# ADULT DAY SERVICES

## SERVICE SPECIFICATIONS

**TABLE OF CONTENTS**

<table>
<thead>
<tr>
<th>SECTION</th>
<th>PAGE</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.0 Objective</td>
<td>1</td>
</tr>
<tr>
<td>2.0 Units of Service</td>
<td>2</td>
</tr>
<tr>
<td>3.0 Service Requirements</td>
<td>2</td>
</tr>
<tr>
<td>4.0 Facility Requirements</td>
<td>4</td>
</tr>
<tr>
<td>5.0 Nutrition Requirements</td>
<td>4</td>
</tr>
<tr>
<td>6.0 Staffing Requirements</td>
<td>5</td>
</tr>
<tr>
<td>7.0 Client Service Management</td>
<td>6</td>
</tr>
<tr>
<td>8.0 Personnel Qualifications</td>
<td>7</td>
</tr>
<tr>
<td>9.0 Direct Care Staff Training</td>
<td>9</td>
</tr>
</tbody>
</table>
1.1 **OBJECTIVE**

1.1 Adult Day Service (ADS) is a community-based service designed to meet the needs of functionally-impaired older adults and to encourage optimal capacity for self-care and/or maximize functional abilities.

1.2 ADS consists of structured, comprehensive and continually-supervised components that are provided in a protective setting and delivered based on individualized care plans.

1.3 There are two levels of ADS: Enhanced and Intensive. The levels are based upon the services furnished. Adult Day Service centers must be certified by Council on Aging of Southwestern Ohio (COA)℠ as Enhanced or Intensive. A center certified to provide Intensive ADS meets the certification requirements for the Enhanced level.

1.4 The Care Manager assesses the client’s needs and preferences when determining the client’s appropriateness for ADS and which level of ADS to approve.

**Eligibility Criteria**

Clients who are eligible for this service must be enrolled in the ESP program and meet one of the following criteria:

- The Client has functional impairments:
  - (a) Cognitive Impairment (i.e. Dementia, Alzheimer’s, etc.).
  - or
  - (b) Physical Impairment including:
    - (i) Impaired mobility (may include a prescription from a physician for a plan of care, which includes therapies and/or rehabilitation)
    - (ii) Impairments which do not require therapy, but preclude clients from attending a Senior Center, (i.e. severe arthritis, Parkinson's disease, etc.).
    - or

- The client requires a supervised, supportive environment (may include medication administration).
  - or

- The primary caregiver is in need of respite service.
  - or

- No community based service/facility available in client’s community.
2.0 UNITS OF SERVICE

2.1 A unit of service for ADS attendance is measured in time according to the following:

(a) One-half unit is less than four hours ADS per day.

(b) One unit is four or more hours ADS per day.

(c) A unit of service for ADS attendance does not include transportation time.

(d) A unit of service includes administrative costs, materials, supplies and labor expenses.

2.2 A unit of service for ADS transportation is a mileage rate, with trip cost based on a pre-determined distance between the client’s residence and the Adult Day Services center multiplied by the established ADS mileage rate.

3.0 SERVICE REQUIREMENTS

3.1 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 (activities that stimulate the mind and or/muscles are pre-planned, set-up, and structured within the written daily activities plan, i.e., art, music, bingo, trivia games, current events, outings, stretching/exercise groups. etc.);

(c) Intermittent monitoring of health status, i.e. blood pressure screening, weight monitoring, etc.; and

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

(e) Nursing services: Enhanced ADS - a Registered Nurse (RN) or a Licensed Practical Nurse (LPN) under the supervision of an RN must be on-site a minimum of eight (8) hours per month while clients are being served.
3.2 **Intensive ADS Providers must be capable of providing:**

(a) The service described in paragraph 3.1a thru 3.1c of this rule;

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

(c) Hands on assistance with personal hygiene activities, including bathing;

(d) Health assessments conducted by a licensed healthcare professional whose scope of practice includes health assessments;

(e) Regular monitoring of and intervention with health status by an RN or LPN under the supervision of an RN, i.e., blood glucose monitoring, medication dispensing;

(f) Skilled nursing services (e.g., dressing changes and other treatments) and rehabilitative nursing procedures. For Intensive Services an RN or LPN under the direction of an RN must be on-site at the ADS center to provide nursing services that require the skills of an RN or a LPN under the direction of an RN, and that are within the nurse's scope of practice.

(g) Nursing Services: Intensive ADS - an RN or a LPN, under the supervision of an RN, must be on site a minimum of eight (8) hours per week while clients are being served.

(h) Rehabilitative and restorative services, including physical therapy, speech therapy, and occupational therapy (skilled services are not reimbursable by ESP); and

(i) Social work services (not reimbursable by ESP).

(j) A center certified to provide the Intensive level may arrange for or directly furnish those components described in paragraphs 3.2 (h) and (i).

