

GROUP HOME FACILITY STANDARDS

PART I – ADMINISTRATIVE PROCEDURES

Name of Facility: _____ Date of Survey: _____

Address: _____ Surveyors: _____

YES	NO	NA	COMMENTS
-----	----	----	----------

A.1.0 Organization

A.1.1 The organization of the facility is that of a

- A.1.1.1 corporation,
 - A.1.1.1.1 profit making or
 - A.1.1.1.2 non-profit,
 - A.1.1.1.3 with state approved articles of incorporation;
- A.1.1.2 partnership; or
- A.1.1.3 an individual proprietorship.

A.2.0 Budget and Finance

- A.2.1 An annual budget is prepared which lists anticipated operating needs and resources.
- A.2.2 Financial records are kept which identify each facility expense.
- A.2.3 Records of expenditures from individual resident’s accounts are kept.
- A.2.4 Verification is provided prior to initial licensure that the total program can be maintained without dependence on fees for at least 60 days from the time of opening through
 - A.2.4.1 a resolution statement by the Board of Directors verifying the above if the facility is operated by a corporation or
 - A2.4.2 if operated by a proprietorship or partnership, through a signed statement by the operator.

A.3.0 Client Records

- A.3.1 An individual client record is maintained by the facility on the premises,
 - A.3.1.1 which is kept in a lockable container.

- A.3.2 The client record contains the following information:
 - A.3.2.1 client name,
 - A.3.2.2 date of birth,
 - A.3.2.3 written authorization for routine medical/dental from the client or guardian,
 - A.3.2.4 medical summary,
 - A.3.2.5 the name, address and telephone number of the client's physician,
 - A.3.2.6 the name, address and telephone number of the client's dentist,
 - A.3.2.7 a record of the client's illnesses and accidents while a resident of the facility,
 - A.3.2.8 the legal status (competent or incompetent),
 - A.3.2.9 current habilitation plan, and
 - A.3.2.10 an accounting of the client's funds received and/or distributed by the vendor.
- A.3.3 All person having access to the records are familiar with and strictly adhere to confidentiality as outlined in The Bill of Rights of Retarded Persons.

A.4.0 Personnel Qualifications, Requirements and Responsibilities

- A.4.1. The facility has a person designated administratively responsible and who
 - A.4.1.1 has completed college level course work applicable to the functions of the facility such as course work in education, special education, social work, sociology, health, psychology or child development, or
 - A.4.1.2 has at least a high school diploma, and
 - A.4.1.2.1 three years of relevant experience in working with children, adolescents, or adults.
- A.4.2 One person is designated administratively responsible, in case of the Administrator's absence.
- A.4.3 All other staff have at least an eighth grade education,
 - A.4.3.1 are at least eighteen (18) years of age, and
 - A.4.3.2 have experience relevant to their job description.
- A.4.4. A file is maintained for each direct care staff member and contains,
 - A.4.4.1 an employment history,
 - A.4.4.2 at least three written character references (excluding relatives),
 - A.4.4.3 the job description for the position held, and
 - A.4.4. records of in-service training.
- A.4.5 The mental and physical health status of the staff is such that it does not interfere with providing appropriate care and supervision to the clients.

A.4.6 The facility maintains at least the staffing pattern established in the application for license.

--	--	--	--

A.5.0 Staff Training

- A.5.1 The staff at the facility are instructed regarding:
 - A.5.1.1 the Development Disabilities Abuse Act and procedures for reporting abuse,
 - A.5.1.2 the Bill of Rights of Retarded Persons,
 - A.5.1.3 confidentiality of personal information and records,
 - A.5.1.4 procedures for handling emergencies,
 - A.5.1.4.1 including knowledge of fire evacuation procedures,
 - A.5.1.5 emergency first aid procedures including,
 - A.5.1.5.1 the Heimlich maneuver, and
 - A.5.1.5.2 cardiopulmonary resuscitation,
 - A.5.1.6 client behavior management rules, 65G-8, FAC.
- A.5.2 The facility staff participates in training sessions as made available by the department.

