Introduction

The Cabinet for Health and Family Services funds adult day care services in as many Area Development Districts as funding permits. In accordance with funds available and with the approved area plan, the Cabinet may fund an entire program or a portion of a program having multiple source funding. These policies apply to all Adult Day Care programs receiving funds through the Cabinet for Health and Family Services. The ADDS may only contract with social model Adult Day/Alzheimer Respite programs certified by the Department for Aging and Independent Living or with Adult Day Health programs licensed by the Office of the Inspector General.

Mission Statement

The mission of the Adult Day Care and Alzheimer’s Respite Program is:

(1) To provide a supportive and therapeutic social program of supervision and care for eligible older persons; Services are designed to foster continued participation of older individuals in family and community life and to lessen the need for institutional care.

(2) To provide short-term relief to the caregiver in order to extend the period of time the older person may remain in the home or least-restrictive environment.

(3) To provide therapeutic activities and supervision to older persons requiring personal supervision; The program provides opportunities for:

   (a) A venue to meet social and emotional needs;
   (b) Continued physical activities; and
   (c) Improved control of physical and mental functioning to help seniors remain active

Kentucky Administrative Regulations

910 KAR 1:160 Section 1
Definitions for the Adult Day Care and Alzheimer's Respite Program are found in 910 KAR 1:160 Section 1.

1. **Activities of Daily Living** is defined by KRS 194A700(1) to mean normal daily activities, including bathing, dressing, grooming, transferring, toileting, and eating.

2. **Adult Day Care Center** is defined in KRS 205.010 (15) to mean any adult care facility, which provides part-time care, day or night, but less than twenty-four (24) hours, to at least four (4) adults not related to the operator of the adult day care facility by blood, marriage or adoption.

3. **Adult Day Center respite** means respite provided in a group setting outside the home.

4. **Adult day health services** means a licensed program to provide continuous supervision of the client’s medical and health needs.

5. **Adult Day Services** means a supportive and therapeutic social program of supervision and care:
   - Provided to an eligible adult as defined in Section 2 of 910 KAR 1:160.
   - During part of the day, but for less than twenty-four (24) hours; and
   - For:
     1. Assistance with self-administration of medication;
     2. Personal care services;
     3. Self-care training;
     4. Social activities; and
     5. Recreational opportunities.

6. **Alzheimer’s disease or related dementing diseases** means neurological diseases causing gradual and irreversible impairment of intellectual functioning of a sufficient severity to interfere with an individual’s daily activities (other related dementing diseases may include: Vascular dementia; Lewy body dementia; Frontotemporal dementia; and dementia resulting from Huntington’s Disease, Parkinson’s Disease, Creutzfeldt-Jakob disease, and AIDS).

7. **Alzheimer’s respite** means a therapeutic social program of supervision and care provided to a client with Alzheimer’s disease or related dementing disease in a client’s home or in a center to enable the caregiver temporary relief from caregiving duties.
(8) “Area plan” means the plan submitted by a district for the approval of the department that releases funds under contract for the delivery of services within the planning and service areas.

(9) “Assessment” means the collection of information and evaluation of a person’s situation, and functioning, which identifies needs, and resources so that a comprehensive plan of care may be developed.

(10) “Assistance with self-administration of medication” is defined by KRS 194A.700(2):

\[(a)\] Reminding the client to take medications  
\[(b)\] Reading the medication’s label  
\[(c)\] Confirming that medication is being taken by the client for whom it is prescribed;  
\[(d)\] Opening the dosage packaging or medication container, but not removing or handling the actual medication;  
\[(e)\] Storing the medication in a manner that is accessible to the client; and  
\[(f)\] Making available the means of communicating with the client’s physician and pharmacy for prescriptions by telephone, facsimile, or other electronic device

(11) “Case Management” means:

\[(a)\] A process for ensuring that participants receive appropriate, comprehensive, and timely services to meet their needs as identified in the assessment process;  
\[(b)\] Planning;  
\[(c)\] Referring the participant to appropriate agencies and individuals in the informal care-giving systems;  
\[(d)\] Monitoring; and  
\[(e)\] Advocacy through case work activities in order to achieve the best possible resolution of individual needs.

