

Participant Record Review for [Program Name]

Note: This document allows space for review of five participant records

PART I - Testing Elements R/T Participant Record	001	002	003	004	005
Contractual Agreement 70.21(1) – 70.21(5)					
Is the contractual agreement in 12 pt. type or larger?					
Does the contractual agreement include the telephone number for filing a complaint with the Department?					
Does the contractual agreement include the telephone number for reporting dependent adult abuse?					
Does the contractual agreement include a copy of participant rights?					
Does the contractual agreement include a statement to notify 90 days in advance of cessation?					
Does the contractual agreement include a copy of admission and discharge criteria?					
Is the contractual agreement reviewed and updated as needed to reflect change in services or financial arrangements?					
Is the contractual agreement available to the public upon request?					
Admission/Retention 70.23(1)					
Did the participant require routine 3-person assist with standing, transfers, or evacuation?					
Is/was the participant dangerous to self or others, elope, display sexual or physical aggression, abusive (physical or verbal) or unmanageable behavior?					
Is/was the participant in an acute stage of alcoholism, drug addiction, or mental illness?					
Is/was the participant under age 18?					
Participant Documents 70.25(1)					
Are the following included in the participant record?					
▪ Application form					
▪ Initial evaluations and updates					
▪ Nutrition assessment as necessary					
▪ Initial service plans and updates					
▪ Signed authorizations to release medical information, photographs, and other media					
▪ Signed managed risk policy and consensus agreement, if any					

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<ul style="list-style-type: none"> Medical information sheet when personal or health related care is delegated to include health professional orders, treatments, therapy, medications, and nurses' notes by exception, and medication list 					
<ul style="list-style-type: none"> Advanced directives 					
<ul style="list-style-type: none"> Contractual agreements with updates 					
<ul style="list-style-type: none"> Acknowledgement of participant rights 					
<ul style="list-style-type: none"> Guardianship information 					
<ul style="list-style-type: none"> DPOA, POA, Conservatorship 					
<ul style="list-style-type: none"> Incident Reports 					
<ul style="list-style-type: none"> Waivers for exceeding admission/retention criteria as applicable 					
<ul style="list-style-type: none"> Medication Administration Record (MAR) 					
<ul style="list-style-type: none"> Authorization to release information 					
Evaluation 70.22 (1) – 70.22(3)					
Was a functional, health, and cognitive evaluation completed prior to participation and prior to signing the contractual agreement?					
If the cognitive evaluation that was completed prior to participation identified a moderate decline, was a GDS completed? <i>Note: if the initial cognitive evaluation triggered a GDS, then a GDS should be completed for all subsequent evaluations.</i>					
Was a functional, health, and cognitive evaluation completed within 30 days of participation?					
Was a functional, health, and cognitive evaluation completed with *significant change of condition, but not less than annually?					
Service Plans 70.26(1) – 70.26(4)					
Was a service plan developed based on the functional, health, and cognitive evaluations completed prior to participation and prior to signing the contractual agreement? <i>Note: should include participant needs and preferences, assistance, services, service providers, and activities.</i>					
If the participant has delegated personal or health related care, was the service plan updated within 30 days of the participant's participation?					
Was the service plan updated annually?					
Was the service plan updated with *significant change of condition? <i>Note: if there is no significant change of condition, the service plan may have minor updates without a comprehensive evaluation.</i>					
Are all service plans signed by all parties?					

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Nurse Review 70.27(1) – 70.27(4)					
If a participant does not receive personal or health related care and a *significant change occurs, was a nurse review completed?					
If a participant has delegated personal or health related care: <ul style="list-style-type: none"> Was a nurse review completed at least every 90 days to include meds, referrals, and adverse reactions to medications? 					
<ul style="list-style-type: none"> Did the nurse review validate medications were checked for accuracy? 					
<ul style="list-style-type: none"> Did the nurse review assess and document the participant's health status? 					
<ul style="list-style-type: none"> Did the nurse review include written documentation of activities under the plan? 					

**Significant Change (as defined in Chapter 67) means a major decline or improvement in the tenant's/participant's status which does not normally resolve itself without further interventions by staff or by implementing standard disease-related clinical interventions that have an impact on the tenant's mental, physical, or functional health status.*