WEBINAR SERIES - PART 7

Annual Requirement for Social Adult Day Service (SADS) Programs

Friday, March 8, 2019 1:00 - 2:00 p.m.



www.nysadultday.com

Audio Information: Please use the webex tab to connect via Audio, each individual has a personalized pin number.

Thank You For Joining Us

• Questions?

 Please type any questions you may have at any time throughout the webinar in the chatbox supplied on the bottom right side of your screen. Questions will be addressed at the end of the webinar. We will try to get to as many as possible.
 Please note that your phones are muted

Recording

• Today's webinal will be recorded and will be available on the NYSADSA Website following the webinar.

Annual Requirements for Social Adult Day Services (SADS) Programs

NYS ELDERLAW
Title 9 NYCRR-6654.20
REGULATIONS FOR SOCIAL
MODEL ADULT DAY SERVICES
PROGRAM

INSPECTOR GENERAL REGULATION

NYSOFA REGULATIONS

• Staff Training
• Staff Health
• Annual Program Self-Assessment

OFFICE OF THE NYS OFFICE OF THE MEDICAID INSPECTOR GENERAL

Social Adult Day Care Certification

NYSOFA REGULATIONS

STAFF TRAINING

"The program shall provide all staff with at least six hours of in-service training annually to develop review, or expand skills or knowledge; and training at least annually in the use of fire extinguishers, written procedures concerning evacuation and emergency situations, and emergency telephone numbers."



Note: New Staff Orientation and training requirements are topic specific as are time frames for completion of various training topics

NYSOFA REGULATIONS

STAFF HEALTH

The health status of each staff person who may or will have contact with participants, including the program director, is assessed and documented annually...

Note: New Staff need physical and PPD; thereafter, annual physical and bi-annual PPD

PROGRAM SELF EVALUATION

NYSOFA REGULATIONS

"The program shall conduct a self evaluation of its administrative, fiscal and program operations, including feedback from participants and caregivers, at least <u>annually</u>; and maintain a copy of the self evaluation on file for review..."

DOCUMENTATION

- STAFF TRAINING: must include an evaluation of each person's competency
- STAFF HEALTH: documentation is required but not specified
- PROGRAM SELF EVALUATION: a copy of all information gathered as well as summary report

FOCUS ON ANNUAL PROGRAM SELF-EVALUATION



ADMINISTRATIVE OPERATIONS



FISCAL OPERATIONS



PROGRAM OPERATIONS



FEEDBACK FROM
PARTICIPANTS AND
CAREGIVERS

FOCUS ON ANNUAL PROGRAM SELF-EVALUATION

FOR CONSIDERATION:

WHO WILL DO IT?
WHO WILL BE INVOLVED IN IT?
HOW WILL THEY DO IT?
HOW WILL THEY REPORT ON IT?
WHAT WILL FOLLOW THE REPORT?



Program Policies and Procedures should address the Annual Program Self Evaluation

INCLUDES:

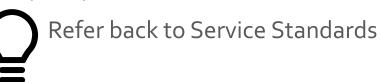
- 2.(i) a-h Policies and Precedures
- 2.(ii) a-b Program Self-Evaluation including feedback from participants and caregivers
- e (iii) a-b Records
- 2.(iv) a-e Staffing

Focus: Policies and Procedures

At a minimum

Participant eligibility

- > Admission and Discharge
- ➤ Service Plan
- >Staffing Plan (including paid and volunteer staff)
- ➤ Participants' Rights
- Services Delivery
- Program Self-Evaluation
- Records
- ➤ Emergency Preparedness



Focus:
Program
Annual SelfEvaluation

At a minimum:

- Is prior year program self-evaluation on file?
- ☐ Was there a report?
 - as a result of the program self-evaluation?

Focus: Records

At a minimum

- Written policy including compliance with Medicaid rules/MLTC contracts (confidentiality, storage); disclosure of information
- Participant records include key demographic info.; assessment and service plan(s); documentation of delivery of services
- ☐ Fiscal records are maintained

Focus: Staffing

At a minimum

- _Written policy
- Adequate number and at least 2 when participant is present
- Health status assessment
- Paid Director/educational qualifications/work experience/duties
- Staff and Volunteer Training: initial new employee orientation and annual. Complies with hourly requirements (unless waiver for initial)

ANNUAL PROGRAM SELFEVALUATION: Fiscal Operations

"The program shall maintain the following information on file: administrative and financial records" 2 (iii) a.1

- Billing and Payment Records
- Purchasing Records
- Financial Audit

Effective July 1, 2014, the thresholds for filing certain financial reports with the New York State Attorney General are as follows:

* ti e audii ti \$1 00,000	nreshold will be raised to \$750,000 as of July 1, 2 - (*)	2017 and to \$1 million as of July 1, 2021. Independent CPAs Audit
\$250,000	to \$500,000 (**)	CPA Review Report
up to \$250	0,000	no Audit or Review is required

- See Nonprofit Coordinating Committee of NY
- Also see NYS Attorney General report: <u>Internal Controls and Financial Accountability for Not-for-Profit Boards</u>