(12) “Certified Adult Day and Alzheimer’s Respite programs” are programs providing adult day care that meet the standards of 910 KAR 1:160 and have been certified by the Department for Aging and Independent Living.

(13) “District” is defined by KRS 205.455(4) and means an area development district designated pursuant to KRS 147A.050.

(14) “Identifiable space” means space set apart by visible barriers from other activities within the setting.

(15) “In-home respite” means respite provided in the client’s home.
(16) “Licensed adult day health center” means a program licensed by the Kentucky Cabinet for Health and Family Services in accordance with 902 KAR 20:066.

(17) “Needy aged” is defined by KRS 205.010(6) to mean a person who has attained the age of sixty-five (65), who is unable to provide for himself, and who does not have otherwise provided for him subsistence compatible with decency and health.

(18) “Nutrient dense snack”: means a snack that contains a high proportion of nutrients in comparison to the number of calories.

(19) “Personal care services” means activities to help participants achieve and maintain good personal hygiene, including assistance with walking and activities of daily living.

(20) “Plan of care” means a written guide of action:

(a) Developed and agreed upon by the:

1. Client;
2. Primary caregiver, if applicable; and
3. Program case manager

(b) Based upon the participant’s needs, goals, and resources; and

(c) Including appropriate services to meet the identified needs and achieve objectives.

(21) “Reassessment” means the formal re-evaluation of the participant’s situation and functioning and of the services delivered to identify changes that may have occurred since the last assessment.

(22) “Unit of service” means one-half (1/2) hour of direct service.
Eligibility

The eligibility criteria for Adult Day and Alzheimer’s Respite Program are found in 910 KAR 1:160 Section 2. Eligibility

To participate in the Adult Day and Alzheimer’s Respite Program, an individual shall be able to respond and share in program activities without creating health and safety risks to self or others and, in addition, meet at least one of the following requirements sets:

1. Be sixty (60) years of age or older; be physically disabled or frail as a result of medical condition or age; and in need of supervision or assistance during part of the day; or
2. Be sixty (60) years of age or older; and one who is mentally confused, and in need of supervision to prevent injury, to assure proper nutrition, and to assist with self-administration of medication; or
3. Be sixty (60) years of age or older, and one who, because of emotional or social needs, may benefit from the individualized attention and social structure available through these services which are not otherwise available; or
4. Be any age and have a diagnosis of probable Alzheimer’s or related dementing disease, as confirmed by a written statement from a physician after a diagnostic evaluation.
Assessment, Case Management

Each applicant for Adult Day Care shall be assessed for eligibility and need of services. For each eligible applicant, a plan of care shall be developed by the local case manager and the Adult Day Care provider unless other procedures have been approved by the Department for Aging and Independent Living (See also Chapter 2, Section 2.12, Other Procedures, Demonstration Projects).

The procedures for Assessment and Case Management are found in 910 KAR 1:160 Section 3

(1) Each applicant for services shall be assessed for:

   (a) Eligibility and need of services, and
   (b) For each eligible applicant, a plan of care shall be developed using the completed assessment, with participant involvement to the fullest extent of his or her abilities

(2) Case Management:

   (a) The case manager shall refer the client for other needed services identified by the assessment.
   (b) One (1) service provider shall provide case management to a client receiving multiple services.

(3) The program director shall arrange for or conduct a formal reassessment at least every six (6) months.
Fees and Contributions

Fees and contributions are covered in 910 KAR 1:160 Section 4 Fees and Contributions as follows:

(1) A case manager shall be responsible for determining fee paying status using the following criteria:

(a) A fee shall not be assessed for the provision of assessment or case management services.
(b) The case manager shall:

1. Consider extraordinary out-of-pocket expenses to determine a client’s ability to pay; and
2. Document in a case record a waiver or reduction of fee due to extraordinary out-of-pocket expenses.

