Department of Health & Welfare **Licensing & Certification** **Residential Care/Assisted Living Checklist**	Version Date: 12/10 Page 1 of 2
Functional Area: Hourly Adult Care	**Checklist #12** Yes = In Compliance No = Further Action

Objective: Ensure facilities providing hourly adult care offer choice, dignity and independence while maintaining a safe, humane, and home-like living arrangement for individuals needing assistance with daily activities and personal care.

Specific Criteria	Yes	No

Policy and Procedure: IDAPA 16.03.22.155
1. If you offer hourly adult care at your facility, have you developed written policies and procedures which include the following:
    a. A description of services you offer, including transportation services (if offered), meals, activities, and supervision?
    b. Types of individuals who may or may not be accepted for hourly care?
    c. Cost of the program to the individual?
    d. Health and other pertinent information regarding the individual's needs?
    e. Emergency telephone numbers of family members and physician or authorized provider, and other identification information?
    f. Time periods of the program not to exceed 14 consecutive hours in a 24 hour period? {IDAPA 16.03.22.155}		

2. Does the administrator assure that the facility's policies and procedures are implemented for hourly adult care? {IDAPA 16.03.22.345}		
Requirements: IDAPA 16.03.22.345 1. Are all medications and treatments for your hourly adult care individuals ordered by a physician or authorized provider? {IDAPA 16.03.22.345.01}		

2. Are you assured the assistance with medication by unlicensed assistive personnel in the facility follows "Rules of the Idaho Board of Nursing" (IDAPA 23.01.01) as follows:
    a. Each hourly adult care individual brings appropriately labeled medications for the stay?
    b. The facility safeguards the hourly adult care individual's medications while at the facility? {IDAPA 16.03.22.345.02}		

Specific Criteria	Yes	No

3. Are you following the restrictions for hourly adult care as follows:
     a. Hourly adult care services may be provided to only as many individuals as the facility can care for without interfering with the normal activities of the facility?
     b. Staffing must be based upon the needs of all residents in the facility including full-time residents <u>and</u> hourly adult care individuals?
     c. The facility provides accommodations that would be appropriate for the time frame the individuals are in the facility, such as lounge chairs, recliners, and couches in the daytime?
     d. The facility can provide at least 3 feet of space between napping furniture?
     e. Beds and bedrooms are made available for the sleeping hours when needed by the hourly adult care individual? (This bed will not be counted as a licensed bed if the individual sleeps over.)
     f. Beds and bedrooms of regular residents will not be used by hourly adult care individuals?
     g. Individuals requiring skilled nursing care or for whom the facility cannot adequately provide services and supervision, will not be admitted to the hourly adult care program?
                     {IDAPA 16.03.22.345.03}		

Record Keeping or Documentation: IDAPA 16.03.22.720
 1. Do you maintain a record for each hourly adult care individual which includes the following:
     a. Admission identification information including responsible party and emergency telephone numbers of family members and the physician or authorized provider?
     b. Pertinent health and social information relevant to the supervision of the individual?
     c. Care and services provided to the individual including medication assistance? {IDAPA16.03.22.720}		

2. Do you maintain records for each adult hourly care individual for 3 years? {IDAPA16.03.22.720}		

The check lists can be used as a quality improvement tool and are offered as a helpful guide.
They do not take the place of the rule requirements.
It is highly recommended that the check lists be used in conjunction with the rules themselves.