Rules of Department of Social Services Division 15—Division of Aging Chapter 8—Adult Day Care Program Licensure

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Title 13-DEPARTMENT OF SOCIAL SERVICES Division 15-Division of Aging Chapter 8-Adult Day Care Program Licensure

13 CSR 15-8.010 Definitions

PURPOSE: The following definitions are listed to establish understanding of these terms as applied to Chapter 8.

(1) Adult day care program. A group program designed to provide care and supervision to meet the needs of five (5) or more functionally impaired adults for periods of less than twentyfour (24) hours but more than two (2) hours per day in a place other than the adult's own home.

(2) Adult day care provider. The person, corporation, partnership, association or organization legally responsible for the overall operation of the adult day care program, who has a current license, or provisional license, to operate issued by the Division of Aging.

(3) Applicant. The person, corporation, partnership, association or organization which has submitted an application to operate an adult day care program, but has not yet been approved and issued a license, or provisional license, by the Division of Aging.

(4) Associated adult day care program. An adult day care program which is physically attached with another organization established primarily to offer other services (such as medical care, long-term care and human services) but has designated space and staff for an adult day care program which is above the existing space and staffing requirements for the residents, patients or clients.

(5) Direct care staff. Those staff (paid and volunteer) assigned to take care of the direct needs of participants.

(6) Freestanding adult day care program. A program of adult day care services which does not share staffing or licensed space or any physical components of space, equipment, furnishings, dietary, security, maintenance or utilities utilized in the provision of service with any other organization.

(7) Functionally impaired adult. An individual aged eighteen (18) or older who, by reason of age or infirmity, requires care and supervision.

(8) Individual plan of care. The adult day care provider's written description of the amount, duration and scope of services to be provided to each individual participant. (9) Long-term care facility. Any facility holding a valid license to operate, issued by the Missouri Division of Aging, including: skilled nursing facilities, intermediate care facilities or residential care facilities I and II as defined by section 198, RSMo; or distinct part skilled care units, intermediate care units or residential care units licensed by the Missouri Department of Health as defined by 19 CSR 30-20.010.

(10) Medical care facility, a hospital, rehabilitation facility or other facility holding a valid state license to operate, issued by the Missouri Division of Health, as defined by 19 CSR 30-20.010.

Auth: sections 660.050, RSMo (Cum. Supp. 1992) and 660.418, RSMo (1986).* Original rule filed Oct. 15, 1984, effective Jan. 11, 1985.

*Original authority: 660.050, RSMo (1984), amended 1988, 1992 and 660.418, RSMo (1984).

13 CSR 15-8.020 Licensure Requirements

PURPOSE: This rule establishes the general licensure and application procedures, fees and the rights of applicants for licensure of adult day care programs.

(1) Any person who establishes, maintains or operates an adult day care program, or advertises or holds him/herself out as being able to perform any adult day care service, shall obtain the proper license from the division, except for the following:

(A) Any adult day care program operated by a person in which care is offered for no more than two (2) hours per day;

(B) Any adult day care program maintained or operated by the federal government except where care is provided through management contract;

(C) Any person who cares solely for persons related to the provider or who has been designated as guardian of that person;

(D) Any adult day care program which cares for no more than four (4) persons who are not related within the fourth degree of consanguinity or affinity to the adult day care provider;

(E) Any adult day care program licensed by the Department of Mental Health under Chapter 630, RSMo, which provides care, treatment and habilitation, exclusively to adults who have a primary diagnosis of mental disorder, mental illness, mental retardation or developmental disability as defined; or

(F) Any adult day care program administered or maintained by a religious not-forprofit organization serving a social or religious function if the adult day care program does not hold itself out as providing the prescription or usage of physical or medical therapeutic activities or as providing or administering medicines or drugs.

(2) An application shall be submitted to the division for each proposed associated or freestanding adult day care program on forms supplied by the Division of Aging.

(3) A nonrefundable fee shall accompany each adult day care program application for license according to the following schedule for licensed capacity which is the number of program participants who may be present at any one time:

(A) For eight (8) participants or fewer, the fee is twenty-five dollars (\$25);

(B) For nine through sixteen (9-16) participants, the fee is fifty dollars (\$50);

(C) For seventeen through twenty-four (17-24) participants, the fee is seventy-five dollars (\$75); and

(D) For twenty-five (25) or more participants, the fee is one hundred dollars (\$100).