(c) A fee shall not be assessed to an eligible needy aged individual
(d) SSI income and Food Stamps:

1. SSI income or a food stamp allotment shall not be deemed available to other family members
2. The applicant receiving SSI benefits or a food stamp allotment shall be considered a family of one (1) for the purpose of fee determination

(2) Fee Determination:

(a) An eligible person shall be charged a fee determined by the cost of the service unit multiplied by the applicable percentage rate shown in the chart in paragraph (c) of 910 KAR 1:160 Section 4(2) based upon income and size of family using the official poverty income guidelines published annually in the Federal Register by the United States Department of Health and Human Services
(b) Service unit cost shall be determined by the state agency or contracting entity in accordance with its contract.
(c) The fee amount shall be calculated using a percentage rate based on the household’s percentage of poverty (see table in KAR 1:160 Section 4 (2)(c))
(3) Contributions:
   (a) A contribution from an individual, family, or other entity shall be encouraged.
   (b) Suggested contribution rates may be established; however, pressure shall not be placed upon the client to donate or contribute.
   (c) Adult day services shall not be withheld from an otherwise eligible individual based upon the individual’s failure to voluntarily contribute to support services.

(4) The district shall review and approve the procedure implemented by a service provider for the collecting, accounting, spending, and auditing of fees and donations.

(5) The adult day care program funding formula, as required by 42 U.S.C. 3025(a)(2)(A)(i):
   (a) Shall consist of a $30,000 base for each district, with the remaining amount of funds distributed in proportion to the district’s elderly (sixty-(60) years and older) population in the state.
   (b) The department may increase base funding, as the need is determined contingent upon available funding.
Termination or Reduction of Services

Termination or Reduction of Services for Adult Day Care is covered in 910 KAR 1:160 Section 5, Termination or Reduction of Services.

(1) Termination or Reduction of Services:

   (a) Only a case manager or client may decide to terminate adult day and Alzheimer’s Respite services.
   (b) Adult day and Alzheimer’s Respite services may be reduced if:

       1. The client’s condition or support system improves; or
       2. A determination that the plan of care specified in Section 3(1) of 910 KAR 1:160 cannot be followed.

(2) If adult day and Alzheimer’s respite services are terminated or reduced, the case manager shall:

   (a) Inform the client of the right to file a request for a hearing in accordance with Section 12 Appeal Process of 910 KAR 1:160.
   (b) Notify the client or caregiver of the action taken; and
   (c) Assist the client and family in making a referral to another agency, if applicable.
Reimbursement

The Department for Aging and Independent Living shall determine the maximum rate of reimbursement with state-administered funds.
Responsibilities of the Client

See Chapter 1, General Administration, Section 1.24, Participant Responsibilities.

Participant Responsibilities

In order to receive services from any program or service administered by the Department for Aging and Independent Living, the participant shall agree to receive services, sign an application requesting services, agree to provide information necessary to complete a plan of care, participate in the development of a plan of care, and cooperate with service providers. In any situation where the client is unable to cooperate and make decisions regarding service needs, the family or other caregiver must agree to cooperate on behalf of the client.

The service providers and the participant and family shall treat one another with mutual respect. None of the parties shall subject another to physical abuse, sexual harassment or verbal abuse. None of the parties shall subject another to possible physical harm through a display or handling a weapon, nor endanger another by an animal.

A provider may, upon due notice, suspend the provisions of a service to an otherwise eligible client where the provider, upon consultation with the Area Agency on Aging and Independent Living determines that to provide the service poses a danger to any person. Such suspension may remain in effect until the Area Agency on Aging and Independent Living determines that the danger has been abated or eliminated.

Procedure:

(1) Each participant shall sign an application for services within 30 days of receiving services.

(2) The participant shall signify the following voluntarily by signing the application:

   (a) Verification of income, if questionable (except for Title III, which prohibits a means test);
   (b) Release of information to specified agencies;
   (c) Access by the Cabinet and the area development district to the participant's records for monitoring purposes; and
   (d) Understanding by the participant of "Participant Responsibilities"
(3) If the client is unable for physical or mental reasons to consent and has a legal guardian, caregiver, spouse or other proxy, that person must sign the application.

(4) Should either party feel that an offense has occurred, recourse shall be sought through the mediation, grievance, or complaint procedures established by the provider, the area development district or the Department.

