

SECTION I. LICENSURE REQUIREMENTS

DEA 100 PREFACE

These rules, regulations and standards supersede any and all prior rules, regulations, and standards relating to the certification and regulation of facilities and programs providing adult day services promulgated pursuant to R.I.G.L. 42-66-4. They have been promulgated to ensure that basic statutory requirements for serving frail elderly clients are met.

In order to comply with these rules, regulations and standards, the facility or program must present sufficient evidence that the physical plant meets safety standards; the staff is adequate in number and properly trained to carry out the goals of the program; and that the overall philosophy, objectives and services are responsive to the needs of those served.

The issuance of a license requires compliance with these rules, regulations, and standards and authorizes the licensee to establish programs and services. Under no circumstances does such a license commit the Department of Elderly Affairs or the State of Rhode Island to any funding of any program or facility.

Pursuant to the provisions of the Administrative Procedures Act, R.I.G.L. 42-35-3, the following were given consideration in arriving at the regulations: (a) alternative approaches to the regulations; (b) duplication or overlap with other state regulations; and (c) significant economic impact. No alternative approach was identified; nor any duplication or overlap. Furthermore, the protection of the health, safety, and welfare of the public necessitates the adoption of the regulations despite any economic impact which may be incurred as a result of the regulations.

Considerable effort has been expended in the drafting of these rules, regulations, and standards. They have been designed with the needs of individuals uppermost in mind and are intended to be flexible and responsive enough to allow for innovative programming.

DEA 200 DEFINITIONS

200 Whenever used in these rules and regulations, the following terms shall be construed as follows:

200.1 AAdult Day Services@ means a community-based group program designed to meet the needs of adults with impairments through individual plans of care. These structured, comprehensive, nonresidential programs provide a variety of health, social, and related support services in a protective setting. By supporting families and other caregivers, adult

day services enable participants to live in the community. Adult day programs assess the needs

of participants and offer services to meet those needs. Participants attend on a planned basis.

200.2 **Building Code** means the current Rhode Island State Building Code, R.I.G.L. 23-27.3-1 et.seq.

200.3 **Confidentiality of Health Care Information** means the current Rhode Island Confidentiality Law, R.I.G.L.5-37.3-1 et.seq.

200.4 **Department** means the Rhode Island Department of Elderly Affairs.

200.5 **Direct Care Staff** means the program director and all other staff who work directly with program participants.

200.6 **Director** means the Director of the Rhode Island Department of Elderly Affairs.

200.7 **director** means the top administrative staff member in the adult day services program, regardless of the title used by the program.

200.8 **Disqualifying information** for criminal records check purposes means any conviction for any offense listed in R.I.G.L. 23-17.4-30 and R.I.G.L. 23-17-37.

200.9 **Duly Authorized Agent of the Director** means any Department staff member or consultant whom the Director assigns or contracts with to perform program inspections. Authorized Agents shall identify themselves as such to programs.

200.10 **Elderly** means any person age 55 years or older.

200.11 **Life Safety Code** means the current applicable Rhode Island State Fire Safety Code, R.I.G.L. 23-28.1-1 et.seq.

200.12 **Nurse** means an R.N. or L.P.N. who holds a current Rhode Island nursing license.

200.13 **Program** means a planned, structured service component with specific parts that address the needs of its participants.

200.14 **Rules & Regulations Concerning the Disposal of Medications** means the current applicable Rhode Island Department of Health Rules and Regulations Governing the Disposal of Legend Drugs, issued pursuant to R.I.G.L. 21-28-5.07 and 21-31.

200.15 **Variance Review Committee** means a group comprising two Department staff

members appointed by the Director and the President of the Rhode Island Adult Day Services Association or designee.

DEA 300 STATUTORY AUTHORITY FOR LICENSING

Authority for these rules, regulations and standards is found in R.I.G.L. 42-66-4(c)(15).

DEA 400 APPLICABILITY

These rules, regulations and standards apply to all facilities and programs which provide services to the frail elderly who are in need of supportive care and supervision during the daytime. All references within these rules and regulations are incorporated by reference and have the same force and effect as if promulgated herein. The provisions of these rules, regulations and standards do not apply to any facility or program licensed by any appropriate state agency under other statutory authority. Questions regarding applicability of these rules, regulations and standards to particular programs or facilities should be addressed to the Director, Department of Elderly Affairs.

DEA 500 LICENSE REQUIRED

No person, acting alone or jointly with any other person, shall establish, conduct or maintain an adult day services program in this state without a license in accordance with the requirements of R.I.G.L. 42-66-4(c)(15) and in conformance with the rules and regulations herein. No facility and/or area of a facility shall represent itself as an adult day services program or use the term adult day services or any other similar term in its title, advertising, publication or other form of communication, unless licensed to offer adult day services in accordance with the provisions herein.

DEA 600 APPLICATION FOR LICENSE

An application for a license shall be made to the Department of Elderly Affairs upon forms provided by it and shall contain such information as the Department reasonably requires. Included shall be affirmative evidence of the applicant's ability to comply with the attached rules, regulations and standards as are lawfully prescribed herein.

DEA 700 ISSUANCE AND TRANSFER OR ASSIGNMENT OF LICENSE

Upon receipt of a completed application for a license, the Department shall issue a license if the applicant meets the requirements of R.I.G.L. 42-66-4(c)(15) and the rules, regulations and standards herein. If all the requirements are not met, the Department may issue a provisional license for a period not to exceed six (6) months if such issuance will not result in undue hazard

to participants as determined by the Director or the State Fire Marshall. A license issued hereunder shall be the property of the state and loaned to such licensee. The licensee shall be kept posted in a conspicuous place on the premises. Each license shall be issued only for the premises and persons named in the application and shall not be transferable or assignable except with the written approval of the Department

DEA 800 EXPIRATION AND RENEWAL OF LICENSE

A license, unless sooner suspended or revoked, shall expire by limitation one (1) year following its issuance, and may be renewed from year to year after inspection, report and approval by the Department. Such inspection may be made any time prior to the date of expiration of said license.

DEA 900 INSPECTIONS

The Department shall make or cause to be made such inspections and investigations as it deems necessary by duly authorized agents of the Director at such time and frequencies as determined by the Department. A duly authorized representative of the Director shall have the right to enter at any time without prior notice, to inspect the premises and services for which an application has been received, or for which a license has been issued. Duly authorized representatives of the Director shall be permitted to interview staff, participants, and any other interested parties. Refusal to permit inspection or investigation shall constitute a valid ground for suspension or revocation of license or curtailment of activities. Each facility shall be given notice by the Department of its level of compliance with these rules, regulations and standards, including a list of all deficiencies reported as a result of an inspection or investigation.