(4) The division shall review each application and investigate each applicant and adult day care program to determine that they comply with the adult day care licensure law and these rules and to insure that the health and safety of the participants are protected.

(5) If the adult day care program and the applicant are found to be in compliance, a regular license will be issued for a period not to exceed two (2) years.

(6) If an adult day care program is not currently meeting all of the requirements for licensure but demonstrates the potential capacity to meet the full requirements for licensure, a provisional license may be issued if there is no threat to the health and safety of the participants in the program. The provisional license is nonrenewable and will be valid for a maximum of six (6) months. Any regular license issued subsequent to a provisional license will be valid for a period not to exceed two (2) years from the date that the provisional license was issued.

(7) Licensure renewal applications will be sent to adult day care providers at least sixty (60) days prior to the expiration of the current license. Renewal applications must be accompanied by a nonrefundable fee and be postmarked at least thirty (30) days prior to expiration date of the current license. The nonrefundable fee is identified in the fee schedule in section (3) of this rule. (8) A regular or provisional license may be revoked or suspended for failure to cooperate with the division or failure to comply with statutory or regulatory requirements.

(9) If any person is refused a license, or a license is suspended or revoked, or other official action by the division is detrimental to the provider of an adult day care program, a determination from the administrative hearing commission may be requested pursuant to provisions of section 161.272, RSMo. This action must be taken within thirty (30) calendar days of official notification of the adverse action taken by the division.

(10) The license, or provisional license, issued to the adult day care provider, shall not be transferable when there is a change of ownership or when the program is moved to another location or facility.

(11) The application for an adult day care program license shall be signed by the applicant's owner, chairman of the board or chief executive officer and shall be notarized.

Auth: sections 660.050, RSMo (Cum. Supp. 1992) and 660.418, RSMo (1986).* Original rule filed Oct. 15, 1984, effective Jan. 11, 1985.

*Original authority: 660.050, RSMo (1984), amended 1988, 1992 and 660.418, RSMo (1984).

	Department of Soc Missouri Division Application for License to Operate	1 of Aging	gram		
FEE SCHEDULE			DO NOT WRITE IN THIS SPACE		
Check licensed capacity requested: 8 or fewer \$ 25.00 9 through 16 \$ 50.00 17 through 24 \$ 75.00 25 or more \$100.00		Application No.			
application is hereby made for lice	nse to establish, conduct or maintain a Program rogram	n adult day care program			
	(Name of Associated Organization)				
 Name of the adult day care progra Address 	m				
	eet, RFD, Box Number)	(Area Code/Phone No.)			
(City)	(State)	(Zip Code)	(County)		
Type of provider of the adult day care program: (check one) Governmental Not-for-profit City Religious organization County Corporation State Other		Proprietary □ Individual □ Partnership □ Corporation			
5. Name of provider					
Address(Str	eet, RFD, Box Number)	(Area Code/Phone No.)			
(City)	(State)	(Zip Code)	(County)		
mortgage or other obligation, or le	wnership of any individual or entity wh ase on which an adult day care prograr	n is being conducted. Indi	percent (5%) or more in the land, structure(s) cate whether this ownership involves land		
7. Name of the adult day care progra					
8. Has the program director or any c	orporate officers, directors or holders o	f five percent (5%) or more	e stock or ownership ever been convicted o		
a misdemeanor relating to the ope	ration of an adult day care program, lo	ng-term care facility or of	any telony 🗆 Yes 🗆 No		

9. For all initial applications, provide a diagram of the building that houses the adult day care program if it is freestanding. This diagram shall be labeled to show exits; fire extinguishers; smoke detectors and room use, such as dining, crafts, quiet room, therapy or offices. This diagram shall give exact measurements of the area to be used for the adult day care program.