(5) Participant services are not to be suspended by a provider agency until the case manager, center director or agency director has determined that the provisions of the care plan cannot be met due to the behavior of the participant or family. Services may be suspended if the service provider or case manager deems that a worker will be at imminent risk or danger. The provider agency shall report suspension of services immediately to the Area Agency on Aging and Independent Living who shall investigate the suspension and make a final determination.

(6) In situations of suspension as described in (5) above, a written report that documents the grounds requiring suspension, attempts to resolve the situation, and written notice that the client may file a grievance, shall be forwarded to the area development district or to the Department for Aging and Independent Living if the area development district provides case management directly.

(7) When conflicts or disagreements occur involving either staff or participants regarding mutual respect, the following steps shall be followed:

(a) A verbal warning to the staff or participant for the first conflict;
(b) A written warning for a second conflict;
(c) Suspension;
(d) In situations of suspension as described in (5) above, a written report which documents the grounds requiring suspension, attempts to resolve the situation and written notice that the client may file a grievance under the DSS-154 system shall be forwarded to the area development district or to the Department for Aging and Independent Living if the area development district provides case management directly; and
(e) Detailed written records shall be maintained for the service provider.
Service Provider Responsibilities

The program staff of the service provider shall abide by all applicable certification requirements, standards, accepted proposals, and contracts including the following minimum requirements specific to adult day care. The following requirements are found in 910 KAR 1:160 Section 6 Service Provider Responsibilities:

(1) The service provider shall meet the following general requirements:

   (a) Assure that program staff shall treat the client and caregiver in a respectful and dignified manner, involving them in decisions regarding the delivery of services.
   (b) Assure that services are provided in a safe and consistent manner;
   (c) Collect the fee for service as determined by the case manager based on the sliding fee scale in Section 4 of 910 KAR 1:160
   (d) Use fees and donations to increase services
   (e) Maintain a written job description for each paid staff and volunteer position involved in direct service delivery
   (f) Develop and maintain written personnel policies and a wage scale for each job classification
   (g) Designate a supervisor to assure that staff providing adult day services are provided supervision
   (h) Comply with applicable district administrative policies and procedures and service contracts
   (i) Provide access for staff of the district and cabinet for monitoring and evaluation purposes
   (j) Notify a case manager should the service needs of the client change due to a change in the client’s

   1. Health
   2. Support services
   3. Family, or
   4. Caregiver

   (k) Develop for district approval policy and procedure:

   1. For a client’s referral for service to other appropriate programs and services currently provided in the district
   2. To reach a prospective client through community education and outreach activities
   3. For volunteer programs to be utilized
4. For the periodic monitoring of a client for the appropriateness of adult day services to assure safety and consistency
5. For acceptance of a voluntary contribution and assurance the contribution shall be used to maintain or increase the level of service
6. For the reporting of abuse, neglect, and exploitation consistent with KRS 209.030(2) and (3)
7. For the manner in which delivery of adult day services shall be provided to an eligible individual.

(2) The service provider shall establish written policies and procedures to meet the following program requirements for adult day center respite services:

(a) Establish a schedule of days and hours of operation so that the program operates, at a minimum, four (4) hours per day, three (3) days per week, excluding holidays and emergency closings.
(b) Post the scheduled days and hours of operation in a conspicuous place and provide a written copy to the client and caregiver
(c) Supervise program activities which shall be provided by staff or volunteer personnel meeting staff requirements as set forth in Section 9 of 910 KAR1:160
(d) Provide a balance of planned individual and group activities to meet a client’s needs, abilities, and interests as determined by the individual plan of care
(e) Provide an inventory of each client’s interests and personal history
(f) Provide a client an opportunity to plan and evaluate activities on a monthly basis
(g) Provide a client with a choice of activities and an opportunity to refuse to participate in the activity
(h) Post a monthly calendar of planned activities and available services in a conspicuous place and retain it on site for a minimum of two (2) years for monitoring purposes
(i) Provide assistance, if necessary, with normal activities of daily living as defined in KRS 194A700 (1): bathing, dressing, grooming, transferring, toileting, and eating, including walking and personal hygiene.
(j) Provide assistance with self-administration of medications
(k) Provide a meal that complies with 910 KAR 1:190, if operating during normal mealtime.
(l) Allow a client, as a supplementary activity to staff assignments, an opportunity to assist in planning menus (express food preferences)
(m) Offer a nutrient dense snack, water, and other liquids at regularly scheduled times during the day (with snack and time noted on the daily calendar.)