DEA 1000 DENIAL, SUSPENSION OR REVOCATION OR LICENSE OR CURTAILMENT OF ACTIVITIES

The Department is authorized to deny, suspend or revoke the license or curtail activities of any adult day services program which (1) has failed to comply with the rules, regulations and standards herein; (2) has offered or provided services to participants outside of the scope of its license; (3) has failed to comply with the provisions of R.I.G.L.42-66-4(c)(15). Reports of deficiencies shall be maintained on file in the Department and shall be considered by the Department in rendering determinations to deny, suspend or revoke the license or to curtail activities of the adult day program. Notice of such suspension or revocation shall be made by registered or certified mail or by personal service. It shall set forth the particular reasons for the proposed action and fix a date not less than thirty (30) days from the date of such mailing or service for a fair hearing if requested by the applicant or licensee. On the basis of any such hearing, or upon default of the applicant or licensee, the Department shall make a determination specifying its findings of fact and conclusions of law. A copy of such determination shall be sent

by registered or certified mail or served personally upon the applicant or licensee. The decision denying, suspending, or revoking the license or application shall become final thirty (30) days after it is mailed or served unless the applicant or licensee, within such thirty day period, appeals the decision to the Superior Court pursuant to Department rules as promulgated. The procedure governing such authorized hearings will be in accordance with rules promulgated by the Department. A full and complete record will be kept of all proceedings, and all testimony shall be reported but need not be transcribed, unless the decision is appealed as described under DEA 1100, Review of License Action. A copy or copies of the transcript may be obtained by any interested party upon payment of the cost of preparing such copy or copies. Witnesses may be subpoenaed by either party.

DEA 1100 REVIEW OF LICENSE ACTION

Any applicant, licensee, or the state acting through the Attorney General, who is aggrieved by the decision of the Department after a hearing may, within thirty (30) days of receiving notice of the determination provided in DEA 1000 Denial, Suspension or Revocation of License, file a notice of appeal in the Superior Court of the County in which the facility or program is located or is to be located. A copy of the notice of appeal shall be served upon the Director. Such an appeal will stay the denial, suspension or revocation once filed with the clerk of the court for a period not to exceed thirty (30) days, excluding Sundays and legal holidays. If the appeal has not been heard or disposed of within such 30-day period, the denial, suspension or revocation shall no longer be stayed but shall remain in full force and effect during any further pendency of such appeal unless the Superior Court shall, for good cause shown, extend the period of such stay. In no event shall such period be extended beyond the date when the Superior Court shall render its judgement upon the appeal (R.I.G.L. 42-35-15).

DEA 1200 PROGRAM VARIANCE PROCESS

The licensing standards for adult day programs are designed so that full compliance is required in order for a license to be granted. It is recognized that there will be need from time to time for a facility or program to bypass a specific standard or standards in order to best accomplish its stated philosophy, goals and purpose. This factor has been taken into consideration in the development of these rules, regulations and standards, and the following procedure is to be used when an applicant or licensee believes there is a compelling need for a variance:

1200.1 Application for a variance must be completed by the applicant or licensee and submitted to the Director for review by the Variance Review Committee.

1200.2 Upon receipt of a variance request, the Department will make acknowledgment in writing.

1200.3 Within ten (10) working days of the receipt of the variance request, unless additional time is required to review the program and the reason for the variance, the Variance Review Committee will review the application and return a decision, in writing, to the applicant.

1200.4 If the applicant is dissatisfied with the decision of the Variance Review Committee, an appeal may be made through the process outlined in DEA 1000 Denial, Suspension or Revocation of License or Curtailment of Activities.

DEA 1300 APPLICATION FOR VARIANCE

STATE OF RHODE ISLAND

Department of Elderly Affairs

Application for Variance From Department Licensing Standards

The undersigned hereby applies to the Director for a variance in the Application of the Licensing Standards for _____.

Applicant: _____

Address: _____

Date: _____

Specific Licensing Standard(s) to be Varied: _____

Request for Permanent Variance () or Time Variance () Check one.

Detailed Reason(s) for Requesting Variance(s) (Use additional sheet(s) if necessary):

Signed: _____

DEA 1400 DEFICIENCIES AND PLANS OF CORRECTION

The Department shall notify the governing body or other legal authority of a program of the degree of compliance with these rules, regulations and standards through a statement, including a notice of deficiencies, if any, which shall be forwarded to the licensee within fifteen (15) working days after inspection of the facility or program, unless the Director determines that immediate action is necessary to protect the health, welfare, or safety of the public or any member thereof through the issuance of an immediate compliance order. A licensee who receives a notice of deficiencies must submit a plan of correction to the Department within fifteen (15) working days of the date of the notice of deficiencies. The plan of correction shall contain any request for variances. The Department will be required to approve or reject the plan of correction submitted by a licensee within fifteen (15) working days of receipt of the plan.

If the Department rejects the plan of correction, or if the licensee does not provide a plan of correction within the fifteen working day period, or if a program or facility whose plan of correction has been approved by the Department fails to execute its plan within a reasonable time, the Department may invoke the sanctions enumerated in DEA 1000 above. If the program is aggrieved by the sanctions of the Department, it may appeal the decision and request a hearing in accordance with R.I.G.L. 42-35.

DEA 1500 VIOLATIONS AND SANCTIONS

Any person establishing, conducting, managing or operating an adult day program as defined by these rules, regulations and standards without a license shall be guilty of a misdemeanor, and upon conviction, shall be fined not more than one thousand dollars (\$1,000) or imprisoned not more than six (6) months, or both, at the discretion of the court, for each offense.

DEA 1600 INJUNCTION TO RESTRAIN OPERATION WITHOUT LICENSE

Notwithstanding the existence or pursuit of any other remedy, the Department may, in a manner prescribed by law and upon the advice of the Attorney General, who will represent the Department in the proceedings, maintain an action in the name of the state for injunction or other process against any person or persons to restrain or prevent the establishment, conduct, management or operation of a program as defined in this chapter without a license.

DEA 1700 CHANGE OF OWNERSHIP, OPERATION AND OR LOCATION

When a change of ownership or operation or location of an adult day program is planned or when discontinuation of services is contemplated, the Department shall be given written notice of pending changes. A license shall immediately become void and shall be returned to the Department when operation of an adult day program is discontinued or when any changes in

ownership occur. When there is a change in ownership or in the operation or control of the facility or program, the Department reserves the right to extend the expiration date of such license, allowing the facility or program to operate under the same license which applied to the prior licensee for such time as shall be required for the processing of a new application or reassignment of participants, not to exceed six (6) weeks.

DEA 1800 CONSTRUCTION AND RENOVATIONS

Any licensee or applicant desiring to make alterations or additions to its facility or to construct a new facility shall, before commencing such alteration, addition, or new construction, inform the Department. The Department may conduct preliminary inspection and approval or make recommendations with respect to compliance with the regulations and standards herein. Necessary conference and consultation may be provided.

DEA 1900 NONDISCRIMINATION AND CIVIL RIGHTS POLICY

Each program shall be responsible for maintaining a policy of nondiscrimination in the provision of services to participants and in the employment of staff without regard to race, color, creed, national origin, sex, sexual orientation, age, handicapping condition or degree of handicap, in accordance with Title VI of the Civil Rights Act of 1964; the Rhode Island Executive Order No. 92-2, dated January 23, 1992 and entitled "Compliance with the Americans with Disabilities Act"; the United States Executive Order No. 11246 entitled "Equal Employment Opportunity"; United States Department of Labor Regulations; Title V of the Rehabilitation Act of 1973, as amended; the 1990 Americans With Disabilities Act; R.I.G.L. 42-87, which states that "Discrimination" includes those acts prohibited on the basis of race by 42 U.S.C. #1981, 1983 and those on the basis of handicap by 29 U.S.C. #794 and those on the basis of disability by U.S.C. #12100 et seq. And U.S.C. #12101 et seq., and those on the basis of handicap by R.I.G.L.28-5; and the Rhode Island Fair Employment Practices Act.

