

BQIS GUIDELINES

PRE-TRANSITION QUALITY ASSURANCE CHECKLIST

1	Home and Community Preferences met? (type and location)	Expectations: The type and location of the home meet the specifications as outlined in the support plan. • Home and Community meet wants of individual, as described in PCP/ISP? • Has the guardian/health care rep. visited the home and/or have they approved a move to this home?
2	Home adaptations in place?	Expectations: All adaptations identified in the PCP/ISP are in place at the home. The individual can move about the location without restrictions as independently as feasible. • Are home adaptations identified in the PCP/ISP? • Are they in place at the home?
3	Home clean and hygienic?	Expectations: The home will look and smell clean. • Is the carpeting/flooring sanitary? • Are the walls clean? • Do any rooms have unusual odors? • Are the kitchen and all appliances clean? • Is the bathroom clean? Are bathroom fixtures clean?
4	Safe storage of medications, cleaning supplies, knives and other potential hazards?	Expectations: Medications can be stored safely. Chemicals, sharps and other potential hazardous items will be stored in the home in a manner that does not pose a threat to the individual. • Is there a plan for safe storage of medications, per the needs of the individual? • Will cleaning supplies be stored separately from food? • Is there a plan for storage of chemicals, sharp instruments and other hazardous items, which ensures the safety of the individual per the support plan? • Is all safety/storage equipment identified in any of the above plans present?
5	House, lot, yard, garage, driveway, etc., free of environmental hazards?	Expectations: Visual inspection of the interior and exterior of the home reveals no observed hazards. • Are there obvious hazards? • Are ramps, rails, etc. secured when tested? • Are there bare light bulbs, frayed cords, or overloaded sockets in the walls? • Does the provider have a procedure to take care of hazards, which may occur in the home?
6	Transportation available to meet all community access needs?	Expectations: Individuals will not be restricted in their access to the community due to inadequate transportation. • Is there a plan that addresses transportation needs as identified in the PCP/ISP? • How will the individual leave the home for shopping and appointments? • What sort of vehicle will be used? • Is there any transportation issue that will cause a barrier to travel into the community?
7	Personal Physician identified, and appointment scheduled?	Expectations: The individual has a personal physician identified and an appointment scheduled. • Is the name and contact information present for the personal physician? • Is there an appointment scheduled? • If individual is moving from one residence to another and is keeping the same physician, is there evidence of continued physician services (follow-up or routine return appointment scheduled)?
8	Personal Dentist identified, and an appointment scheduled?	Expectations: The individual has a personal dentist identified and an appointment scheduled. • Is the name and contact information present for the dentist? • Has an appointment been scheduled? • If individual is moving from one residence to another and is keeping the same Dentist, is there evidence of continued dental services (follow-up or routine return appointment scheduled)?

9	Behavior Support provider identified.	Expectations: If there is a diagnosis of any behavioral or emotional challenges which require professional care, a Behavioral Support provider will be a part of the support team. • Does the PCP/ISP identify a need for a Behavior Support provider? • Has the provider identified this specialist?
10	Psychiatrist identified?	Expectations: If the individual is taking psychotropic medications, a psychiatrist will be part of the medical support team. • Is the individual taking psychotropic medications? • Has a psychiatrist been identified?
11	Adequate staff assigned?	Expectations: There will be adequate staff available to meet the needs of the individual. • Does the provider state that adequate staff have been hired and are ready to provide care and services as identified in the PCP/ISP?
12	Staff received information addressing individual's medical needs?	Expectations: Staff are able to perform services to meet the individual's medical needs as identified in the PCP/ISP. • Is there a medical plan for the individual? • Is documentation of information shared addressing medical needs present? • Is there a designated person for staff to obtain information as needed?
13	Staff received information addressing the individual's dietary/nutritional needs?	Expectations: Staff are able to perform procedures to meet the individual's dietary/nutritional needs. • Is there a dietary/nutritional plan in the PCP/ISP? • Is documentation of information shared addressing dietary/nutrition present? • Is there a designated person for staff to obtain information as needed?
14	Staff received information addressing the individual's personal hygiene needs?	Expectations: Staff are able to perform procedures/interventions to meet the individual's personal hygiene needs. • Is documentation of information shared addressing the individual's personal hygiene needs present? • Is there a designated person for staff to obtain information as needed?
15	Staff received information addressing individual's mobility needs?	Expectations: Staff are able to perform procedure/interventions to meet the individual's mobility needs. • Does the individual's PCP/ISP address mobility needs? • Is documentation of information shared addressing the individual's mobility needs (ex. transfers) present? • Is there a designated person for staff to obtain information as needed?
16	Staff received information addressing the individual's behavioral considerations?	Expectations: Staff are able to perform procedures/interventions to meet the individual's behavioral considerations. • Does the individual PCP/ISP address behavioral support needs? • Is documentation of information shared addressing the individual's behavioral considerations present? • Is there a designated person for staff to obtain information as needed?
17	High-risk issues identified and plans developed to address them?	Expectations: The provider is knowledgeable of all high risk issues identified in the PCP/ISP and has a plan addressing each issue. • Does the provider demonstrate knowledge of all high-risk issues? • Is there a plan that addresses each issue? • Is the provider knowledgeable of the possible negative consequences if plans are not carried out correctly?
18	Phone installed in the home?	Expectations: There is a phone installed in the home and the phone number is known to the residential provider, the Targeted Case Manager, the Guardian/Healthcare Representative, and the BDDS Transitions Coordinator.
19	Is an emergency telephone list present?	Expectations: An emergency telephone list is posted in an area visible from the phone (or as indicated in the PCP/ISP) that includes numbers for: ▪ The local emergency number (e.g. 911) ▪ The Individual's legal representative (or advocate, if applicable) ▪ The local BDDS office ▪ The Targeted Case Manager ▪ Adult Protective Services, or Child Protective Services – depending on age of Individual