(n) Post a monthly calendar of menus in a conspicuous place if meals are provided. In addition, maintain menus for monitoring purposes for a minimum of two (2) years.

(o) Provide first aid and make appropriate arrangements for medical care with the client’s physician or hospital for an accident or medical emergency

(p) Notify the family or other appropriate person listed in the client’s record such as power of attorney, guardian, or emergency contact, of any significant changes in the client’s mental or physical condition

(q) Refer a client to a health professional of the client’s choice, as needed

(r) Establish linkages with another community agency or institution to better coordinate services.

(s) Assist the client and the client’s family in identifying and accessing a community agency for: financial; social; recreational; educational; medical; and other individual needs and services, such as housekeeping, lawn care, errands, or transportation

(t) Assist the family in arranging transportation

(u) Notify the district immediately of a negative incident or accident involving a client, staff member, or volunteer

(v) Have a written complaint procedure that shall:

1. Include the address and phone number of the Department for Aging and Independent Living
2. Be posted in a conspicuous place; and
3. Be provided to each client

(w) Provide a written report to the district in response to a complaint if requested.

(3) An adult day health center shall:

(a) Be monitored and licensed by the Office of the Inspector General
(b) Comply with licensure requirements for adult day health services in accordance with 902 KAR 20:066

(4) In-home respite care service providers shall:
(a) Establish with the client and caregiver a monthly schedule of days and hours of service based on the assessment, plan of care, and agreement with the client and caregiver;

(b) Provide a copy of the schedule to the caregiver; and

(c) Supervise the client and program activities as determined by the assessment and plan of care for adult day services.
Facility Requirements

Facility Requirements for Adult Day Care and Alzheimer’s Respite programs are found in 910 KAR 1:160 Section 8 Facility Requirements. An Adult Day Care and Alzheimer’s Respite program provider operating a facility for service shall:

1. Comply with requirements outlined in 902 KAR 20:066 for a licensed adult day health center, if offering adult day health services;
2. Locate the adult day-care center in a geographic area that provides convenient access to a majority of older persons;
3. Locate, design, and furnish the adult day-care center to be readily accessible to and usable by individuals with disabilities;
4. Provide sufficient space and arrangement of space and equipment to allow for adequate client movement, program activities, food service and socialization;
5. Provide sufficient private office space to permit individual counseling and confidential maintenance of records;
6. Provide appropriate lighting, heating, cooling and ventilation for client comfort and program activities;
7. Provide covered leak-proof garbage disposal units for the kitchen;
8. Equip each adult day-care center with bathroom facilities meeting the following requirements:
   a) A minimum of one (1) toilet and one (1) sink for each ten (10) clients
   b) Readily accessible and usable by individuals with disabilities
   c) In men’s bathrooms urinals may be substituted for up to one-half (1/2) the number of toilets required; and
   d) Bathroom facilities that shall:
      1. Be cleaned and sanitized daily or more often, if needed, which shall be documented by a cleaning log
      2. Contain: Hot and cold running water; mirror; soap; towels or electric hand dryers, and leak-proof garbage disposal units that are emptied and cleaned daily
9. Comply with all applicable housing and health codes.
10. Comply with zoning requirements
11. Obtain initial and annual inspection by state or local fire safety officials and comply with requirements
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(12) Maintain at least one (1) fully operational fire extinguisher with annually updated inspection tags
(13) Maintain a fully equipped first aid kit, with unexpired contents, as recommended by the American Red Cross.
(14) Provide separate identifiable space during hours of operation, for a client in need of a more private environment or rest area; and
(15) Provide separate identifiable space during operational hours, if co-located in a facility housing other services. The following space may be shared with other services: Dining room, Kitchen, and Recreation area.
ADULT DAY CARE AND ALZHEIMER’S RESPITE PROGRAM
Service Provider Responsibilities
Staffing Requirements