SECTION II. REQUIREMENTS FOR ADULT DAY SERVICES

ADS 100 ACCEPTANCE AND ADMISSION POLICIES AND PROCEDURES

101 Each adult day services program shall define the target population(s) it intends to serve.

102 Each adult day services program shall serve only participants whose needs while at the program do not exceed the program's resources; and 51% or more of the program's average daily participants shall be persons age 55 years or older.

103 Each adult day services program shall have a mission and philosophy statement that reflects the needs of the participants and the care and services it is committed to providing.

104 Each adult day services program shall have a written policy on participants who are appropriate and those who may not be appropriate for enrollment. These eligibility criteria shall include, but not be limited to, the following:

104.1 Each participant shall have a physical/mental condition which indicates a need for nursing care, supervision, therapeutic services, support services, and/or socialization.

105 Each adult day services program shall have a written policy on the conditions under which a participant may be reevaluated or discharged; and a written set of procedures to be followed. These conditions shall include, but not be limited to, the following:

105.1 Any participant whose behavior is harmful to self, other participants, or staff members may be reevaluated or discharged as a participant.

105.2 Any participant whose behavior proves to be disruptive to the operations of the program may be reevaluated or discharged as a participant.

105.3 Thirty (30) days advance notice of discharge of a participant shall be given to the participant and his/her representative, provided that such notice does not jeopardize the health and safety of the participant and/or other participants and staff of the program. During this time, the program shall offer the family assistance in trying to resolve the difficulty and provide information regarding alternatives.

106 Prior to an individual's acceptance as a participant, the program shall require a notice from the applicant's primary care physician, including a medical history and documentation that a physical examination has taken place within the past three (3) months. Physician's documentation shall include, but not be limited to, the following:

A. A list of current medication and treatments.

- B. A list of immunizations (e.g., tetanus, pneumococcal, influenza) with dates; and indication of TB test results, if test has been given..
- C. Any special dietary requirements.
- D. A discharge summary, if the individual has been hospitalized within the past three (3) months.
- E. A statement indicating any limitations to the individual's participation in program activities.
- F. Recommendations for therapy, when applicable.
- G. Certification that individual does not have an active case of TB or Hepatitis C or D.

107 Each adult day services program shall conduct an assessment of each potential participant in order to determine whether or not that participant is included in the program's target population and whether or not the program can meet the individual's needs.

107.1 This assessment shall be conducted by a social service or medical member of the program staff and shall include interviews of family members, as appropriate. The assessment shall include, but not be limited to, the following information:

- A. General health characteristics
- B. Psychological condition
- C. Nutritional habits
- D. Nature of individual's home and community support system

108 Written documentation of this initial assessment shall be maintained by the program.

109 Initial assessment information and information provided by the applicant's physician shall be reviewed by at least one professional staff member of the program, in addition to the staff member completing the initial assessment.

110 Upon admission to the program, program staff shall negotiate a written agreement with the participant, and if appropriate, with the participant's legal guardian. This agreement shall specify at least the following:

- A. A disclosure statement that describes the program's range of care and services.
- B. Basic services offered to the participant by the program.
- C. Staffing profile.
- D. Participant confidentiality policies and procedures.
- E. Admission, discharge, and/or transfer criteria.
- F. Fees and arrangements for reimbursement and payment.
- G. Identification of and authorization for third party payers.

- H. Any non-financial obligations of the participant and his/her family, such as a commitment by the participant to attend the program a specified number of days per week.
- I. Days and hours of program operation.
- J. Schedule of holidays when the program is closed.
- K. Announcement procedures for unexpected closing of the program due to disaster or severe weather.

111 Each participant shall designate a health provider to contact in the event of an emergency and for ongoing care.

112 The program shall have procedures for orientation of the participant and/or family to policies, services and facilities.

113. The program shall assure that all participants or their authorized representatives review all consents and permission documents and either sign where indicated or state in writing that they have read and understand the documents and are unwilling to sign them..

114 The participant and family shall be informed of the program's procedures for advance directives.

115 Program policies shall define the target population, admission criteria, discharge criteria, medication policy, participant rights, confidentiality, and grievance procedures.

ADS 200 PARTICIPANT RIGHTS AND RESPONSIBILITIES

201 Adult day services programs shall assure that all participants are afforded the following rights, as well as any others deemed appropriate by the specific program:

201.1 The right to be treated as an adult, with consideration, respect, and dignity, including privacy in treatment and in care for personal needs.

201.2 The right to participate in program of services and activities designed to encourage independence, learning, growth and awareness of constructive ways to develop one's interests and abilities.

201.3 The right to self-determination within the day services setting, including the opportunity to:

- A. Participate in developing or changing one's plan for services.
- B. Decide whether or not to participate in any given activity.

- C. Be involved to the extent possible in program planning and operation.
- D. Refuse treatment and be informed of the consequences of such refusal.
- E. End participation in the adult day services program at any time.

201.4 The right to a thorough initial assessment, development of an individualized plan of care, and a determination of the required level of care.

201.5 The right to be cared for in an atmosphere of sincere interest and concern in which needed support and services are provided.

201.6 The right to a safe, secure, and clean environment.

201.7 The right to receive nourishment and assistance with meals as necessary to maximize functional abilities and quality of life.

201.8 The right to confidentiality and the guarantee that no personal or medical information will be released to persons not authorized under law to receive it without the participant's written consent, in accordance with R.I.G.L.5-37.3.

201.9 The right to voice grievances about care or treatment without discrimination or reprisal.

201.10 The right to be fully informed, as documented by the participant's written acknowledgment, of all participants' rights and of all rules and regulations regarding participant conduct and responsibilities.

201.11 The right to be free from harm, including unnecessary physical or chemical restraint, isolation, excessive medication, abuse, or neglect.

201.12 The right to be fully informed, at the time of acceptance into the program, of services and activities available and related charges.

201.13 The right to communicate with others and be understood by them to the extent of the participant's capability.

ADS 300 ADMINISTRATION AND ORGANIZATION

301 Adult day services programs, or groups of programs, may be organized in any legal business form, including but not limited to: sole proprietorship, partnership, joint venture, corporation, non-profit corporation, or trust. If a program is operated as part of, or in affiliation

with, a parent organization, the program shall have a written agreement with the parent organization.

302 Each program shall have a governing body with full legal authority and fiduciary responsibility for the overall operation of the program in accordance with applicable state and federal requirements.

303 The governing body shall review, approve, and revise a current, written plan of operation, including a service description for providing day services to frail elderly persons. This description shall be reviewed at least annually, updated as needed, and made available to authorized Departmental inspectors.

304 The program shall develop written policies and procedures, consistent with Department regulations, for providing services to participants.

304.1 Before any significant change in program philosophy, goals, objectives, or policies is made, the program shall provide the details of the proposed changes in writing to the Director for review.

305 A written plan for handling emergencies shall be developed and be easily accessible in the program and in all program vehicles which transport participants.

305.1 Plans for evacuation and relocation of participants shall be in place in the event of a power outage or other emergency situation.

306 An organization chart shall be developed to illustrate the lines of authority and communication channels, and shall be provided to all staff of the program.

306.1 The director shall have full authority and responsibility to plan, staff, direct, implement, and evaluate the program.