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- 10. For all initial applications, provide a diagram of the designated space for the adult day care program if it is an associated facility. This diagram shall show the portion set aside for the adult day care program including office, dining, quiet area, craft area, general adult day care meeting area or therapy. This diagram shall give exact measurement of the area used for the adult day care program and also show exits or entrances for day care, fire extinguishers and other fire safety features, such as pull stations and smoke detectors.
- 11. The fee must be submitted with this application. Enclose a check or money order only, payable to the Director of Revenue, Missouri Department of Revenue.

I hereby affirm that I as an individual, or that the operating corporation or partnership for which I sign, have adequate financial resources to properly construct, equip and operate the facility referred to in this application.

I further affirm that I am familiar with the requirements of the adult day care licensure law (1986) and the regulations of the Division of Aging established thereunder.

I further affirm that I understand that I am eligible for a license only if the program and the provider are in compliance with the law and the regulations thereunder, and that a license may be revoked at any time that the facility or the operator fails to comply with such law and regulations.

I further affirm under the penalties of perjury, that all documents and information required by the division to be filed pursuant to this application are true and correct to the best of my knowledge and belief, that the statements contained in this application and any attached information are true and correct to the best of my knowledge and belief and that all required documents are either included with the application or are currently on file with the division.

My commission expires _

(Notary Public or Other Officer Authorized to Administer Oaths)

13 CSR 15-8.030 Participants' Rights and Program Policies

PURPOSE: This rule establishes certain rights of participants in adult day care programs and requires providers to have written program policies.

(1) Each participant of the adult day care program shall be assured of the following rights:

(A) To be treated as an adult, with respect and dignity regardless of race, color, sex or creed;

(B) To participate in a program of services and activities which promote positive attitudes regarding one's usefulness and capabilities;

(C) To participate in a program of services designed to encourage learning, growth and awareness of constructive ways to develop one's interests and talents;

(D) To maintain one's independence to the extent that conditions and circumstances permit, and to be involved in a program of services designed to promote personal independence;

(E) To be encouraged to attain self-determination within the adult day care setting, including the opportunity to participate in developing one's plan for services; to decide whether or not to participate in any given activity and to be involved in the extent possible in program planning and operation;

(F) To be cared about in an atmosphere of sincere interest and concern in which needed support and services are provided;

(G) To have access to a telephone to make or receive calls, unless necessary restrictions are indicated in the individual care plan;

(H) To have privacy and confidentiality;

(I) To be free of mental or physical abuse; (J) To be free to choose whether or not to

perform services for the facility; (K) To be free of restraint, unless under physician's order as indicated in individual care plan; and

(L) To be free of interference, coercion, discrimination or reprisal.

(2) Participants and their families shall be advised of participants' rights and program policies upon admission to the adult day care program.

(3) Participants' rights shall be posted in a conspicuous location in the adult day care program facility.

(4) The adult day care provider shall have a written program description, copies of which are available to the division, participants, families and other interested agencies and individuals. The document shall describe at least—administrative organization, including role of the advisory committee if applicable; maximum number of participants that can be served; types of participants that shall and shall not be admitted; days of the week and hours of operation; services available to participants and families; procedures/requirements for admission; emergency arrangements for participants; criteria and procedure for discontinuing service to a participant; participant/family procedure for resolving grievances and confidentiality of participant information and records.

Auth: sections 660.050, RSMo (Cum. Supp. 1992) and 660.418, RSMo (1986).* Original rule filed Oct. 15, 1984, effective Jan. 11, 1985.

*Original authority: 660.050, RSMo (1984), amended 1988, 1992 and 660.418, RSMo (1984).

13 CSR 15-8.040 Staffing Requirements

PURPOSE: This rule establishes the minimum requirements for adult day care program staff, ratio of numbers of staff to participants and staff training.

(1) The adult day care program shall have a director. Either the director or his/her designee shall be present and in charge during all hours that participants are on the premises. The director and his/her designee shall be qualified by demonstrated competence, specialized background, education or experience to manage the day-to-day operation of the program.

(2) Direct care paid staff shall be at least eighteen (18) years of age and qualified by education and experience to perform the duties required by the written job description.

(3) Volunteer staff shall be qualified by education, experience, or both, to perform the duties required by the written job description.

