OMRDD

GUIDELINES FOR

CREATING AND MAINTAINING
A HOME-LIKE LIVING ENVIRONMENT

APRIL 2004
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- *Safe Bathing Alert* [issued 7/03]
  (replaces 99-02 Hot Water Injuries/Deaths Can Be Prevented)
- 99-03 LEAD ALERT
- 00-01 *Drowning Alert*
- 00-02 *Carbon Monoxide Poisoning*
- 01-01 *Dryer Safety*
- *Van Alert* [issued 4/19/02]
INTRODUCTION

A home should be a place where individuals can relax, be secure, and enjoy life. OMRDD, through regulation and/or policy, requires that the quality of the living environment be home-like, individualized and comfortable, as well as clean and safe. The OMRDD Strategic Management Plan for 2002–2003 includes an objective to develop a training module that focuses on environmental issues related to the home-like appearance of locations where people with developmental disabilities live. This objective results from OMRDD’s continued commitment to improve the physical appearance of homes where services are provided.

A committee was established in April 2002 which included DDSO representatives, as well as staff from Upstate Operations and the New York City Regional Office, Quality Assurance, Workforce Development, Interior Design, and Administration and Revenue Management. The committee members determined that it was necessary to develop basic guidelines for home décor, furnishings, storage and maintenance that would be helpful for DDSOs and voluntary agencies providing residential services. These guidelines may stand alone, or serve as a companion piece to a training module, for direct support staff, home managers, team leaders, development staff, maintenance staff, quality assurance, service coordinators, and other staff involved in creating, maintaining, or reviewing the home-like living environments of the people we serve.

Based upon a model that had been previously developed by the Hudson Valley DDSO, the members considered, on a room-by-room basis, the practical and required elements to home enhancement. The resulting product balances the safety and quality of the environment with the use and encouragement of individual creativity and expression – all of which are important ingredients when making a house into a home for New Yorkers with mental retardation and developmental disabilities.
LIVING ROOMS/FAMILY ROOMS

When decorating a living room/family room, select the décor style of the room first. Once style is established, select color scheme and review fabric options. Furniture should be of coordinating colors, with tasteful accents. First and foremost, the room should support the lifestyles of the people who live there. Be sensitive to the personal preferences, likes and dislikes, of the people living in the home.

**Furniture** should be ordered/purchased in keeping with the needs of those who will live in the home as well as their personal preferences. Staff should determine if people are able to use fabric sofas, etc.; if not, patterned vinyl or a special fabric system called crypton is available. Crypton has the look and feel of fabric, and also is resistant to moisture, stains, and bacteria, is strong and durable, and meets flammability codes.

When furniture is purchased, ask for manufacturer warranty information, as well as instructions on the care and maintenance of upholstered furniture. This information should be maintained at the home.

Upholstered fabric furniture ordered from the OMRDD Warehouse is delivered with an extra set of cushion covers for each sofa, chair, etc. These should be stored in a safe place and used when the original covers are being cleaned or have been damaged.

If furnishings break, check with the manufacturer to see if the item is still on warranty. Many State contract vendors will come to the home to repair or replace parts, also known as “field replacement.” These styles should be used for high use areas.

Furniture should be arranged in homelike seating arrangements to encourage conversational, interactive groupings. Lining the seating up against walls should be avoided. Picture 1 on page 3 shows furniture arranged in a living/family room that will encourage conversation and interaction of the people in the home. Picture 2 on page 4 shows furniture incorrectly lined up against walls. Furniture should also not be placed in such a way as to block windows, particularly in homes that lack a second means of egress on upper stories. Furniture should be reset (placed in original location) when moved or rearranged during an activity.

It may be preferable to place the television and stereo equipment in separate rooms if possible. Homes that do not have a den or family room should refrain from simultaneous use of the TV and stereo without the use of headsets.

For ICFs, refer to memorandum, *New Requirements for Furnishings*, issued by Quality Assurance dated August 25, 2003 [see page 40].
Picture 1. Furniture arranged in a living/family room that will encourage conversation and interaction of the people in the home.
Picture 2. Furniture incorrectly lined up against the walls of a living room/family room
Window treatments for a living room/family room can be purchased retail or from a catalog, or can be custom made. There are many window treatment options that work well in various settings based on challenging behaviors presented by the people who live there. If window curtains are closed at night they should be opened and decoratively arranged in the morning. Tiebacks should be maintained and kept in place. Curtains that have fallen down should be rehung as soon as possible. Individual privacy must be maintained. Fire retardant fabrics are generally not available as “ready made” and must be custom ordered. If a window air conditioner is installed, make sure the installation is professional looking and not sloppy or crooked. Window treatments should also be adjusted accordingly.

For ICFs, refer to memorandum, New Requirement for Furnishings, issued by Quality Assurance dated August 25, 2003 [see page 40].

Walls can be decorated with wall borders, stenciling, sponge painting, rag rolling or feather painting to enhance living room/family rooms. These techniques work particularly well in homes where it is difficult to keep decorations on the walls. How-to information can be obtained from paint stores, the library, or the Internet. In addition, some wall coverings provide heavy-duty protection against wall abuse, with either “.040” or “.060” thickness protection to stand up to high activity levels. They are available in textures and patterns and are aesthetically pleasing. Check on optional trims and moldings to complete the look. Doors can also be protected with full cladding, which protects the entire door surface, including door edges; kick/push plates; door edge protectors and knob protectors to minimize doorknob repair and replacement. When considering wall coverings, remember life safety code flame spread requirements, if applicable for the home. Be familiar with the Safeguarding Alert From OMRDD 99-03, LEAD ALERT [see Safeguarding Alerts page 42].