3.3 **The Provider has the option of servicing a zone with ADS services and Transportation, or with ADS services only.** The application of the Provider’s chosen option will be constant and consistent throughout the selected zone for the contract duration. A Provider may furnish or arrange transportation for a client to and from the center either directly or by contract.

(a) Transportation services include assistance with transfer to and from the vehicle.

(b) Transportation services must meet and comply with the ESP Medical Transportation Service Specifications, except for Section 2.0, Unit of Service. (Medical Transportation Service Specifications are available on COA’s website [www.help4seniors.org](http://www.help4seniors.org).)
4.0 FACILITY REQUIREMENTS

4.1 The Provider must assure that separate, identifiable space for main activity areas is available during operational hours if the center is located in a facility housing other services.

4.2 The Provider must furnish evidence that at least sixty (60) square feet of space for multipurpose use (excluding hallways, offices, restrooms and storage areas) is available per client for exclusive use of ADS clients.

4.3 The Provider must furnish at least one (1) working handicapped accessible toilet per ten (10) clients readily accessible from all program areas.

4.4 The Provider must store clients’ medications in a locked area that maintains the temperature requirements of the medications.

4.5 The Provider must store toxic substances in an area that is inaccessible to the clients.

4.6 An ADS center certified to provide Intensive ADS services must have appropriate bathing facilities for clients.

4.7 Daily and monthly planned activities must be posted in conspicuous locations throughout the center.

4.8 The Provider must develop and annually thereafter review a fire inspection and emergency safety plan.

4.9 The Provider must conduct and show evidence of an annual inspection of fire extinguishers, fire alarms and smoke alarms.

4.10 The Provider must post evacuation procedures in prominent places throughout the facility and at least quarterly conduct an evacuation drill from the center while clients are present. The Provider must retain records of each drill including the date and time the drill is completed.

5.0 NUTRITION REQUIREMENTS

5.1 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 follow the most recent Dietary Guidelines for Americans and meet 1/3 of the Dietary Reference Intakes (DRI) unless a special meal is approved by a licensed dietitian.
(c) The Provider must furnish a menu that complies with rule 173-4-05 of the Ohio Administrative Code.

(d) The Provider must adopt a client choice plan that offers the client an opportunity to make a choice about the food served by using one or more of the following methods:
   (i) Offer client choices from two or more of the following groups of food: milk; bread; fruit; vegetable; meat; and dessert.
   (ii) Offer clients the opportunity to provide suggestions for menu planning at least annually.
   (iii) Implement an alternative choice plan approved by COA’s Dietitians.

(e) The Provider must develop a system that offers client access to the list of ingredients in the content of meals.

(f) The Provider must document that all meals are prepared in compliance with local food safety laws.

(g) The Provider must possess any current, valid license that the local health department requires the provider to possess. The Provider must maintain appropriate licenses for the food preparer and demonstrate the food preparer is in compliance with local health department inspections and, as applicable, Ohio Department of Agriculture inspections, or, for a Provider in another state, demonstrate compliance with equivalent state and local requirements and inspections.

(h) Council on Aging representatives will report any reasonable cause to believe the provider is out of compliance with food safety laws to appropriate authority.

6.0 STAFFING REQUIREMENTS

6.1 At least two staff must be present in the ADS center when one or more clients are in attendance. At least one of the two staff must be paid as direct care staff and at least one staff persons present must be certified in CPR.

6.2 The staff to client ratio must be at least one staff to six clients at all times.

6.3 An activity director must supervise/direct client activities.
6.4 RN and LPN on-site staffing requirements are detailed under Sections 3.1 and 3.2.

7.0 CLIENT SERVICE MANAGEMENT

7.1 The Provider must initiate an initial intake assessment of the client within the first two days of attendance and complete the assessment within 30 calendar days.

7.2 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) within first 2 days, which require attention or assistance by ADS center staff;

(b) A social profile assessment conducted within the first 30 days of start including social activity patterns, life events, community services, caregiver data, formal and informal support systems, and behavior patterns; and

(c) A health assessment completed for each client within thirty calendar days of first attendance, conducted by a licensed healthcare professional whose scope of practice includes health assessments that includes, but is not limited to, a health profile including risk factors, psychosocial profile, diet, medications, and the professional’s name and phone number.

7.3 A care plan must be developed by a licensed healthcare professional whose scope of practice includes health assessments for each client within the client’s first thirty days of attendance or ten units of service, whichever comes first. The care plan must identify the client’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 client and/or caregiver involvement in development of the care plan.
7.4 Before administering medications or providing nursing services, therapeutic meals, nutrition consultation, or therapeutic service(s) the provider shall obtain a plan of treatment from a licensed healthcare professional whose scope of practice includes making plans of treatment. The Provider must obtain the plan of treatment at least every ninety (90) days for each for client that receives medications/treatments, nursing services, nutrition consultation, physical therapy (PT), speech therapy (ST).

Before providing a therapeutic meal, the Provider shall obtain a diet order from the licensed professional with prescriptive authority for a therapeutic meal. The diet order must be updated any time the diet order is changed, and verified at least annually. The provider shall comply with the diet order requirements under rule 173-39-02.14 of the Administrative Code.