Effective Date: March 5, 2010

Staffing Requirements

Staffing requirements are found in 910 KAR 1:160 Section 9 Program Staff

(1) Staffing requirements for a certified adult day-care center shall include:

(a) Trained and experienced staff who shall be present each day of operation
(b) At least two (2) staff members at the adult day-care center at times when there is more than one (1) client in attendance, one (1) of whom shall be a paid staff member.
(c) Staffing ratios that shall be:

1. One (1) staff member if one (1) client is in attendance
2. Two (2) staff members if two (2) to ten (10) clients are in attendance
3. Three (3) staff members if eleven (11) to fifteen (15) clients are in attendance
4. One (1) staff member for each five (5) additional clients over fifteen (15)

(d) Volunteer personnel may be included in the staff ratio, if volunteer personnel meet the staff qualifications and training requirements of 910 KAR 1:160
(e) A director may be included as a volunteer in the staff ratio, if the director is solely providing coverage in the adult day-care and not covering a senior center or another program during the volunteer time.
(f) At least one (1) staff member who has completed cardiopulmonary resuscitation certification by the American Heart Association or American Red Cross must be present when clients are in attendance
(g) A criminal records check shall be obtained on a potential employee prior to the employee’s date of hire in accordance with KRS 216.787 or prior to the Volunteer’s start date. (DAIL expects Criminal Records Checks requests not to be dated earlier than 60 days prior to the hire date or the Volunteer start date)
Staff Qualifications

Staff Qualifications shall be in accordance with 910 KAR 1:160 Section 9 Program Staff Subsection (2): (This section is numbered to match the regulation)

(2) A director of an adult day-care center shall be:

(a) 1. A trained professional possessing:

   a. i. A minimum of a bachelor's degree in social work, nursing or a related field relevant to geriatrics and one (1) year professional experience in working with the elderly; or
   ii. A master's degree in social work or a related field relevant to geriatrics and six (6) months professional experience working directly with the elderly

   b. A registered or practical nurse licensed in Kentucky with three (3) years professional experience working directly with the elderly while an employee of a:

      i. Home health agency
      ii. Long-term care facility;
      iii. Public health agency; or
      iv. Social service agency; or

   c. An individual at least twenty-one (21) years of age with;

      i. A high school diploma or GED certificate; and
      ii. A minimum of two (2) years of college, with at least three (3) years of professional experience in working directly with the elderly.

   2. Professional experience that includes working directly with the elderly while an employee of a public or private health or social service agency may substitute for professional education to equal a minimum of five (5) years.

(b) A case manager for adult day services shall meet the same qualification requirements specified in paragraph (d) of 910 KAR 1:160 Section 9 Subsection (2).
(c) Administrators of licensed adult day health programs shall meet the requirements of 902 KAR 20:066.

(d) Staff responsible for assessments or case management for participants shall:

1. Have a bachelor’s degree or master’s degree in social work, gerontology, psychology, sociology, or a field relevant to geriatrics, no experience required;
2. Have a bachelor’s or masters’ degree in nursing with a current Kentucky nursing license, no experience required;
3. Have a bachelor’s degree, in a field not relevant to geriatrics, with two (2) years of paid or volunteer experience in working with the elderly;
4. Be a Kentucky registered nurse with a current Kentucky license and two (2) years of experience working with the elderly; or
5. Be a licensed practical nurse with a current Kentucky license and three (3) years of paid or volunteer experience working with the elderly.

(3) Upon employment, a tuberculosis screening shall be conducted to current Center for Disease Control and Prevention standards and repeated annually thereafter

(4) Staff or volunteer personnel who contract an infectious disease listed in 902 KAR 2:020 shall not appear at work until:

(a) The infectious disease can no longer be transmitted; and
(b) He or she provides a physician’s statement authorizing a return to work

(5) In-home respite staff shall meet the requirements of subsection (6) of this section and shall:

(a) Be twenty-one (21) years of age if working independently; or
(b) If working as a team to provide direct services, have one (1) member at least twenty-one (21) years of age and the other staff member at least eighteen (18) years of age.
Staff Training

The requirements for staff training in an adult day-care center are found in 910 KAR 1:160 under Section 9 Program Staff, Subsection (6).