		▪ The Developmental Disabilities Ombudsman ▪ Any other Service Provider Identified
20	Hot water no warmer than 110° Fahrenheit?	Expectations: The maximum temperature of the hot water in the home is no higher than 110° Fahrenheit making it safe for bathing, unless otherwise specified in the PCP/ISP. • Does the PCP/ISP confirm that hot water temperature control is not necessary? • Is the home in compliance with the PCP/ISP? • If water temperature is not addressed in the PCP/ISP, is the hot water no warmer than 110° Fahrenheit as tested at the bathtub (or shower if no tub) following full stream running for approximately 3 minutes (ensuring water is at maximum temperature)?
21	Services/supports identified and addressed in the POC?	Expectations: The Plan of Care identifies and addresses all necessary services and supports as outlined in the Individual Support Plan • Has the Service Coordinator confirmed that all services and supports identified in the ISP are identified and addressed in the Plan of Care?
22	Neurologist identified?	Expectations: If epilepsy, seizure disorder, head injury, hydrocephaly, or other neural disorders exist, a neurologist will be part of the medical support team. • Does the individual's PCP/ISP present neural disorders as indicated above? • Has a neurologist been identified? • Is the provider committed to having the Primary Care Physician make a referral to the Neurologist?
23	Other Medical Specialist identified?	Expectations: If additional medical conditions exist which require medical specialist care (such as vision impairments), the specialist/s will be part of the medical support team. • Does the PCP/ISP present additional medical specialist needs? • Have all additional specialists been identified? • Is the provider committed to having the Primary Care Physician make referrals to all specialists as indicated?
24	OT/PT provider identified?	Expectations: If there are needs relating to mobility difficulties, fine motor coordination, sensory sensitivity, eye hand coordination, transfer difficulties, etc., which would require professional care, OT and/or Pt will be part of the support team. • Does the PCP/ISP present needs for OT/PT services as indicated above? • Has an OT and/or a PT been identified? • Is the provider committed to having the Primary Care Physician make referrals as indicated?
25	Speech Language Pathologist identified?	Expectations: If there are communication deficits or swallowing difficulties that require professional care, a Speech/Language Pathologist will be part of the medical support team. • Does the individual present a need for SLP services as indicated in the PCP/ISP? • Has a SLP been identified? • Is the provider committed to having the Primary Care Physician make a referral to the SLP?
26	Dietician identified and a plan in place for meeting nutritional needs?	Expectations: If there are concerns regarding the individual's food intake due to diabetes, g-tube, food allergies, caloric limits, etc., a dietician will be part of the medical support team. • Does the individual have a special diet or special dietary needs as described in the PCP/ISP? • Has a dietician been identified? • Is the provider committed to having the Primary Care Physician make a referral to the dietician as indicated?
27	Medical equipment present or arrangements made to obtain the equipment?	Expectations: The individual will have the medical equipment prescribed for them in the PCP/ISP available at the time of their move into the home (c-pap; nebulizer; glucometer; oxygen; etc.). • Does the PCP/ISP identify medical equipment needs? • Does the provider have a plan to ensure all equipment is in the home at the

		time of the individual's arrival?
28	Adaptive equipment present or arrangements made to obtain them?	Expectations: The individual will have the adaptive equipment prescribed in the PCP/ISP available at the time of their move into the home (wheelchair; walker; gait belt; braces; shower chair; dining equipment; positioning equipment; etc). • Does the PCP/ISP identify adaptive equipment needs? • Does the provider have a plan to ensure all adaptive equipment is in the home at the time of the individual's arrival?
29	Home stocked with food to accommodate the new occupant?	Expectations: Food will be available in the home to accommodate the individual's wants and needs upon arrival. • Does the provider have a plan to have staples and main course food items in the home to accommodate the individual's wants and needs upon their arrival?