(4) The adult day care provider shall provide a sufficient number of direct care staff on duty at all times to meet the needs of each participant and assure that participants are never left unattended. At a minimum, there shall be at least two (2) direct care staff persons when two through sixteen (2-16) participants are present and one (1) additional direct care staff person for any portion of eight (8) additional participants present.

(5) The director shall not be counted to meet the required staff ratio if there are nine (9) or more participants present. (6) Trained volunteers at least eighteen (18) years of age may be counted in the direct care staff to participant ratio provided a volunteer program description, including the training to be provided and the system, for assuring the presence of volunteer help as scheduled, has been submitted to and approved by the Division of Aging.

(7) Secretaries, cooks, accountants and other nondirect care staff members shall not be considered in calculating the staffing ratio.

(8) Direct care staff shall not be counted simultaneously to meet the required staffing ratios for both the long-term care or medical care facility and the associated adult day care program.

(9) All staff who have direct contact with participants shall be free of communicable disease, listed in 19 CSR 20-20.020 and physically and emotionally able to work in the adult day care program. Persons who have been diagnosed with a communicable disease may return to duty only with a physician's written approval. The director shall be responsible for monitoring the health of employees.

(10) No person shall be employed to work or allowed to volunteer, in the adult day care program who left employment with any other employer due to abuse or neglect to patients, residents or clients and the dismissal was upheld by administrative review or conviction. The adult day care provider shall have made a reasonable check of references on all employees and volunteers.

(11) All staff, including nondirect care, direct care and volunteers, shall be given a general orientation to the program, its policies, fire, safety and emergency procedures prior to performing job responsibilities.

(12) In-service training shall be provided at least quarterly to staff, as appropriate to their job function and participant care needs.

Auth: sections 660.050, RSMo (Cum. Supp. 1992) and 660.418, RSMo (1986).* Original rule filed Oct. 15, 1984, effective Jan. 11, 1985.

*Original authority: 660.050, RSMo (1984), amended 1988, 1992 and 660.418, RSMo (1984).

13 CSR 15-8.050 Program and Participant Care Requirements

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PURPOSE: This rule establishes the minimum requirements for operating an adult day care program and providing care to participants.

Editor's Note: The secretary of state has determined that the publication of this rule in its entirety would be unduly cumbersome or expensive. The entire text of the material referenced has been filed with the secretary of state. This material may be found at the Office of the Secretary of State or at the headquarters of the agency and is available to any interested person at a cost established by state law.

(1) The adult day care provider shall neither knowingly admit, nor continue to care for, participants whose needs cannot be met by the program directly or in cooperation with outside resources.

(2) Each provider shall have a written emergency medical plan which assures transportation to a hospital or other type of facility providing emergency care. A written agreement, signed by each participant or legal guardian, shall be on file in the facility granting permission to transport the participant in need of emergency care to the designated hospital or other type of facility. Notes in the participant's record shall be made immediately of any accident, injury or illness and emergency procedures taken. Emergency telephone numbers for each participant shall be available to staff at all times. At least one (1) staff member certified in first aid and cardiopulmonary resuscitation (CPR) shall be on the premises at all times that participants are present. Certification in first aid shall be renewed every three (3) years and certification in CPR shall be renewed annually. First-aid training shall be taken from the American Red Cross or from another comparable source. At a minimum, those first-aid supplies recommended by the Red Cross in Standard First Aid and Personal Safety shall be readily available.

(3) The provider shall require a medical assessment by the participant's physician of the participant's medical condition to include activity needs and restrictions, dietary modifications, indicated therapies and medication as applicable prior to the first day of participation, signed by the physician within five (5) working days of the first day of participation.

(4) The provider shall develop a written individual plan of care for each participant within five (5) contact days following the entry of the participant into the adult day care program. The plan shall be designed to maintain the participant at, or to restore to, optimal capability for self-care. The plan shall be based on a functional assessment and information obtained from the participant, participant's family, physician and the person or agency referring the participant. The plan shall address the participant's physical, social and psychological needs, goals and means of goal accomplishment to the degree that the program is designed and the staff is qualified to meet these goals. The plan shall identify names of persons responsible for specific, individualized activities provided for the participant that are not documented by the regularly scheduled plan of activities for the program. The plan of care shall identify the participant's regularly scheduled days for attendance, including arrival and departure times. The plan of care shall be revised as frequently as warranted by the participant's condition, but shall be reviewed at least every six (6) months and updated as necessary.

