

**MONITORING REPORT  
ADULT DAY CARE AND ADULT DAY HEALTH**

DATE OF VISIT: \_\_\_\_\_

I. PROGRAM: \_\_\_\_\_ COUNTY: \_\_\_\_\_

II. TYPE OF PROGRAM:  ADC  ADH  ADC/ADH

III. TYPE OF VISIT: ( ) Announced ( ) Unannounced

IV. ENROLLMENT: # Full-time \_\_\_\_ # Part-Time \_\_\_\_ Month Reviewed \_\_\_\_\_  
ATTENDANCE: # Participants at time of visit \_\_\_\_ # of Staff at time of visit \_\_\_\_\_

V. CONCERNS FROM PREVIOUS VISIT: \_\_\_\_\_

Have these concerns been resolved? ( ) YES ( ) NO (If no, complete DSS Form 6215)

**DO NOT COMPLETE IF THE PROGRAM DOES NOT OFFER SPECIAL CARE SERVICES AS PER SECTION VI, PART 1 OF THE DAAS-1500 OR DAAS-6205**

VI. AREA REVIEWED:

**Special Care Services - Standards, Appendix D, Pages 65-68**

Yes No N/A **Enrollment:** (10A NCAC 06R .0904 and 06S .0603)

- ( ) ( ) Disclosure information is provided to individuals and/or responsible parties seeking enrollment. The Disclosures address policies and procedures in Rule .0902.
- ( ) ( ) The participant's medical exam specifies a diagnosis, disability or condition consistent with the special care service.
- ( ) ( ) ( ) Participants transferring from standard to specialized day care services meet the criteria for specialized care, and family agrees to the transfer.

Yes No **Individual Service Plans** (10A NCAC 06R .0905 and 06S .0604)

- ( ) ( ) Individual service plans are based on the participant's needs, interests and level of abilities.
- ( ) ( ) Individual service plans specify programming involving environmental, social and health care strategies.

Yes No **Program Plan** (10A NCAC 06R k.906 and 06S .0605)

- ( ) ( ) The program plan provides for a balance of activities that promote an optimum level of functioning in all activity areas including personal care activities.

Yes No **Staff Orientation and Training** (10A NCAC 06R .0907 and 06S .0606)

- ( ) ( ) The program director has documented training in the special care population.
- ( ) ( ) The program director has a written plan for training staff identifying content, sources, evaluations, and scheduling of training. The plan is updated annually.
- ( ) ( ) The program director assures that, within a month of employment, each staff person assigned to special care demonstrates knowledge of the needs, interests, and abilities of each participant. This is documented in the program's files.
- ( ) ( ) Each staff person working directly with participants completes a minimum of two population-specific educational or training experiences annually.
- ( ) ( ) Training experiences for each staff member are documented in the program's files.

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