

ADULT DAY CARE AND DAY HEALTH NOTICE OF VIOLATION OF STANDARDS

I. Program: _____ **County:** _____

II. Reference:

III. Reason for Decision:

IV. Program Director's Comments:

V. Corrective Action Plan:

VI. Corrective Action Completion Date: _____

VI. Signatures:

Coordinator or Specialist **Date** **Program Director** **Date**

VII. Continued by: () **DSS - 6215** _____ **(# of additional Forms)** () **Letter**

DSS – 6215
(5/08)

Distribution: **Agency File – Original**
Program Director – Copy
Adult Day Care Consultant – Copy

PLEASE READ THE INFORMATION ON THE BACK OF THIS FORM!

The North Carolina General Statutes (Chapter 131D-6) requires that all adult day care and day health programs, as defined by the statute, operate under standards adopted by the Social Services Commission. Your program has been determined by authorized staff of the county department of social services or local health department to be out of compliance with one or more of these standards, as identified and described in items II and III on the front of this form. A completion date has been set for each violation as shown in item VI on the front of this form. In item V you should develop a written corrective action plan specifying what steps will be taken to bring the program into compliance. If corrective action to comply with the standards is not complete by the date indicated, negative action may be taken. A fine may be imposed, the certification status may be changed to provisional, or certification may be denied or terminated.

You have the right to ask the Adult Day Coordinator or Adult Day Health Specialist for assistance in understanding the reason for the determination of non-compliance and in developing a corrective action plan to bring the program into compliance. If you disagree with the determination of non-compliance, you have the responsibility to make an effort to resolve the difference with the county department of social services or local health department. Any comments that you have may be noted in item IV. Your program is expected to work cooperatively with staff from the county department of social services or local health department in all matters pertaining to compliance with the Adult Day Care and Day Health Services Standards for Certification.

The signatures of the authorized staff of the county department of social services or local health department and the program director are required in item VII. The use of additional DSS 6215 (s) or a letter must be noted in item VII on the front of this form.