(5) The director, or a designated staff person, shall maintain communication with participants and their families or other responsible persons to solve day-to-day problems which confront the participants. Referrals to other community resources should be made and services coordinated as needed.

(6) Participants who are responsible for taking their own medication at home shall be permitted and encouraged to continue to be responsible for taking their own medication during the hours spent in the center. If a participant is unable to self-administer medication, then the adult day care provider may assume responsibility in accordance with 13 CSR 15-8.050(10)(D) of this rule.

(7) There shall be a safe, effective system of handling and storing participants' medications.

(8) The provider shall report any suspected incidents of physical or mental abuse, neglect, exploitation, or a combination of these, of its participants to the Elderly Abuse Hotline (1-800-392-0210).

(9) The adult day care provider shall offer at least the following services:

(A) Activities of Daily Living. The adult day care program shall provide assistance and training in walking, toileting, feeding, personal care and other activities of daily living in accordance with each participant's individual plan of care;

(B) Planned Group Activities. The adult day care program shall provide planned activities during at least fifty percent (50%) of the time that the program is open for daily operation, with a maximum four (4) hours of planned activities required. Activities shall be suited to the needs and interests of participants and designed to stimulate interest, rekindle motivation and encourage physical exercise. Activities shall be conducted individually and in small and large groups. Planned activities include meals, rest periods, exercise, recreation and social activities. Physical exercise shall be designed in relation to each individual's needs, impairments and abilities and shall be alternated with rest periods or quiet activities. In an associated program some, but not all, activities may be conducted cooperatively with the residents or participants of the other program;

(C) Food Service. The adult day care program shall assure the availability of meals and supplemental snacks in accordance with each participant's individual plan of care. Meals served by the provider shall provide at least one-third (1/3) of the recommended dietary allowance of the National Research Council. Supplemental snacks shall consist of nourishing food and beverages. Food may be prepared, stored, served, or any combination of these, on-site if the requirements of the local health department or applicable rule established by the Missouri Department of Health (19 CSR 20-1.010) are met. Food prepared away from the site shall be prepared in a facility which meets the requirements of the local health department or applicable rules established by the Missouri Department of Health (19 CSR 20-1.010). The provider shall arrange for special diets and other diet modifications as ordered by a physician. Diets shall be served as ordered by the participant's physician and food preparation and service shall be reviewed by a qualified dietitian, physician or nurse at least every six (6) months. Modified diets shall be in effect for the specified number of days indicated in the physician's order. If no time is specified, the period may not exceed one (1) calendar year when another order from the physician shall be obtained; and

(D) Observation. The health, functional and psychosocial status of each participant shall be observed and documented in the participant's record at least monthly by the adult day care program director or other designated professional staff.

(10) The adult day care provider may offer the following services:

(A) Transportation. If transportation services are offered, directly or contracted for, they shall meet the requirements of 13 CSR 15-6.165;

(B) Counseling Services. If counseling services are offered, they shall be provided by qualified professional personnel;

(C) Rehabilitation Services. If rehabilitation services are offered, they shall be prescribed by a physician and performed by qualified therapists. Orders for the various



therapies and treatments shall be in effect for the specified number of days indicated by the physician's written order. If no time period is specified, then the time period shall not exceed sixty (60) days and a new order by the physician must be obtained. Therapy services provided shall be summarized in the participant's record and progress noted at least monthly by the therapist;

(D) Medical Services. If medical services are offered, a licensed nurse shall be available at all times that the program is in operation. Medical services shall be provided in accordance with the particular needs of each participant. The licensed nurse shall be the only individual authorized to receive, control and manage the medication and drug program. The licensed nurse shall be responsible for the following:

1. Administration of medications and treatments, including the following requirements:

A. Medications or treatments may not be administered without an order signed by a licensed physician. Physician's phone orders may be taken only by a licensed nurse. Phone orders shall be written into the participant's record by the licensed nurse receiving them and shall be signed by that person. The physician shall sign and date the order within five (5) working days after giving the phone order;