ANNUAL
PROGRAM
SELFEVALUATION:
Program
Operations

At a minimum

- Participant eligibility
- ☐ Admission & Discharge
- ■Service plan(s) **(**
- Required Services (Socialization, Supervision & Monitoring, Personal Care, Nutrition) implemented and documented
- Optional Services (if offered: maintenance and enhancement of daily living skills; transportation; caregiver assistance)

NYS OFFICE OF THE MEDICAID INSPECTOR GENERAL (OMIG)

NYS DEPARTMENT OF HEALTH (DOH)

NYS OFFICE FOR THE AGING (SOFA)

Social adult day care certification

"In order to ensure the health and safety of Managed Long Term Care Plan Enrollees, all providers of Social Adult Day Care Services that contract with a Managed Long Term Care (MLTC) Plan must meet the standards and requirements set forth in Title 9 NYCRR-6654.20, and complete this certification form."

- ✓ Complete On-Line

 https://www.omig.ny.gov/sadccertification
- ✓ Must be completed <u>annually</u>
 - Wust be completed <u>after</u> the program's annual self-evaluation

- 1. The SADC has a current, valid certificate of occupancy approved for a Social Adult Day Care (SADC) facility for the premises?
- 2. The SADC meets all appropriate Fire Safety Codes?
- 3. The SADC meets all relevant Department of Health Codes?
- 4. The SADC has implemented policies and procedures from 9 NYCRR 6654.20(d)(2)(i)(a-l) addressing participant digibility, admissions/discharge, service plan, staffing plan, participants rights, service delivery, program self-evaluation, records, and emergency preparedness?
- 5. Participant files are updated to document: There was an assessment prior to admission? That a service plan was developed within 30 days of admission? Service planning input from the participant and/or caregiver (9 NYCRR 6654.20 (d)(1)(iii)(a)(b))?
- 6. The SADC adheres to the nutrition standards required under (9 NYCRR 6654.20 (d)(1)(iv)(a)(4)?

- 7. Staff and volunteer health records are documented to demonstrate: The health status of each staff person is assessed and documented prior to contact with participants and annually thereafter? Each staff person has undergone a ppd test prior to employment and no less than every two years thereafter (9 NYCRR 6654.20 (d)(2)(iv)(a)(3)(i)(ii)?
- 8. The SADC has documentation and records demonstrating staff and volunteer training including fire/emergency safety, new staff orientation for 20 hours within 3 months and includes personal care skills taught by an RN and CPR/NED training (9 NYCRR 6654.20 (d)(2)(iv)(d)(1)(2)(3))?
- 9. The SADC has demonstrated the ability to perform the services necessary to contract with a MLTC plan?
- 10. The SADC has documentation that fire drills have been conducted twice per year (9 NYCRR 6654.20 (d)(2)(vii)(c))?
- 11. The SADC is in compliance with all Title 9 NCRR 6654.20 requirements?
- 12. The SADC has conducted, completed, and has documented the annual self-evaluation, which includes an administrative, program and fiscal review of operations including input from participants and caregivers (9 NYCRR 6654.20 (d)(2)(ii)(a))?

Certification

- IMPORTANT: Making a false statement in this certification, may subject you to criminal prosecution for a misdemeanor or felony under the New York State Penal Law.
- The person selecting the button below, declares, affirms and certifies (hereinafter certification) that the information entered as part of this form is true and that:
- he/she is the certifying official whose name and contact information appears above;
- the certifying official has undertaken due difigence and conducted all reasonable inquiry prior to making any of the statements in this certification and has sufficient knowledge to complete this form;
- the certifying official acknowledge that this certification is being made in order to comply with the requirements outlined in the questions answered above.

Other required fields

✓ SADC Information:

Federal Identification # (FEIN) or

Social Security #

✓ SADC Director Information

Name and Title

Phone #

Email address

MLTO Contracts

Name

Contact Name

Phone Number

IMPORTANT REMINDERS!

- ► BE SURE TO SAVE/PRINT THE ENTIRE DOCUMENT
- BE SURE TO SAVE PRINT THE EMAIL YOU RECEIVE FROM

nysomig@server.hdgwebhost.com

on behalf of

SAPOcertification@omig.ny.gov

AS THE CERTIFYING OFFICIAL MAKING A FALSE STATEMENT MAY SUBJECT YOU TO CRIMINAL PROSECUTION

Elizabeth A. Geary, M.Ed., LMSW Trainer

eageary1@verizor.n-t

631-704-1224

Contact info

NYSADSA

Washington Avenue Extension Suite 101

Albany, NY 12203

518-694-5366 nysadsa@caphill.com

www.nysadultday.com

Questions?

At this time, if there are any questions please type them in the chat box on the right hand side of the screen. We will answer them in the order they are received.

THANKYOU TO OUR SUPPORTING PARTNERS





Office for the Aging

The New York State Office for the Aging (MYSOFA) contracts with the New York State Adult Day Services Association to provide technical assistance to managed care organizations, providers of social adult day services and those interested in starting an adult day services program.