

Developmental Services
Transportation
 Monitoring Checklist

Provider Number: _____

Provider Name: _____

Review Date: _____


Provider Address: _____



Reviewer Name: _____

District: _____

Location: _____

- Agency Provider Solo Provider Onsite Review Desk

Cite	Standard	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>				
B. Provider Qualifications and Requirements				
1	Transportation operators that are part of the coordinated system as well as transportation providers that are not a part of the coordinated system are required to adhere to a comprehensive set of vehicle and passenger safety standards that are set forth in Chapter 41-2, F.A.C.			
2	Drivers shall be at least 18 years of age and possess a current, valid commercial or non-commercial driver’s license appropriate to the vehicle and for the purpose it is being used in accordance with chapter 316, FS.			
3	Providers other than community transportation coordinators maintain 100/300 vehicle liability insurance coverage and current vehicle registration, in accordance with s. 768.28, FS.			
4	The provider promptly reports any change to coverage or license to the waiver support coordinator and Area Office.			
5 NEW	Provider vehicle(s) must contain a first aid kit equivalent to Red Cross Family Pack #4001 and an A-B-C fire extinguisher.			

Cite	Standard	Met	Not Met	N/A
6  W4.0	Level two background screenings are complete for all direct service employees.			
7  W4.0	All employees undergo background re-screening every 5 years.			
8 NEW	Independent providers and agency staff receive training on Infection Control and the use of on-board first aid kit.			
9 NEW	Direct service staff has received training in the Department's Direct Care Core Competencies Training.			
C. Service Limits and Times				
10 NEW	The provider renders no more than 4 one-way trips per day or 80 per month when the provider is reimbursed by the trip.			
11	The provider is not transporting individuals to school.			
12	<p>The provider is not part of the county's coordinated transportation system and renders services only under the following circumstances:</p> <ol style="list-style-type: none"> 1. The vendor is a paid vendor and/or is also a family member; 2. The vendor is a group home, a residential service facility or an adult day training agency transporting individuals who are served by the group home, residential facility or agency; 3. The CTC has told the individual or the individual's family, guardian, waiver support coordinator, or Area Office that it cannot provide the requested transportation; or 4. The district can prove to the county's community transportation coordinator that an alternative independent vendor can provide services that pursuant to rules promulgated by the Commission for the Transportation Disadvantage are most cost-effective and also meet the standards required of the coordinated transportation system. This proof must be a bonafide comparison of the fully allocated cost of transportation. 			
13	If a group home, residential facility, or adult day training agency wishes to transport its own individuals, the agency must discuss its transportation plans with the Community Transportation Coordinator before beginning to transport.			
14	Provider is authorized to render transportation services.			
15	Provider renders services and supports at a frequency and intensity as defined in the service authorization.			

Cite	Standard	Met	Not Met	N/A
D. Documentation				
16 R	Providers have at a minimum copies of trip logs for the period being reviewed.			

Transportation Checklist 11-27-05.doc
 REV 10-30-01; 11-13-01; 01.03; 02.04.03; 02-10-03; 11-27-05