306.2 The director or designee shall be on site to provide the program's day-to-day management during hours of operation.

307 Each program shall demonstrate fiscal responsibility and accountability.

307.1 Fiscal policies, procedures, and records shall be developed to enable the director to meet fiscal reporting needs of the governing body and the Department.

307.2 Each program shall develop a plan to address the long-term financial needs of the

program.

307.3 A fee schedule shall be formally established and shall include any eligibility for discounts, waivers, or deferred payment.

307.4 The governing authority shall approve an annual budget for the program, receive a copy of monthly income and expenditure reports, and receive a copy of the annual audit.

307.5 Program and overall agency financial records shall be kept in accordance with accepted accounting practices, and all financial records shall be audited or reviewed annually by an independent Certified Public Accountant (CPA) in compliance with applicable federal and state regulations.

307.6 The program shall make available the program's insurance policies to Department inspectors. These insurance policies shall cover damage, injury or loss of life caused by fire, accident, or other dangers that might occur during the program's operation. Liability insurance shall be carried on all vehicles used to transport participants. Worker's Compensation insurance shall be carried on all employees, as required by state law.

ADS 400 WRITTEN POLICIES AND PROCEDURES

401 Each program shall inform its staff and participants of the general content of the Department's regulations; and shall develop and implement written policies and procedures to ensure compliance with the Department's regulations. These policies shall be reviewed by the program's governing body at least annually and revised as needed. Policies and procedures shall include at least the following topics:

A. Admissions. Admission policies shall include a statement guaranteeing freedom from unlawful discrimination on the basis of race, color, creed, national origin, religion, sex, sexual preference, age, physical or mental handicap, or degree of handicap.

1. Participant selection criteria shall be clearly stated in writing as admission requirements; and shall be consistent with the program's goals and objectives and the program's ability to meet the needs of the participants.

B. Collecting any fees for services. These policies and procedures shall be consistent with any applicable contract or agreement with the Department and with the Department's regulations.

C. Intake services.

- D. Referring participants, including eligible applicants, to other programs.
- E. Developing, implementing, monitoring, reviewing, and revising participants' individual care plans; and documenting care given.
- F. Referring participants to services the program does not provide.
- G. Ensuring and documenting continuity of care.
- H. Transferring and discharging participants, and providing follow-up services after transfer or discharge.

- I. Informing each participant or his/her representative of the responsibilities and rights of the participants and the program's rules and regulations. These procedures shall include provisions for informing the participant or representative orally and in writing.
- J. Protecting participants' rights.
- K. Receiving, recording and resolving grievances filed by a participant or on behalf of a participant.
- L. Ensuring that participant records are kept confidential, stored securely, accessed only by individuals with a right to know, kept for length of time required by state law and funding agencies, and properly disposed of.
- M. Proper administration, storage and disposal of medications.
- N. Searching for missing participants.
- O. Responding to fire and other disasters, including evacuation, first aid, notification of authorities and relatives, transportation to another site and arrangements for providing services at another site.
- P. Reporting incidents.
- Q. Supervising, evaluating and training personnel; and keeping personnel records.

402 The program shall have the following written documents:

- A. Plan for community education and involvement.
- B. Statement of program philosophy and objectives.
- C. Statement of population served, including criteria for admission and for placement on a prioritized waiting list; and disability and degree of disability, age, residency, and legal status.
- D. Description of a self-evaluation and continuous improvement system.

403 Copies of all written documentation listed in ADS 401 and 402 shall be available for inspection by duly authorized representatives of the Department.

404 Upon request, copies of all policies, procedures and statements adopted by the program pursuant to ADS 401 and 402 shall be provided to participants and their representatives, and to members of the general public.

ADS 500 PERSONNEL POLICIES AND PROCEDURES

501 The program shall maintain written personnel policies and procedures. These policies and procedures shall address at least the following topics:

- A.Hiring, training, and supervising all paid and unpaid personnel.
- B.Use of outside service providers.
- C.Use of volunteers.
- D.Notification of employees, consultants, interns, trainees, and volunteers of their responsibilities, rights, benefits, and conditions of employment.
- E.Written job descriptions.
 - 1. Each staff member shall receive a copy of his/her job description which shall include: educational and work qualifications; major job duties; numbers and titles of persons supervised; and title of the supervisor for the position.
- F. Supervision and job performance.
- G.Education and training.
- H.Records, including maintenance of records.
- I. Current salary/wage schedules.
- J. Fringe benefits and any conditions attached to the benefits.
- K.Disciplinary procedures and grounds for dismissal.
- L.Equal opportunity plan which shall include a statement guaranteeing that hiring and promotion shall be free from unlawful discrimination on the basis of race, color, creed, national origin, sex, sexual preference, age, physical or mental handicap, or degree of handicap.

502 All staff shall be supervised by a senior staff person who has the education, training, and experience needed to supervise the given position. All clinical staff shall receive clinical supervision and/or consultation.

502.1 Nurses may satisfy the requirement for clinical supervision and/or consultation by consulting with physicians and other health professionals on an as needed basis.

503 Each program shall have a written plan for staff training and development. Training shall include at least the following:

- A.Orientation for all staff at the start of employment. This training shall include orientation to the Department's and the program's policies, procedures, rules, and regulations.
- B.First aid training, including cardiopulmonary resuscitation (CPR) and the Heimlich Maneuver, for appropriate staff.
- C.Training in developing, implementing, and evaluating individual plans of care.
- D.Training in any specialized services offered by the program.
- E.Training in identifying participants who abuse alcohol and/or other substances, suffer from depression, or are victims of domestic violence.
- F. Information about services available to participants from outside programs or agencies.
- G.Information about the medications prescribed for participants, the benefits of the medications, common side effects and risks, and the laws governing administration of prescribed medications.
- H.Training in participants' rights.
- I. Training in confidentiality of participant information and records. Each employee, consultant, intern, trainee and volunteer shall sign a statement agreeing to abide by the rules and regulations governing participant confidentiality. This signed statement shall be included in the individual's personnel record.
- J. Training in diversity and cultural sensitivity.

504 The period of probationary employment shall be specified. The program director shall evaluate the performance of each employee at the end of his/her probationary period and at least annually thereafter. The program director shall be evaluated by the governing body or designee. Performance evaluations shall be in writing, and a copy shall be filed in the individual's personnel record. The individual shall be notified, in writing, of the evaluation results.

505 The program shall maintain confidential personnel records for each employee, intern, trainee, and volunteer. Each individual shall have access to his/her personnel record. Each record shall contain at least the following:

- A. A complete job application; and when appropriate, a resume.
- B. References, which may be documented oral references or letters of reference.
- C. Copy of current license or certificate, as required for the position.
- D. Documentation of any participation in job related training, while employed by the program, including the date(s) of training, the provider, the topic, and proof of attendance and completion.

E. Performance evaluations.

F. Statement signed by the individual agreeing to abide by the rules and regulations regarding the confidentiality of participant information and participant records.

506 The program shall have an adequate number of qualified staff and shall comply with local, state, and federal laws governing hours and conditions of employment and wages.

506.1 An adequate number of qualified staff shall be determined in accordance with Section 600 of these rules and regulations.

506.2 The number and qualifications of staff shall be included in the application for a license.

506.3 The program shall assign a staff member to oversee the development, implementation, and periodic review of each participant's individual plan of care; and to monitor and evaluate the participant's progress in achieving his/her treatment goals and objectives.