B. Orders concerning treatments and medications shall be in effect for a specified number of days as indicated by the physician. If not specified, the period may not exceed sixty (60) days;

C. The licensed nurse shall communicate as indicated with the participant's physician to report observed changes in health status, including reaction to medications and treatments. If an adverse reaction to medications, treatments or diet is observed, the participant's physician shall be called immediately. If contact cannot be made with the personal physician, emergency medical procedures shall be followed; and

D. All medications, including over-thecounter medications, shall be packaged and labeled in accordance with applicable professional pharmacy standards, state and federal drug laws and regulations and the United States Pharmacopeia (USP) labeling shall include accessory and cautionary instructions as well as the expiration date, when applicable and the name of the medication as specified in the physician's order. Over-the-counter medications for individual participants shall be labeled with at least the participant's name; and

2. Medication storage and records. The provider shall have a safe, secure, locked placed for storing medications or drugs and make them available to the participant according to the instructions of his/her personal physician. Schedule II drugs (chapter 197, RSMo and 19 CSR 30-1.010) shall be kept in a locked box. Medications requiring refrigeration shall be kept refrigerated in a locked room or in a separate locked refrigerator or in a locked box within the refrigerator or in a refrigerator in a locked room. Nonprescription medicines may be retained in the facility for administration as ordered by the participant's physician. The system for administering and storing medications shall be reviewed not less than every three (3)months by a licensed nurse. A written record of medications administered shall be maintained. Records shall be kept of all Schedule II drugs.

Auth: sections 660.050, RSMo (Cum. Supp. 1992) and 660.418, RSMo (1986). Original rule filed Oct. 15, 1984, effective Jan. 11, 1985.

*Original authority: 660.050, RSMo (1984), amended 1988, 1992 and 660.418, RSMo (1984).

13 CSR 15-8.060 Record keeping Requirements

PURPOSE: This rule describes the minimum requirements for administrative, participant and program records that the adult day care provider shall maintain.

(1) The adult day care provider shall maintain administrative records that include at least:

(A) Written personnel policies;

(B) An organizational chart depicting lines of supervision and responsibility;

(C) Individual personnel records for both paid staff and volunteer staff who are counted in the staffing ratio that include the following:

1. Position title and written descriptions of job responsibilities;

2. Name, address, home telephone number, date of birth and Social Security number;

3. Documentation of professional qualification; such as copies of license, certification, as applicable;

4. Educational background;

5. Employment history and documentation of references checked prior to employment;

6. Annual evaluation of work performance:

7. Documentation of orientation and inservice training received:

8. Record of dates and hours worked for at least the previous calendar year;

9. Copies of contracts with consultants, as applicable;

10. Documentation, as applicable, of any communicable disease and written physician's release to return to work; and

11. Documentation of current certification in first aid and cardiopulmonary resuscitation (CPR), as applicable;

(D) Fiscal records that include documentation of program income and expenditures in accordance with generally accepted accounting procedures;

(E) Records of orientation and in-service training provided; and

(F) Current facility inspection reports from the local health authority, local fire department, Department of Health or Division of Aging, as applicable, including catered services.

(2) The provider shall maintain individual participant records that include at least:

(A) Identifying information consisting of the participant's name; address; home telephone number; sex; date of birth; legal guardian, if applicable; the name and telephone number of the person to be notified in case of emergency; next of kin; travel directions between the home and program location and transportation arrangements, if applicable;

(B) Physician's pre-admission medical report and recommendations and subsequent medical information;

(C) Individual plan of care and progress notes;

(D) A chart of medications administered and any reactions noted, if applicable;

(E) Documentation of modified diet as provided, if prescribed;

(F) Daily attendance log for the previous calendar year; and

(G) Documentation regarding any accidents or incidents.

(3) The provider shall maintain program records that include at least:

(A) Current written program description;

(B) Schedule of daily group activities planned and record of activities actually conducted shall be maintained for the previous four (4) calendar months;

(C) Weekly menus of meals planned and records of actual meals served shall be maintained for the previous four (4) calendar months;

(D) Emergency medical plan; and

(E) Fire safety plan.