A professional familiar with the subject matter shall provide training of staff as follows:

1. Prior to assuming duties, all personnel, paid and volunteer, shall receive a minimum of six (6) hours of orientation to the program and adult day-care center explained verbally and in writing to include:
   - Program objectives
   - Program policies and procedures
   - Health, sanitation, emergency, and safety codes and procedures
   - Client confidentiality
   - Personnel policies and procedures

2. Within one (1) month of employment, all staff shall be certified in cardiopulmonary resuscitation (CPR).

3. Within three (3) months of employment, staff shall be provided a minimum of thirty-four (34) hours of basic training that includes:
   - The aging process
   - Interpersonal communications
   - Personal care services
   - First aid
   - Identifying and reporting health problems
   - Stress management
   - Recognizing and reporting suspected adult abuse, neglect, or exploitation consistent with KRS 209.030(2) and (3)
   - Universal blood and body fluid precautions
   - Dementia, including:
     1. Causes and manifestations of dementia; and
     2. Managing a client with dementia
   - Crisis intervention with a combative client; and
   - Effects of dementia on the caregiver
(4) Staff shall be provided a minimum of eight (8) hours of annual training to review and update knowledge and skills.

(5) If in-home respite care is provided in teams, at least one (1) member shall have orientation and basic training and the other member shall be provided:

(a) Orientation prior to assuming duties
(b) Basic training within three (3) months of employment
Client Records

The regulations concerning Client Records are found in 910 KAR 1:160 Section 10.

(1) A client record shall:

(a) Be typed or legibly written in ink with each entry dated and signed by the recorder and including the recorder’s title.

(b) Each client record shall be maintained at the program site and contain:

1. A completed assessment;
2. A client notification by letter of eligibility, fees assessed, and the center’s days and hours of operation
3. A monthly summary of the client’s:
   a. Objectives and goals;
   b. Progress;
   c. Physical and mental conditions;
   d. Behaviors
   e. Participation
   f. Appetite; or
   g. Other changes or observations noted by program staff and case manager.
4. Emergency contact information including responsible party and personal physician;
5. Attendance record;
6. Record of services provided by in-home or other program services;
7. Signed authorization for client to receive emergency medical care, if necessary;
8. Ongoing reassessment and plan of care;
9. Signed and dated medical summary and care plan, if referred on orders of a physician;
10. Correspondence; and
11. Closing summary

(2) Licensed day care centers shall maintain records as required by 902 KAR 20:066.
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(3) The service provider shall comply with reporting requirements of the district and the Cabinet for Health and Family Services.

(4) Confidentiality of records and reports shall be in accordance with KRS 194A.060 (2).
Maintenance and Retention of Records

See Chapter 9, Financial Management, Section 9.7, Item 9.7.8, Record Retention, Record Retention Schedule.

Record Retention

The Area Development District and sub-contractors shall maintain all records pertaining to the contract (45 CFR Part 74) for a period of not less than three (3) years after all matters pertaining to the contract (i.e., audit, settlement of audit exceptions, disputes) are resolved in accordance with applicable Federal and State laws, regulations and policies.

Record Retention Schedule

The Area Development District (Area Agency on Aging and Independent Living) and sub-contractors shall maintain all records pertaining to the contract (45 CFR Part 74) for a period of not less than three (3) years after all matters pertaining to the contract (i.e., audit, settlement of audit exceptions, disputes) are resolved in accordance with applicable Federal and State laws, regulations and policies.
Reporting Requirements

The service provider shall comply with all reporting requirements of the Area Agency on Aging and the Department for Aging and Independent Living.

(See also Chapter 9, Financial Management, Section 9.13, Reporting Requirements)
Requirements, Service Provider, General

The service provider shall:

1. Provide a unit cost figure to the Homecare case manager or assessor to be used as a basis for determining the applicable percentage for the fee schedule.