7.5 The daily attendance roster must include documentation of arrival and departure times of each client, the client's mode of transportation, the client’s signature and the signature of the ADS staff person. If the client is unable to sign, the provider must document in the client’s file if initials or other mark will be used for service verification.

7.6 The Provider furnishing Intensive Services must document and maintain a client record of each Intensive Service delivered, i.e., bathing, health assessment, skilled nursing, PT, ST. Documentation must include date of contact, type of contact and name(s) of person(s) having contact with the client. Therapies must include the beginning and ending dates.

7.7 The Provider's documentation must identify that the client’s needs and the corresponding level of ADS services authorized by the Care Manager are being provided at the ADS center.

7.8 An interdisciplinary care conference with the ADS staff that should include the client and/or caregiver must be conducted and documented for each client at least every six months, and the plan must be revised in accordance with changes in client status, condition, preferences and response to service, when applicable. The Care Manager must be invited to participate in the interdisciplinary care conference and be notified of the date and time in advance.

7.9 The Provider must document communication with the Care Manager at a minimum of every three (3) months and, as needed, regarding client status. The documentation must be kept in file.
8.0 PERSONNEL QUALIFICATIONS

8.1 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:
   (i) Possess a baccalaureate or associate degree in recreational therapy or a related degree; or
   (ii) must demonstrate proof of successful completion of the National Certification Council of Activities Professionals; or
   (iii) have a minimum of two years experience as an activity director, coordinator or related position.

(c) Activity program staff must:
   (i) Possess a high school diploma or GED, or
   (ii) have a minimum of two years experience providing personal care activities and/or social/recreational services under the direction of a licensed or certified health care professional.

(d) Personal care assistance staff must:
   (i) Be a verified state-tested nursing assistant; or
   (ii) Successfully complete the Nurse Aide Competency Evaluation Program conducted by the Ohio Department of Health under Section 3721.31 of the Revised Code; or
   (iii) Have a minimum of 1 year verified direct personal care service under the direct supervision of an RN or LPN (as delegated by an RN). AND Pass the Provider’s written competency or oral test with a passing score of 70% AND Successfully complete the skills testing by return demonstration; or
   (iv) Have received 40 hours of Provider agency classroom training and testing. Testing shall include written or oral test and skills testing by return demonstration following classroom training/instruction with a passing score of 70%.

The training and testing shall be documented by the Provider and shall include training site information; date, length of training that includes the number of hours,
instruction material and subject areas, signature of trainer and all testing results.

The trainer must be an RN or LPN under direction of an RN. All training must be successfully completed prior to client contact.

8.2 ADS training components and skill-testing with return demonstration for personal care staff must include:

(a) *Personal Hygiene and Care
1. Bathing: bed, tub, shower, and complete, partial and/or supervision of client bathing activities.
2. Oral hygiene, including denture care.
3. Hair care.
4. Shaving.
5. Periodontal care.
8. Dressing and grooming.

(b) *Mobility
1. Turning and positioning using proper body mechanics.
2. Safe transfers and ambulating techniques.
3. Active and passive range of motion exercises.

(c) *Elimination
1. Assist toileting activity.
2. Incontinence care.
3. Catheter care limited to cleansing/positioning of external parts of drainage systems—and emptying drainage systems.

(d) *Nutrition/ Meal Assistance
1. Encourage and facilitate adequate nutritional and fluid intake.

(e) Other
1. Knowledge of basic elements of body functioning and what changes must be reported to supervisor.
2. Reality orientation and sensory stimulation.
3. *Communication skills.
4. Documentation of services provided.
5. Role and expectations of the Aide.
Standard precaution/infection control to prevent cross contamination.

1. *Hand washing techniques.
2. *Precautions with bodily fluids.

*Components requiring skills testing (Return Demonstration).

8.3 Transportation staff must meet all transportation requirements set forth in the ESP Medical Transportation Service Specifications except for Section 2.0, Unit of Service. (Medical Transportation Service Specifications are available on COA’s website www.help4seniors.org.)

9.0 DIRECT-CARE STAFF TRAINING:

9.1 The Provider must provide orientation to all direct care staff prior to the staff member furnishing any ADS. The Provider shall train the staff members on:

(a) Expectation of employees;
(b) the employee code of ethics;
(c) an overview of personnel policies;
(d) incident reporting procedures;
(e) agency organization and lines of communication;
(f) emergency procedures;
(g) task based training; and
(h) universal precautions for infection control procedures.

9.2 Each staff member must participate in at least eight (8) hours of in-service or continuing education on topics related to their position annually.

9.3 The Provider must retain records showing compliance to the staff orientation and in-service/continuing education requirements. The documentation must include:

(a) the instructor’s name, title, qualifications, and signature;
(b) the date and time of instruction;
(c) the content of the instruction; and
(d) the name and signature of the direct-care staff member completing the training.