(4) Records or any information regarding adult day care program participants shall be confidential and no information shall be released without a written release of information signed by the participant or legal guardian except that records shall be available to the division for program inspection, monitoring or technical assistance purposes.

(5) Records shall be maintained for no less than five (5) years unless otherwise specified in this rule. Current records shall be kept on site within the adult day care program. Inactive records may be maintained at another central location but in no case outside the state of Missouri. Any record requested by the division shall be available within twenty-four (24) hours of the request.

Auth: sections 660.050, RSMo (Cum. Supp. 1992) and 660.418, RSMo (1986).* Original rule filed Oct. 15, 1984, effective Jan. 11, 1985.

*Original authority: 660.050, RSMo (1984), amended 1988, 1992 and 660.418, RSMo (1984).

13 CSR 15-8.070 Facility Physical Requirements

PURPOSE: This rule establishes the minimum physical and maintenance requirements for facilities in which adult day care programs are operated.

Editor's Note: The secretary of state has determined that the publication of this rule in its entirety would be unduly cumbersome or expensive. The entire text of the material referenced has been filed with the secretary of state. This material may be found at the Office of the Secretary of State or at the headquarters of the agency and is available to any interested person at a cost established by state law.

(1) The adult day care program facility shall be safe and suitable for participants.

(2) Minimum space requirements shall be eighty (80) square feet per participant, for up to twenty (20) participants and an additional fifty (50) square feet per each additional participant. Space requirements do not include office space, bathrooms, storage, examining rooms or dining rooms, unless the latter is also used for activities. For associated adult day care programs, the required space shall be designated and in excess of the particular facility's required licensed space for providing long-term care or medical care.

(3) The facility shall have a room where all of the participants can gather as well as rooms or divided areas for small group activities, including a quiet area for rest.

(4) Furniture shall be of a size and design so that it is easily used by persons with limited agility. It shall be sturdy and secure so that it cannot easily tip when used for support while walking or sitting. At a minimum, the following shall be provided:

(A) One (1) chair for each participant and staff person;

(B) Table space adequate for all participants to be served a meal at a table at the same time;

(C) Reclining lounge chairs or other sturdy comfortable furniture, the number to be determined by the needs of the participants; and

(D) One (1) bed with adequate privacy and quiet to be available for temporary use of participants as needed.

(5) Equipment and supplies shall be adequate to meet the needs of participants including items necessary for direct care and items to encourage active participation and group interaction.

(6) The building in which the program is located shall be of sound construction and maintained in good repair.

(7) Ventilation, by natural or mechanical means, shall be provided. All screen doors shall be equipped with self-closing devices and shall fit tightly. Doors and windows and other openings to the outside shall be screened when necessary, to prevent entrance of insects and vermin.

(8) The heating system shall be in compliance with the National Fire Protection Code, published by the National Fire Protection Association (NFPA) and all state and local codes. Exposed heating pipes, hot water pipes or radiators in rooms and areas used by participants shall be covered or protected, and insulated when appropriate. Portable space heaters shall not be used. Room temperatures shall be maintained between sixty-eight degrees Fahrenheit ($68^{\circ}F$) and eighty-five degrees Fahrenheit ($85^{\circ}F$) in all seasons and the reasonable comfort needs of individual participants shall be met.

(9) Illumination shall be adequate in all areas and commensurate with the type of activity. Glare shall be kept at a minimum by providing shades at all windows exposed to direct sunlight and light fixtures shall have shades.

(10) All plumbing and plumbing fixtures shall conform to applicable local codes. There shall be no cross-connection between the potable water supply and any source of pollution through which the potable water supply might become contaminated.

(11) An adequate supply of water, the source of which is approved by the state water control authority, under sufficient pressure to properly serve the facility shall be provided. The potable water system shall be installed to preclude the possibility of backflow.

(12) Drinking water shall be easily accessible to the participants and provided by either an angle jet drinking fountain with mouth guard or by a running water supply with individual service drinking cups. Drinking facilities may not be located in a toilet room.