506.4 The program shall have a written agreement with any agency, program, or other service provider that provides essential services not provided directly by and otherwise the responsibility of the program. This written agreement shall be updated annually. The nature and extent of the services provided shall be documented.

506.5 Programs which use volunteers shall have a screening procedure to select volunteers with appropriate skills to work with the participants, or to help out with the program in a more general way (repairs, fund raising, etc.). The nature and extent of volunteer services shall be documented.

ADS 600 STAFFING REQUIREMENTS

601 Each program shall employ sufficient staff to maintain a ratio of one full-time staff member involved in direct service to participants for each nine (9) participants; and a ratio of 1 to 6 is recommended. Secretaries, cooks, accountants, and other non-direct care staff members shall not be considered in calculating this 1 to 9 ratio.

602 The program shall designate one full-time staff member as the program director.

602.1 The program director shall designate a staff member to act in his/her absence.

603 The program shall employ a nurse who will be on site daily for a minimum of six (6) scheduled hours.

603.1 If the program's daily enrollment is twenty (20) or more participants, the program shall have a nurse on site daily for six (6) hours and available to the program to ensure full-day nursing coverage. Backup coverage shall be arranged for the nurse in the event of absence due to illness or vacation.

604 The program shall identify a staff person responsible for the functions of activities director who will be on site daily for a minimum of four (4) scheduled hours.

605 If the program's daily enrollment is twenty-four (24) or more participants, the program shall have access to case management services on site or available for a minimum of twenty (20) hours each week.

606 The program shall have on site during all operating hours at least one staff member trained in first aid, including CPR and the Heimlich Maneuver.

ADS 700 STAFF QUALIFICATIONS AND RESPONSIBILITIES

701 All prospective employees shall have a physical examination within the six (6) months prior to hiring. The results of this examination shall be summarized on a form prepared by the program and shall include all immunizations and dates of immunization (e.g., measles, tetanus, influenza) and the results of all tests, including tuberculosis (TB) and any other tests specified by the program. The physical examination form shall be signed by a physician.

701.1 No individual who has an active case of tuberculosis (TB) or hepatitis C or hepatitis D shall be employed by the program.

702 All direct care employees shall be subject to a criminal background check prior to, or within one (1) week of, employment.

702.1 Said employees, through the employer, shall apply to the bureau of criminal identification of the state or local police department or the Rhode Island Attorney General's Office for a criminal records check. Fingerprinting shall not be required as part of this check.

702.2 In those situations in which no disqualifying information, defined as any conviction for any offense listed in R.I.G.L.23-17.4-30 and R.I.G.L.23-17-37, has been found, the bureau of criminal identification (BCI) shall inform the applicant and the employer in writing.

702.3 Any disqualifying information will be conveyed to the applicant in writing by the BCI. The employer shall also be notified that disqualifying information has been

discovered, but shall not be informed of the nature of the disqualifying information.

702.4 The employer shall maintain on file, subject to inspection by the Department, evidence that criminal records checks have been initiated on all employees seeking employment, as well as the results of said checks.

702.5 If an applicant has undergone a criminal records check within eighteen (18) months of an application for employment, than an employer may request from the BCI a letter indicating if any disqualifying information was discovered. The BCI will respond without disclosing the nature of the disqualifying information. This letter may be maintained on file to satisfy the requirements of ADS 702.4.

702.6 An employee against whom disqualifying information has been found may request a copy of the criminal background report be sent to the employer who shall make a judgment regarding the continued employment of the employee. Programs are encouraged to work with qualified employees to expunge their criminal background records when said expungement is possible.

703 The program shall maintain current, functional job specifications for all staff positions, consistent with the following requirements:

703.1 The director shall have a bachelor's degree or equivalent experience and have demonstrated ability to perform the following responsibilities of the program director:

- A. Direct and supervise all aspects of the program.
- B. Supervise all paid and volunteer staff members.
- C. Perform program and staff evaluations.
- D. May assume role of coordinator in the admissions process.
- E. Respond to any reporting requirements of the Department.
- F. Direct the development and implementation of the program's outreach plan.
- G. Be responsible for the fiscal administration of the program
- H. Direct the coordination of program services.

703.2 The nurse shall be licensed to practice by the State of Rhode Island. The nurse shall perform the following duties:

- A. Provide or supervise required program nursing services for each participant.
- B. Supervise other health care staff members.
- C. Coordinate the development and ongoing review of the care plans of each participant.

- D. Informally assess the health status of each participant on a daily basis to determine if (s)he has a condition which requires (a) being sent home to prevent infection of other participants and staff (e.g., cold, flu) or (b) notifying family of the need for a physician's evaluation and/or treatment.
- E. Write, at least monthly, nursing notes in each participant's record.
- F. Assist, as necessary, in the delivery of other required program services.

703.3 A staff member serving as activities director shall have the ability to develop and implement therapeutic activities programming both for specific individuals and for groups. The activities director shall perform the following duties:

- A. Supervise activity/program assistants.
- B. Develop educational events for participants.
- C. Write, at least quarterly, notes in each participant's record regarding the participant's involvement in activities as part of his/her care plan.
- D. Participate in the quarterly review of each participant's care plan.

703.4 Social caseworkers, pursuant to R.I.G.L. 5-39.1-1 et. seq., shall hold a current Rhode Island Department of Health license as a social worker or an independent social worker. They shall perform the following duties:

- A. Coordinate and provide individual, group, and family counseling.
- B. Inform participants and their families of available community services and refer participants, as necessary, to agencies providing such services.
- C. Write, at least quarterly, notes in each participant's record.

703.5 Aides shall be certified nursing assistants (CNAs) licensed by the State of Rhode Island or certified program assistants certified by the Rhode Island State Department of Elderly Affairs and shall be responsible for assisting professional program staff members as required in implementing services and meeting the needs of individual participants.

703.5.1 Programs which employ aides who are not licensed certified nursing assistants as of the date of promulgation of these rules, regulations and standards shall have one (1) year in which to either replace non-CNA aides or to have these aides complete a certified CNA training program and receive their licenses.

703.5.2 Programs may continue to employ any non-CNA as an aide provided that (a) the individual has had at least two (2) years successful employment as an aide in the program, and (b) at least one CNA licensed by the State of Rhode Island is employed by the program.

703.5.3 All new aides hired after the effective date of these rules, regulations and standards shall be either a licensed CNA or a program assistant trained and certified in accordance with a curriculum developed jointly by the Rhode Island Adult Day Services Association and the Department.

703.5.4 Programs shall have six (6) months after the effective date of these rules, regulations and standards to complete training of program assistants who are not taking C.N.A. training. Upon hiring, untrained program assistants who are not scheduled for C.N.A. training, as provided for in 703.5.1 above, shall be enrolled in the next available Program Assistant Training Program described in 703.5.3 above.

703.5.5 The ratio of CNAs to participants, shall be determined jointly by the Rhode Island Adult Day Services Association and the Department after the new training and certification program for program assistants is implemented.

703.6 Programs shall comply with all applicable state and federal laws regarding transportation services.

703.7 Programs which operate their own vehicle(s) shall employ drivers who possess current Rhode Island motor vehicle licenses appropriate to the size and seating capacity of the vehicle(s).