A.6.0 Client Rights

- A.6.1 The religious preference of each client, including the right not to participate in religious activities, is respected.
- A.6.2 The facility staff does not restrict the rights and responsibilities of the clients, parents or guardians.
- A.6.3 The facility or agency has evidence of its involvement, or efforts to do so, with community organizations that contribute to the habilitation and welfare of the clients, and
 - A.6.3.1 at least one staff member participates on the annual Habilitation Planning Committee.
- A.6.4 The facility insures each client's right to privacy.
- A.6.5 Clients are allowed free use of all space within the facility with due regard for privacy and personal possessions of other residents and staff.
- A.6.6 The facility is accessible to all forms of citizen advocacy.
- A.6.7 Written house rules are established and maintained through consultation with clients.
- A.6.8 The facility staff helps to establish self-government as described in Section 393.13, Florida Statutes, Bill of Rights of Retarded Persons.
- A.6.9 The facility assists and/or encourages each client:
 - A.6.9.1 to participate in developmental training and/or other programs prescribed, and
 - A.6.9.2 to utilize community resources.
- A.6.10 Any behavior management programs being implemented with any client adheres to the client behavior management rules, 65G-8, FAC, and

YES	NO	NA	COMMENTS

A.6.10.1 the facility has a written statement of policies and procedures for the control and discipline of clients.

A.6.11 Clients have the right to communication with parents/guardians, social workers, friends and other persons.

A.6.12 The facility staff are supportive of the client in exercising maximum independence in the following applicable areas, as specified in the Habilitation Plan:

A.6.12.1 self care skills,

A.6.12.2 daily living skills,

A.6.12.3 social skills,

A.6.12.4 communication skills,

A.6.12.5 recreational opportunities and use of leisure time,

A.6.12.6 motor skills,

A.6.12.7 basic knowledge,

A.6.12.8 community resource utilization, and

A.6.12.9 work habits.

A.6.13 The treatment of the clients is individualized and is appropriate to the abilities and developmental level of the clients.

A.7.0 Emergency Procedures

A.7.1 There is a written plan on file at the facility which specifies action and procedures to follow in emergency situations, which

A.7.1.1 was developed with the assistance of appropriate resource persons such as the local fire marshal, district staff, or civil defense office, and

A.7.1.2 includes assignment of staff and clients to specific tasks and responsibilities.

A.7.2 Written procedures are on file and approved by the District Developmental Services Program Office for reporting

A.7.2.1 emergencies to the District Developmental Services Program Office, and

A.7.2.2 reporting suspected abuse to the Abuse Hotline.

A.7.3 There is at least one telephone which is accessible to the facility staff and clients at any time for emergency use, and

A.7.3.1 clients (age and ability appropriate) are trained to dial the emergency number.

A.7.4 The following telephone numbers are readily accessible at each telephone extension in the facility.

A.7.4.1 police,

A.7.4.2 fire,

A.7.4.3 client's doctor,

A.7.4.4 rescue squad/ambulance,

- A.7.4.5 social worker,
- A.7.4.6 Abuse Hotline,
- A.7.4.7 District Administrator,
- A.7.4.8 District Developmental Services Program Supervisor,
- A.7.4.9 emergency on-call number,
- A.7.4.10 relief staff,
- A.7.4.11 District Human Rights Advocacy Committee Chairperson.

YES	NO	NA	COMMENTS

A.8.0 Intake and Placement Procedures

- A.8.1 The facility has written criteria and procedures for admission.
- A.8.2 The facility obtains referral material pertinent to the placement of the client, prior to each admission which includes:
 - A.8.2.1 current medical information,
 - A.8.2.2 psychological information,
 - A.8.2.3 educational information, and
 - A.8.2.4 social data.
- A.8.3 Referred clients and their families are given an opportunity to visit the facility prior to placement.
- A.8.4 The group home obtains prior approval of the District Developmental Services Program Office before accepting any clients other than clients of the Developmental Services program.
- A.8.5 Prior to any transfer (except emergency transfers) the reasons for the transfer are discussed with the
 - A.8.5.1 client, and
 - A.8.5.2 social worker.

A.9.0 Transportation

- A.9.1 The group home facility provides or arranges for incidental transportation for clients within the community.
- A.9.2 Vehicles operated by the group home facility for transportation of clients have a current license plate,
 - A.9.2.1 current inspection sticker,
 - A.9.2.2 minimum insurance coverage as required by state law, and
 - A.9.2.3 operated by a driver holding an appropriate valid driver's license.
- A.9.3 Clients are encouraged to use public transportation in areas where it is available and appropriate to the clients' ability.