(13) At least one (1) toilet and washbowl shall be provided for each ten (10) participants or any additional fraction. The washbowl shall be in proximity to each toilet and shall have hot and cold running water. Hot water shall not exceed one hundred ten degrees Fahrenheit (110° F). The toilet room shall be within easy access of the activity areas and the participants shall have the right to privacy. Each toilet room shall be equipped with approved natural or mechanical ventilation. All toilets shall have grab-rails. Individual paper towels, a trash receptacle, soap and toilet paper shall be provided at all times and shall be within reach of the participants.

(14) If wheelchair-bound or other physically handicapped persons are accepted, the facility shall have ramps or other means of accessibility for handicapped persons, and shall meet the standards of the American National Standards Institute publication (ANSI), A117.1 Making Buildings and Facilities Accessible to, and Usable by, the Physically Handicapped.

(15) Stairways and hallways shall be kept free of obstructions and shall be well lighted. All stairways and ramps shall have nonslip surface or treads. All inside and outside stairs and ramps shall have handrails.

(16) All rugs and floor coverings shall be secured to the floor. Throw rugs shall not be used. All equipment and furnishings shall be safe and in good condition.

(17) Sufficient housekeeping and maintenance service shall be provided to maintain the facility in good repair and in a safe, clean, orderly, attractive and sanitary manner.

(18) Drugs, cleaning agents, pesticides and poisonous products shall be stored apart from food, out of the reach of the participants and shall be used in a manner which assures the safety of participants and staff.

(19) Garbage shall be stored and disposed of in an approved manner.

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(20) The facility shall be maintained free of insects and rodents. Control measures shall be provided to prevent rodent and insect infestation.

Auth: sections 660.050, RSMo (Cum. Supp. 1992) and 660.418, RSMo (1986).* Original rule filed Oct. 15, 1984, effective Jan. 11, 1985.

*Original authority: 660.050, RSMo (1984), amended 1988, 1992 and 660.418, RSMo (1984).

13 CSR 15-8.080 Fire Safety Requirements

PURPOSE: This rule establishes specific fire safety requirements for adult day care programs and facilities.

Editor's Note: The secretary of state has determined that the publication of this rule in its entirety would be unduly cumbersome or expensive. The entire text of the material referenced has been filed with the secretary of state. This material may be found at the Office of the Secretary of State or at the headquarters of the agency and is available to any interested person at a cost established by state law.

(1) Adult day care programs located in organized areas or municipalities shall obtain, annually, written approval from local fire safety officials certifying that the facility complies with local fire codes. If there are not applicable codes, or if the division determines that the codes are not adequate to assure the safety of older or handicapped persons, the provisions of the National Fire Protection Association, Life Safety Code for Places of Assembly (NFPA No. 101, 1981 edition) shall apply. This section shall not be applicable to associated adult day care programs holding a current license to operate issued by the Division of Aging or the Department of Health if the designated adult day care program space was included in the most recent inspection by those agencies.

(2) The facility shall have a minimum of two (2) exits remote from each other. Exits shall be clearly marked with exit signs and shall provide egress at ground level.

(3) Each provider shall locate, install and maintain in operable condition an adequate number of smoke detectors and fire extinguishers of the appropriate type as determined in consultation with the local fire authorities or the Division of Aging. Fire extinguishers shall comply with NFPA 10 requirements.

(4) A written plan for assuring the safety of participants, staff and volunteers in case of fire or other disaster shall be developed in consultation with state or local fire authorities and shall include at a minimum, the following:

(A) A written assessment of potential fire or safety hazards present on the premises and actions and procedures to follow to minimize potential danger;

(B) A written schedule for periodic checks for battery strength of smoke detectors and adequate pressure of fire extinguishers; and

(C) A written training plan and schedule for staff and volunteers on safety responsibilities and actions to be taken if an emergency situation occurs.

Auth: sections 660.050, RSMo (Cum. Supp. 1992) and 660.418, RSMo (1986).* Original rule filed Oct. 15, 1984, effective Jan. 11, 1985.

*Original authority: 660.050, RSMo (1984), amended 1988, 1992 and 660.418, RSMo (1984).