703.7.1 Drivers shall have experience in transporting passengers and shall be sensitive to the needs of aged individuals and individuals with handicapping conditions.

ADS 800 PROGRAM EVALUATION

801 The program shall have a self-evaluation and continuous improvement system. This self-evaluation shall include a statement of the program's goals and objectives; shall be conducted at least annually; and shall be in addition to any evaluations conducted by the Department.

801.1 This ongoing evaluation process shall examine the adult day services program on three levels: the participant/caregiver/staff level; the center/program level; and the community level.

801.2 Quantitative indicators shall be an integral part of the evaluation process.

802 The self-evaluation system shall measure the program's success in achieving the stated

goals and objectives, and shall review the effectiveness of the program's policies and procedures.

803 Goals, objectives, policies and procedures shall be revised as needed based on the results of the self-evaluation.

804 Significant changes in goals, objectives, policies or procedures shall be submitted in writing to the Director for review.

805 All revised goals, objectives, policies and procedures shall be made available to the program's employees, interns, trainees and volunteers.

806 The self-evaluation and any changes that result from it shall be documented.

ADS 900 PARTICIPANT POLICIES

901 All programs shall be culturally and linguistically responsive and respectful.

902 All programs shall promote a restraint-free environment. The use of chemical and/or physical restraints shall be restricted to those participants whose physicians have ordered such restraints and shall meet the provisions for their use as determined by accepted standards of practice (See requirements of the Omnibus Budget Reconciliation Act of 1987).

903 A participant bill of rights shall be developed, posted, distributed, and explained to all participants or their representatives, families, staff, and volunteers in the language understood by the individual.

904 A grievance procedure shall be established to enable participants and their families/caregivers to have their concerns addressed without fear of recrimination.

905 The program shall comply with the state mandatory procedures for reporting suspected elder abuse to the protective services unit of the Department. Staff shall be trained in signs and indicators of potential abuse.

906 Each program shall maintain a participant record system, including a separate record for each participant.

ADS 1000 INDIVIDUAL PLANS OF CARE

1001 Programs shall conduct an assessment and develop an individual written plan of care for each participant within thirty (30) days after the individual enters the program.

1002 An enrollment agreement shall be completed for each participant and shall include at least the following:

- A. Identification of services to be provided, agreed upon by the participant and/or caregiver and/or payer.
- B. A disclosure statement that describes the program's range of care and services.
- C. Admission, discharge and/or transfer criteria.
- D. Fees and arrangements for reimbursement and payment.
- E. Identification of and authorization for third party payers.

1003 The program shall have procedures for orientation of the participant and/or family/caregiver to policies, programs and facilities.

1004 The program shall assure that all participants or their representatives review all consents and permission documents and either sign where indicated or state in writing that they have read and understand the documents and that they are unwilling to sign them. Copies of these signed documents shall be filed in the participant's individual record.

1005 The participants and family/caregiver shall be informed of the program's procedures for advance directives.

1006 The program's assessment process shall identify the individual participant's strengths and needs, what services are required, and who is responsible for providing those services.

1007 The assessment shall be conducted by professional staff and consultants.

1008 The participant, caregiver, and other service providers shall have the opportunity to contribute to the development, implementation and evaluation of his/her care plan.

1009 There shall be a care plan review quarterly with the participant and/or family/ caregiver that reassesses the individual participant's needs and reevaluates the appropriateness of service plans. At least the following items shall be reviewed:

- A. Scheduled days of attendance;
- B. Services and goals of the plan of care; and
- C. Conditions of participation.

1010 If coordination of care is needed and if the participant is a client of another agency, a care plan shall be developed in conjunction with the services provided by that agency.

1011 Progress notes shall be written at least monthly by the nurse and/or social services staff member and maintained as part of each participant's record.

1012 The program shall develop a discharge policy that includes criteria and notification procedures.

1013 Discharge/transition plans shall be developed for participants with changes in service needs and changes in functional status that prompt another level of care.

1014 Each participant and family/caregiver shall receive written notice if the participant is to be discharged from the program.

ADS 1100 PROGRAM SERVICES

1101 Programming shall take into consideration individual differences by providing for a variety of types and levels of involvement.

1102 Programs shall offer, or make available through arrangements with community agencies, the services specified below in order to meet the needs of the participant population:

1102.1 Health-related services shall be provided as needed by participants.

1102.1.1 Programs shall train staff and supervise use of standard protocols for communicable diseases and infection control.

1102.1.2 Programs shall provide or arrange for health education, which may include promotion, prevention, screening and detections.

1102.2 Nursing services shall be provided in accordance with the particular needs of each participant and shall include the following:

- A. Supervision of and/or administration of medications and treatments as prescribed by the participant's physician.
- B. Participation in the development and implementation of the individual participant's plan of care.
- C. Ongoing monitoring of each participant's health status.
- D. Maintenance-therapy treatment as recommended by a therapist.

E. Coordination of orders from the participant's physician.

1102.3 Therapeutic services shall be provided to, or coordinated for, each participant, as needed, when recommended by a therapist or prescribed by a physician.

1102.3.1 Therapeutic services shall include occupational, physical, and speech therapy.

1102.3.2 The program shall establish written agreements with occupational, physical, and speech therapists to define the nature and extent of the working relationship.

1102.3.3 Program staff members shall provide therapeutic services to participants following a plan of care devised by a therapist.

1102.3.4 Program staff members shall provide maintenance therapy to meet the particular needs of a participant when indicated by the program therapy consultants or the participant's physician. The program's nurse shall supervise the administration of maintenance therapy to participants.

1102.4 Program staff members shall provide individual and group activity programs that offer social, recreational, and educational events.

1102.4.1 The dignity, interests, and therapeutic needs of individual participants shall be considered in the development of activity programs.

1102.5 Program staff members, under the supervision of a nurse, shall provide personal care services; and shall offer training and assistance in dressing, grooming, personal hygiene, use of special aids, accident prevention, and activities of daily living.

1102.5.1 Personal care services and assistance with activities of daily living shall be provided in a safe and hygienic manner, with recognition of each individual participant's dignity and right to privacy, and in a manner that encourages the maximum level of independence.

1102.6 Programs shall provide a noon meal and two snacks per day for each participant every full day he/she attends the program.

1102.6.1 Food shall be prepared under the direction of a nutritionist or registered dietician.

1102.6.2 The noon meal shall be equivalent to at least one-third the recommended daily dietary allowance established by the U.S. Department of Agriculture (USDA).

1102.6.3 The program shall provide or arrange for any special diets, if required by a participant and prescribed by his/her physician.

1102.6.4 The program shall offer or arrange for nutritional counseling, as necessary.

1102.7 The program shall assist participants and their families with personal, social, family, and adjustment problems.

1102.8 The program shall provide or arrange for mental health and substance abuse services for participants when indicated by a physician or other appropriate health care professional.

1102.8.1 Mental health and substance abuse services shall be documented in the individual participant's plan of care.

1102.9 The program shall provide transportation and/or assist in arranging transportation services for participants and maximize the use of transportation arranged by the participant's family.

1102.9.1 When transportation is provided to participants through program operated vehicles, the operation of each vehicle shall be in conformance with all applicable state and federal regulations relative to both driver and vehicle.