2. Contract for adult day care only with providers whose social model programs (Adult Day Care and Alzheimer’s Respite) are certified by the Department for Aging and Independent Living or whose health model programs (Adult Day Health) are licensed by the Office of the Inspector General.

3. Collect the fee for service, if any, as determined by the Homecare case manager or assessor. Fees and donations shall be budgeted and used to increase services. See Chapter 13, Homecare, Section 13.8, pursuant to 910 KAR 1:180.

4. Have and use appropriate procedures for referrals to other appropriate service agencies or programs.

5. Conduct community education and outreach activities to reach prospective clients.

6. Comply with all applicable administrative policies and procedures, and service contracts.

7. Provide access to staff of the Area Development District and the Cabinet for Human Resources for monitoring and evaluation purposes.
Responsibilities of the Area Development District (ADD)

The Area Development District shall be responsible for planning, organizing and administering programs in compliance with all requirements promulgated by regulation or policy approved by the Division of Operations and Support, Department for Aging and Independent Living, Cabinet for Health and Family Services.

Adult Day Care Programs funded in full or in part by Title III of the Older Americans Act shall be subcontracted by the Area Development District. Programs funded by state sources may be provided directly by the Area Development District or subcontracted. Regardless of the method, the Area Development District shall comply with the following general requirements:

1. Submit the following items:
   a. Enter data into SAMS or approved data system by the fifteenth (15th) day of the month; and
   b. Submit invoices to the Financial Management Branch of the Department for Aging and Independent Living by the fifteenth (15th) day of each month.

2. Provide technical assistance to the service provider as needed or requested.
3. Monitor and evaluate the program at least semi-annually to assure compliance with all requirements.

District Responsibilities for the Adult Day and Alzheimer's respite program are outlined in 910 KAR 1:160 Section 7.

District Responsibilities

A district shall submit to the cabinet a proposal within its area plan to include at least the following:

1. An assurance of access to records of the district pertaining to its contract for delivery of adult day services;
2. A plan for the delivery of adult day services in the area to be served by the district including identification of services currently provided in the district.
3. A provision for case management and assistance for adult day services;
(4) A policy and procedure for implementation of case management and assessment services;

(5) A policy and procedure for assuring a client’s eligibility in accordance with Section 2 of the administrative regulation;

(6) Assurance of a number of proposed clients for adult day services to be provided that complies with the minimum requirements of KRS 205.010(15) “at least four (4) adults not related to the operator of the adult care facility by blood, marriage, or adoption.”

(7) A cost unit of service to be used as a basis for determining an applicable percentage for the fee schedule as established in Section 4 of 910 KAR 1:160

(8) A policy and procedure for monitoring a subcontract for delivery of direct adult day services;

(9) Approval of policies and procedures of the service provider required by Section 6(1)(k) of this administrative regulation; and

(10) A policy and procedure assuring that the assessment required by Section 3 (1) (a) of 910 KAR 1:160, shall include the following information submitted electronically to the department in the formats prescribed by the Aging Services Tracking System:

(a) Demographic information, including family income;
(b) Physical health;
(c) Activities of daily living and instrumental activities of daily living;
(d) Physical environment;
(e) Mental and emotional status;
(f) Assistive devices, sensory impairment, and communication abilities;
(g) Formal and informal resources; and
(h) Summary and judgment
Responsibilities of the Department for Aging and Independent Living

The Department for Aging and Independent Living (DAIL) shall be responsible for the statewide administration of the social-model Adult Day Care program. DAIL shall provide overall direction to the Area Development District in effective and efficient administration of the program including the following:

1. Establish and make available on a statewide basis program regulations, policies, and procedures essential for administration and operation of the program;
2. Provide the required format and instructions for the Area Plan;
3. Allocate available funds;
4. Monitor and evaluate the Area Development District at least annually;
5. Conduct random on-site reviews of direct service sites;
6. Provide technical assistance when needed;
7. Compile, analyze, and develop statewide statistical and program reports.
### Other Procedures, Demonstration Projects

Other procedures regarding eligibility, assessment, case management, client record elements, and reporting requirements may be in place, subsequent to the written approval by the Department for Aging and Independent Living Commissioner.