted or are expected to result in major property damage or destruction. 5. Have resulted or are expected to result in arrest and confinement by law enforcement personnel 				
<p>Standard: Behavioral Services result in objective and measurable improvements in behavior that are consistent with the individual's outcomes.</p>				
60	When rendering services and supports to individuals identified as having problems with behavior, the provider is assisted by a qualified professional or professionals who meet the requirements in the Medicaid Handbook for the type of service the professional is providing.			
61	Behavior Service goal(s) are consistent with and relate directly to the individual's personal outcomes/goals.			
62	The individual has a written, individual plan developed by a certified or licensed professional that clearly identifies what will change as a result of intervention, the intervention(s) to be used and how progress will be measured.			
63 W2.0	Written consent to use the plan was obtained from the individual or guardian.			
64	Implementers (provider staff) of the plan are able to carry out the plan as written.			
65 W2.0	A system is in place to assure that procedures are carried out as designed.			
66 W2.0	There is evidence of progress or lack thereof in reducing the problem with behavior.			
67	Emergency procedures (e.g., reactive strategies, crisis management procedures) used by the provider for problems with behavior are developed and implemented under the guidance of certified or licensed behavioral services professionals.			
68	Staff are able to use the procedure when and as designed			

Cite		Met	Not Met	N/A
69	Records are kept on the use of the emergency procedure and occurrences of the problem behavior.			

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