1102.10 The program shall establish written emergency policies and procedures. Emergency procedures shall include at least the following:

- A. A written plan and/or agreement for emergency care.
- B. A written plan and/or agreement for emergency transportation.
- C. An easily located file for each participant containing at least the following:
 - 1. Name and telephone number of his/her physician;
 - 2. Hospital preference;
 - 3. Insurance information;
 - 4. Medications and allergies;
 - 5. Current diagnoses and history;
 - 6. Name and telephone number of emergency contact;
 - 7. Copy of any advance directive, power of health care attorney, etc.;

- 8. Photograph (for participant identification).
- D. A conspicuously displayed notice indicating emergency fire procedures in accordance with local and state fire department regulations.
- E. Training for participants in emergency procedures, records of which must be kept.
- F. Training for direct program staff members, including drivers, in emergency procedures, cardiopulmonary resuscitation (CPR) and the Heimlich Maneuver by an approved CPR instructor, records of which must be kept.

1103 The program shall provide a balance of purposeful activities to meet the participants' interrelated needs and interests (social, intellectual, cultural, economic, emotional, physical, and spiritual).

1104 Program activities and services shall be designed to promote personal growth and enhance the self-image, and/or improve and maintain the functioning level of participants to the extent possible.

1105 Participants shall be encouraged to take part in activities, but may choose not to do so or may choose another activity.

1106 Participants shall be allowed time for rest and relaxation and to attend to personal and health care needs.

1107 Activity opportunities shall be available whenever the program is in operation.

1108 If a participant receives services from several community agencies, the program shall coordinate with the participant's case manager to ensure that services are not duplicated.

1109 Programs shall procure or arrange for ancillary services to meet needs identified through the assessment and individual care plan process.

1109.1 Ancillary services shall include education for the participant and/or family caregiver and/or staff and may be delivered on a one-to-one or group basis.

1109.2 Ancillary services shall be provided within the framework of the individualized plan of care and as part of the overall array of services the participant receives.

1110 Professional therapy services may address remediation but shall also focus on adaptive and compensatory techniques.

1110.1 Programs providing services defined by professional practice standards shall ensure that these standards are met.

1111 The scope and intensity of ancillary services shall vary depending upon the needs of the program's participants and the range of services provided by the program.

ADS 1200 MEDICATION AND RELATED SERVICES

1201 The program shall administer medications to participants as required and in accordance with state laws.

1202 Participants shall have the right to refuse any and all medications.

1202.1 The program shall inform the participant's family when a participant has refused medication(s). The nurse shall inform the participant's physician, as she/he deems appropriate.

1202.2 The program shall have the right not to accept, and/or to discharge a participant who refuses assistance with medications if the program reasonably feels that the participant cannot safely possess and control his/her medications.

1202.3 The program shall record each instance of medication refusal by a participant in the participant's individual record.

1203 All medications in the facility shall be stored securely and in a manner to prevent spoilage, dosage errors, administrative errors, and inappropriate access.

1204 Licensed staff, including nurses and unlicensed persons who have completed a state-approved course in drug administration and are under indirect supervision by a nurse, physician or pharmacist, may administer medication and monitor health indicators.

1205 All medications shall be checked against a physician's orders by a nurse or pharmacist.

1206 All medications shall be in the original pharmacy-dispensed container with a proper label and directions attached.

1207 Injectable medications, including but not limited to insulin, shall be administered by a nurse.

1208 Individual medication records shall be retained for each participant to whom medications are being administered and each dose administered to the participant shall be properly recorded.

1208.1 Any medication administered by the program and refused by a participant shall be documented and reported as appropriate.

1208.2 Such records shall be retained by the program for five (5) years in accordance with the provisions of Confidentiality of Health Care Information, R.I.G.L.5-37.3-1 et.seq.

1209 A nurse shall monitor the medication regimen for all participants. He/she shall:

- A. Evaluate the health status of the participant by identifying symptoms of illness and/or changes in mental and/or physical health status;
- B. Make recommendations to the family or physician regarding any medication needs or other health needs requiring follow up; and
- C. Follow up on previous recommendations.

1210 At the end of the program day, or when the shift ends, the nurse and/or certified medication technician (CMT) shall count all controlled substances and sign the controlled substance book. If the nurse and/or CMT on duty at the next shift or at the beginning of the next program day is not present during the above count, s(he) shall count all controlled substances and sign the controlled substance book immediately after beginning the work period. Any discrepancies in count shall be reported immediately to the program director.

1211 Unused or discontinued prescription medications are the property of the participant and shall be given to the participant's family, whenever possible.

1211.1 Any unused or discontinued prescription medications that are left with a program shall be disposed of in accordance with Rhode Island Department of Health Rules and Regulations Governing the Disposal of Legend Drugs, as amended, promulgated pursuant to R.I.G.L. 21-28-5.07 and 21-31, Legend drugs means any drug so designated pursuant to the provisions of R.I.G.L.21-31-15(k); and said drug shall be labeled Caution: Federal Law Prohibits Dispensing Without a Prescription.

1211.2 The program shall dispose of all legend drugs not classified as controlled substances in one of two ways:

- A. As a solid waste provided that all the following conditions are met: (1) the legend

drugs are rendered unrecognizable; (2) the legend drugs would not pose a threat to the public or to the environment; and (3) the legend drugs cannot be recycled or:

B. As regulated medical waste through the use of an entity holding a regulated medical waste transporter permit issued pursuant to the requirement of Rules and Regulations Governing the Generation, Transportation, Storage, Treatment, Management & Disposal of Regulated Medical Waste in Rhode Island (DEM-DAH-MW-01-92), Rhode Island Department of Environmental Management, June 1994.

1211.3 The program shall dispose of all legend drugs classified as controlled substances (i.e., any drug, substance or immediate precursor in Schedules I-IV of R.I.G.L.21-28-2.08) in accordance with federal Drug Enforcement Administration, Department of Justice, A Procedure for Disposing of Controlled Substances; Title 21 Code of Federal Regulations (CFR) Part 1307.21, p. 81 (April 1, 1996 edition) and all other applicable federal, state and local regulations.

ADS 1300 PARTICIPANT DISCHARGE AND FOLLOW-UP

1301 The program shall establish and implement written procedures for discharge and follow-up.

1302 A participant may be discharged from the program under the following circumstances:

- A. He/she demonstrates sufficient improvement for more independent living.
- B. He/she requires specialized institutional care, due to illness.
- C. He/she develops behavioral problems that may endanger and/or disrupt other participants or staff members.
- D. He/she wishes to discontinue participation in the program.

1303 Discharge procedures shall include at least the following:

- A. A discharge summary;
- B. Recommendations for continuing care;
- C. In consultation with the participant, family member or guardian, referral to community service agencies for any appropriate services, if the participant is returning to more independent living.

1304 Follow-up for up to three (3) months shall be provided for each participant discharged to independent living or to an institution on a short-term basis of less than six (6) months.

1304.1 Follow-up procedures shall be designed to allow the program to evaluate the success of the discharge plan and to ensure that the participant is receiving necessary services.

1305 The program shall complete and maintain on file a discharge form indicating a discharge plan for each participant leaving the program.

1305.1 The program shall discuss and agree upon the discharge plan with the participant and his/her family as far in advance of discharge as possible.

