

TO BE RESCINDED

173-39-02.1 **Adult day service.**

(A) Adult day service (ADS) is a non-residential, community-based service designed to meet the needs of functionally and/or cognitively impaired older adults through an individualized care plan that encourages optimal capacity for self-care and/or maximizes functional abilities. ADS consists of structured, comprehensive and continually supervised components that are provided in a protective setting. Consumers who receive ADS attend on a planned basis during specified hours.

(B) Eligible providers of ADS are ODA-certified long term care agency providers.

(C) There are two levels of ADS: enhanced and intensive. The case manager must assess the consumers' needs and preferences and must specify which level of ADS will be approved for each consumer.

(1) Enhanced ADS providers must be capable of providing:

(a) Supervision of all activities of daily living (ADLs), supervision of medication administration, hands-on assistance with ADL activities (except bathing) and hands-on assistance with medication administration;

(b) Comprehensive therapeutic activities;

(c) Intermittent monitoring of health status; and,

(d) Hands-on assistance with personal hygiene activities (except bathing).

(2) Intensive ADS providers must be capable of providing:

(a) The service described in paragraph (C)(1) of this rule;

(b) Hands-on assistance with two or more ADLs;

(c) Hands-on assistance with bathing;

(d) Health assessments;

(e) Regular monitoring of and intervention with health status;

- (f) Skilled nursing services (e.g., dressing changes and other treatments), and rehabilitative nursing procedures;
- (g) Rehabilitative and restorative services, including physical therapy, speech therapy, and occupational therapy; and,
- (h) Social work services.

(D) Adult day service centers must be certified as enhanced or intensive providers.

- (1) A center that is certified to provide intensive ADS meets the certification requirements for the enhanced level.
- (2) A center that is certified to provide the intensive level may arrange for or directly furnish those components described in paragraphs (C)(2)(f) to (C)(2)(h) of this rule.

(E) A unit of ADS attendance does not include transportation time. A unit of ADS attendance is measured in time according to the following:

- (1) One-half unit is less than four hours ADS per day;
- (2) One unit is four through eight hours ADS per day; and,
- (3) A fifteen-minute unit is each fifteen-minute period of time over eight hours up to, and including, a maximum of twelve hours of ADS per day.

(F) ADS transportation must be furnished by the provider, either directly or by contract. The transportation provider must meet the transportation requirements found in rule 173-39-02.13 of the Administrative Code. A "unit of transportation" is not included in the ADS unit of service described in paragraph (E) of this rule. A unit of ADS transportation is a round trip, a one-way trip, or a mileage rate with the trip cost based on a case manager's predetermined distance between the consumer's residence and the ADS center multiplied by an established ADS mileage rate.

(G) Provider agency and center requirements:

- (1) If the ADS center is housed in a building with other services or programs, the provider must assure that a separate, identifiable space and staff is available for ADS during operational hours.

- (2) The ADS facility must meet American With Disabilities Act accessibility guidelines (28 CFR Part 36) issued by the department of justice.
- (3) The center must have at least sixty square feet per ADS participant excluding hallways, offices, rest rooms and storage areas.
- (4) The provider must keep participant medications in locked storage and at appropriate temperatures.
- (5) The provider must keep toxic substances stored in an area inaccessible to participants.
- (6) The provider must develop and annually review a fire inspection and emergency safety plan. The provider must post evacuation procedures in conspicuous areas throughout the center.
- (7) The provider must conduct and document periodic inspection (at least annually) and provide routine maintenance of fire extinguishers, smoke alarms, and conduct quarterly evacuation drills.
- (8) The center must have at least one working toilet for every ten ADS participants, of which one toilet must be wheelchair accessible.
- (9) A center that is certified to provide intensive ADS services must have appropriate bathing facilities for participants.
- (10) At least two staff must be present in the ADS center when more than one participant is in attendance. At least one of the two staff must be a paid direct care staff and at least one staff person present must be certified in CPR.
- (11) The staff to participant ratio must be at least one staff to six participants at all times.
- (12) A RN or LPN under the direction of a RN must be on-site at the ADS center to provide nursing services that require the skills of a RN or a LPN under the direction of an RN, and that are within the nurse's scope of practice.
- (13) The daily attendance roster must include documentation of arrival and departure times of each consumer, the consumer's mode of transportation, the consumer's signature and the signature of the ADS staff person. If the

consumer is unable to sign, this must be noted in the care plan and the consumer may use initials or other mark.

- (14) An activity director must supervise consumer activities.
- (15) Daily and monthly planned activities must be posted in conspicuous locations throughout the center.
- (16) A noon meal and snacks must be procured or prepared by the provider.
 - (a) The menu for meals and snacks must be approved by a licensed dietitian.
 - (b) Each meal must provide one-third of the daily dietary guidelines for Americans and recommended dietary allowance (RDA) dietary reference intakes (DRI) reference values unless a special meal is approved by a licensed dietitian.
 - (c) The provider must adopt a consumer choice plan that offers the consumer an opportunity to make a choice about the food served by using one or more of the following methods:
 - (i) Offer consumer choices from two or more of the following groups of food: milk; bread; fruit; vegetable; meat; and dessert.
 - (ii) Offer consumers the opportunity to provide suggestions for menu planning at least annually.
 - (iii) Implement an alternative choice plan approved by ODA's designee.
 - (d) The provider must develop a system that offers consumer access to the ingredient content of meals. This system must receive prior approval from ODA's designee.
 - (e) The provider must document that all meals are prepared in compliance with Chapter 3117. of the Revised Code and Chapter 3717-1 of the Administrative Code (Ohio Uniform Food Safety Code) or, for a provider in another state, in compliance with equivalent laws. The provider must maintain a copy of a current food service licenses, issued by the state, for the preparer and/or subcontractor.