1306 Pursuant to R.I.G.L. 42-66-17, any adult day services program which refers participants to any health care facility licensed pursuant to chapter 17 of title 23 or to a residential care/assisted living facility licensed pursuant to chapter 17.4 of title 23 or to a licensed adult day services program in which the referring entity has a financial interest shall, at the time a referral is made, disclose the following information to the participant:

- A. That the referring entity has a financial interest in the facility or provider to which the referral is being made; and
- B. That the participant has the option of seeking care from a different facility or provider which is also licensed by the state to provide similar services to the participant.

1306.1 The program shall document this financial disclosure in the individual participant's file.

1306.2 Noncompliance with ADS 1306 shall constitute grounds to revoke, suspend, or otherwise discipline the licensee or to deny an application for licensure by the Director, or may result in imposition of an administrative penalty in accordance with R.I.G.L. 23-17.10.

ADS 1400 OUTREACH

1401 The program shall establish an outreach plan designed to reach the population that is at high risk for institutionalization and to inform the community at large of the program's services.

1402 The outreach plan may include the following:

- A. A program brochure.
- B. Letters to physicians, health facilities, and social services agencies in the area, informing them of the program and its services.
- C. Documentation of meetings with community services agencies and community leaders to develop referral mechanisms, such as visiting nurses associations, hospital social service departments, home health agencies, and hospital discharge planners.
- D. Displays in community facilities.
- E. Open house for the general public and community groups.
- F. Articles and/or advertisements in local newspapers and other publications..
- G. Web site, if program has capacity for same.

1403 A copy of the outreach plan and documentation that it is being carried out shall be available to Department inspector(s).

ADS 1500 PHYSICAL PLANT

1501 The facility housing the program shall be constructed, equipped, and maintained to protect the safety and well-being of participants.

1501.1 The facility shall comply with applicable state and local building regulations and zoning, fire, and health codes and ordinances, including Rhode Island State Fire Safety Code, R.I.G.L. 23-28.1, and Rhode Island State Building Code, R.I.G.L. 23-27.3.

1501.2 The facility shall comply with requirements of the Americans with Disabilities Act of 1990.

1501.3 A facility with participants who are blind, deaf and /or physically disabled shall be subject to the applicable requirements of the American National Standards Institute (ANSI STANDARDS), 1961.

1501.4 The program shall obtain annual certification from its local fire department approving the facility for program operation.

1501.4.1 Such certification shall indicate the maximum daily occupancy.

1501.4.2 The program shall submit copies of such certifications to the Department with application for license.

1502 The sign for the facility shall be visible, and the entrance to the facility shall be clearly

identified.

1503 The program, when it is co-located in a facility housing other services, shall have its own separate identifiable space for main activity areas during operating hours.

1504 The program shall have sufficient space to accommodate the full range of program activities, services, and equipment.

1504.1 Each facility shall have the following areas:

- A. A dining area;
- B. A food preparation area in compliance with the applicable regulations of the Rhode Island Department of Health;
- C. A project area equipped with adequate table and seating space (a dining area may be used);
- D. A group activity area;
- E. A private, enclosed space, free from disruption, for individual nursing services and counseling;
- F. A properly equipped rest area.
- G. Properly equipped, handicapped accessible bathrooms.

1504.2 There shall be private space to permit staff to work effectively and without interruption.

1504.3 Identified space shall be available for participants and/or family/caregivers to have private discussions with staff.

1504.4 There shall be storage space for program and operating supplies.

1504.5 Outside space that is used for outdoor activities shall be safe, accessible to indoor areas, and accessible to persons with a disability.

1505 The facility shall provide a comfortable, sanitary environment for the frail elderly population it serves.

1505.1 All rooms utilized by participants shall have proper ventilation.

1505.2 All steps, stairs, and corridors shall be suitably lighted. Stairs used by participants shall have bannisters, hand rails or other types of support. All stair treads shall be well maintained to prevent hazards.

Licensing Standards, RIDEA, 1999

1505.3 Halls and exit ways shall be free from all encumbrances and/or impediments.

1505.4 Space shall be available for the safe arrival and departure of participants.

1505.5 Illumination in all areas shall be adequate and glare shall be avoided.

1505.6 Sound transmission shall be controlled.

1505.7 Conditions shall be maintained within a comfortable temperature range to accommodate the population served.

1505.8 Sufficient, appropriate furnishings shall be available for the entire participant population present.

1506 The facility's restrooms shall be located as near the activity area as possible.

1506.1 Restrooms shall be equipped with properly anchored handrails and butterfly handles on the sinks.

1506.2 Every restroom door shall be designed to permit the opening of the locked door from the outside.

1506.3 Each facility shall have at least one shower or other accommodation for providing personal hygiene to participants.

1507 The overall design of the facility shall facilitate the participants' movement throughout the facility and encourage involvement in activities and services.

ADS 1600 SAFETY AND SANITATION

1601 The facility and grounds shall be safe, clean and accessible to all participants.

1602 Smoking shall not be permitted in the facility.

1603 Safe and sanitary handling, storing, preparation and serving of food shall be assured.

1603.1 The program shall comply with all applicable provisions of the sanitation in food establishments law (R.I.G.L. 21-27-1 et.seq.) and with all rules, regulations and standards promulgated by the Rhode Island Department of Health pursuant to this law.

1603.2 Programs which meet the definition of Afood establishment@ under this law must be registered annually with the state director of health (R.I.G.L.21-27-10).

1604 At least two well-identified exits shall be available to participants.

1605 Universal Precautions shall be used by all staff.

1606 The facility shall be free of such hazards as exposed electrical cords, loose area rugs and steep grades.

1606.1 Steps and curbs shall be painted and the edges of stairs marked appropriately to highlight them.

1607 Procedures for fire safety as approved by the state and local fire authorities shall be adopted and posted.

1607.1 Appropriate fire extinguishers shall be installed on each occupied level of the facility and maintained in a usable condition, inspected at specified intervals as stipulated by manufacturers and local and state fire authorities.

1607.2 The facility shall develop and maintain a written plan and procedure for the evacuation of the premises in case of fire or other emergency.

1607.2.1 An evacuation plan shall be posted in each room.

1607.2.2 Emergency steps of action shall be clearly outlined and posted in conspicuous locations throughout the facility.

1607.2.3 Drills simulating emergency conditions to test the effectiveness of the plan shall be conducted on a quarterly basis with documentation of observed ability of participants and staff to carry out evacuation procedures.

1608 Emergency first aid kits shall be accessible to staff.

1609 There shall be sufficient maintenance and housekeeping personnel to assure that the facility is clean, sanitary, and safe at all times.

1609.1 Toxic substances, whether for activities or cleaning, shall be stored in a locked area not accessible to participants.

1609.2 A safety guide for dealing with spills of toxic substances, chemicals, and other liquids including blood shall be posted and followed by all staff.

Licensing Standards, RIDEA, 1999

1609.3 Insect infestation control shall be scheduled at a time when participants are not in the facility.

1610 Equipment shall be adequately and safely maintained.

1610.1 The program shall have a sufficient budget for equipment maintenance, repair, or replacement of all equipment.

1611 Programs shall have on site at least the following health care and safety equipment:

- A. An emergency first aid kit.
- B. A scale for weighing participants.
- C. A blood pressure cuff and stethoscope.
- D. A thermometer.
- E. A locked space for medications.
- F. Proper refrigeration for medications (36 to 46 degrees F.).
- G. Several blankets.
- H. A portable oxygen tank for emergencies.