- (f) The provider must maintain appropriate licenses for the food preparer and demonstrate the food preparer is in compliance with local health department inspections and Ohio department of agriculture inspections, or for a provider in another state, demonstrate compliance with equivalent state and local requirements and inspections.
- (g) The provider must report all citations to ODA or its designee within five working days of receipt of a report following local department of health and Ohio department of agriculture inspections or, for a provider in another state, equivalent state and local inspections, of food preparer and plans for corrective action and follow-up.

(H) Consumer service management

- (1) The provider must conduct an initial intake assessment of the consumer within the first two days of attendance. The center may substitute a copy of the case manager's assessment of the consumer if the assessment occurred no more than thirty days prior to the consumer's attendance at the center.
- (2) The provider initial intake assessment must include the following components:
 - (a) Functional and cognitive profiles which also identify ADLs and instrumental activities of daily living (IADLS) which require attention or assistance by ADS center staff;
 - (b) A social profile including social activity patterns, life events, community services, caregiver data, formal and informal support systems, and behavior patterns; and,
 - (c) A health assessment must be completed for each consumer within thirty calendar days of first attendance, conducted by a RN or a physician, or a licensed practical nurse (LPN) under the direction of a RN that includes, but is not limited to, a health profile including risk factors, psychosocial profile, diet, medications, and the name and phone number of attending physician.
- (3) A care plan must be developed by a RN, LPN or physician for each consumer within the consumer's first thirty days of attendance or ten units of service, whichever comes first. The care plan must identify the consumer's strengths, needs, problems or difficulties, goals, and objectives. The care plan must document the following elements:

- (a) Interests, preferences and social rehabilitative needs;
 - (b) Health needs;
 - (c) Specific goals, objectives and planned interventions of ADS services that enable the goals; and,
 - (d) A description of the consumer and/or caregiver involvement in development of the care plan.
- (4) The provider must document physician authorization prior to administering medications or providing nursing services, therapeutic meals, nutrition consultation, or therapeutic service(s). The provider must obtain physician authorization for the plan of treatment at least every ninety days for each consumer that receives medications, nursing services, nutrition consultation, and/or therapeutic services.
- (5) Document and maintain a consumer record of each service delivered, including date of contact, type of contact and name(s) of person(s) having contact with the consumer.
- (6) The provider's documentation must identify that the consumer's needs and the corresponding level of ADS service authorized by the case manager are being provided at the ADS center.
- (7) An interdisciplinary care conference with the ADS staff that may include the consumer and/or caregiver must be conducted and documented for each consumer at least every six months, and the plan must be revised in accordance with changes in consumer status, condition, preferences and response to service, when applicable. The case manager must be invited to participate in the interdisciplinary care conference and be notified of the date and time in advance.
- (I) The provider must document compliance with the following personnel requirements:
- (1) The provider must document that all ADS staff participate in at least eight hours of in-service or continuing education on appropriate topics each calendar year.
 - (2) Prior to providing personal care activities, the provider must provide and document task-based instruction to ADS direct care staff.

- (3) Evidence of task-based instruction and continuing education programs provided to ADS direct care staff must list the instructor's title, qualifications and signature, date and time of instruction, content of the instruction and name and signature of ADS direct care staff completing the instruction or continuing education program.
- (4) The provider must document and retain evidence that ADS staff possess the following qualifications:
 - (a) Appropriate, current and valid licensure for all registered nurses, licensed practical nurses, social workers, physical therapists, physical therapy assistants, speech therapists, dietitians, occupational therapists and occupational therapy assistants or other licensed professionals.
 - (b) Activity director/coordinator must have a baccalaureate or associate degree in recreational therapy or a related degree; or must demonstrate proof of successful completion of the national certification council of activities professionals; or two years experience as an activity director or coordinator related position.
 - (c) Activity program staff must be high school graduates, or must have successfully completed a GED, or have a minimum of two years of work experience providing personal care activities and/or social/recreational services under the direction of a licensed or certified health care professional.
 - (d) Staff that provide personal care assistance to enrollees must be high school graduates, or must have successfully completed a GED or vocational program in a health or human service field, or have a minimum of two years employment experience in providing and/or assisting with personal care or social activities.
 - (e) Transportation staff must meet all transportation requirements set forth in rule 173-39-03-13 the Administrative Code.
 - (f) Assure all employees who have direct, face-to-face contact with consumers complete required orientation training prior to working with consumers. The training must cover the following topics:
 - (i) Expectations of employees;

- (ii) The employee code of conduct;
 - (iii) An overview of personnel policies;
 - (iv) Incident reporting procedures;
 - (v) Agency organization and lines of communication; and,
 - (vi) Emergency procedures.
- (J) The provider must maintain evidence of compliance with personnel requirements, including but not limited to:
- (1) Job descriptions for each position;
 - (2) Documentation of each employee's qualifications for the service(s) to be provided;
 - (3) Performance appraisals for all workers;
 - (4) Documentation of compliance with required staff orientation training;
 - (5) Continuing education requirements;
 - (6) Current licensure; and,
 - (7) Expectations of employees as described in rule 173-39-03 of the Administrative Code.

Effective: 03/20/2011

R.C. 119.032 review dates: 11/18/2010

CERTIFIED ELECTRONICALLY

Certification

03/10/2011

Date

Promulgated Under: 119.03
Statutory Authority: 173.02, 173.391
Rule Amplifies: 173.39, 173.391, 173.431
Prior Effective Dates: 03/31/2006