Walls hangings of interesting subjects should be coordinated and grouped in pleasing arrangements. The interests of those living in the homes should be considered in selection, material and method of hanging. Many homes have hung tapestries or decorative quilts/rugs that provide texture and color, which make a beautiful presentation and hold up well in homes of individuals with challenging behaviors. Typically, the business office for the agency or DDSO is able to provide the names of vendors where wall hangings may be purchased.

Large wall hangings or tapestries may have an impact on the flame spread rating in homes that must comply with the Life Safety Code. Both the size and composition of large wall hangings can be a factor.

Bolts or screws should not be visible on a picture or frame. If behavior is an issue in a home, a “secure T mount” hanging system should be used. Clear plastic or lamination can also be used in lieu of glass. Another option is tasteful art painted directly on the wall.
An excellent resource for pictures is Metro Industries, which is located at the Capital District Psychiatric Center in Albany, NY. They are considered a preferred vendor since it is an OMH workshop. They offer traditional framing as well as the "secure T mount" hanging system. Call (518) 447-9611 ext. 6737 for a free color catalog or disk of available art prints, as well as frame and mat choices.

Bulletin boards could be provided for people as an option to display personal cards and memorabilia [Refer to page 29 for personal privacy issues]. Tape, tacks and staples should not be used on walls.

**Flooring** selection should be based on the lifestyles of the people who live in the house, as well as the architectural characteristics of the home. If carpet is selected for living rooms/family rooms, construction should be tufted or woven, level or multi-level loop pile. Do not select high pile or shag styles. In addition, pay attention to coloration and soil resistance, to minimize the appearance of wear and dirt. Carpet should have at least five color hues for soil-hiding enhancement, and the weight of the carpet pile should be at least 28 oz/yd.

Floor patterns can be used with either vinyl or ceramic floor tile, as shown in Picture 3 on pages 7 and 8. Manufacturers also offer a stripwood vinyl tile that provides the look and feel of real wood. If resilient (hard surface) flooring or floor tile is selected, proper maintenance is very important. It will help to preserve overall appearance, protect the floor surface and reduce wear, and increase the life of the flooring. Follow manufacturer’s maintenance recommendations that are readily available from the vendors.

When using resilient flooring or floor tile, coordinating non-skid area rugs can be used to add warmth and aesthetic appeal. Braided rugs without the inner tubing lie flat on the floor and do not pose a trip hazard. They work well in homes that accommodate people who utilize wheelchairs or walkers for mobility.

**Lighting.** Lighting plays an important role in optimizing the indoor environment. Both the quality and quantity of illumination are important. Each residence requires its own lighting plan. When selecting lighting fixtures, there are many things to consider, including the architectural/style of the house, as well as the lifestyles and behaviors of the people who reside in the home. For the living room, consider the following:

- Table lamps and floor lamps should be substantial enough so they do not tip. Be cautious if using "torchiere" lamps, particularly those with halogen bulbs.
- Wall sconces, pendant lighting, and trac lighting are appropriate sources of illumination in many residences.
- Use unbreakable lens covers on lighting fixtures for safety.
Picture 3. Vinyl or ceramic floor tile pattern options

FLOOR TILE PATTERNS
VINYL TILE or CERAMIC TILE
Picture 3. Vinyl or ceramic floor tile pattern options, continued

FLOOR TILE PATTERNS
VINYL TILE or CERAMIC TILE
**Safety considerations.** Adhere to the agency smoking policy. Remember to consider safety when placing seasonal decorations, or when candles are used for the holidays.

**Adaptive equipment.** All general use adaptive equipment should be cleaned after each use. All general use adaptive equipment should be inspected and cleaned as needed but at least weekly. On a monthly basis, all general use adaptive equipment should be inspected to ensure that there are no tears and rips present. All necessary repairs must be addressed immediately. Replacement should occur when the equipment can no longer be repaired.

**General comments.** Program supplies can be kept in labeled storage bins and put away in a designated location when not in use.
BEDROOMS

A personalized bedroom should tell a visitor about the individual who lives there. What are their interests? What is their favorite color? Do they have collectibles? Do they excel in sports or have a hobby? Be sensitive to the ethnicity of the people living in the home.

A personalized bedroom should also reflect the individual’s age and gender. Personal choice is of utmost importance. All beds should have a bedspread or comforter, and additional accessories such as dust ruffles and pillow shams can also be used. Bedrooms with more than one occupant should have coordinated bed ensembles, window coverings, and rugs. Remember to support the selection of age appropriate items for the room. Adults interested in child like themes can purchase bedding ensembles designed for the adult through catalogs.

Furniture should be ordered/purchased in keeping with people’s needs. When furniture is purchased, ask for manufacturer warranty information. This information should be kept on file in the home. All furnishings should be clean and in good repair.

For ICFs, refer to memorandum, New Requirements for Furnishings, issued by Quality Assurance dated August 25, 2003 [see page 40].

Personal property should be labeled in a discreet manner [Refer to page 29 for personal privacy issues].

Window treatments such as window shades, blinds, valences and curtains are important in ensuring people’s privacy in a bedroom. Pay special attention to the placement of window coverings when the individuals living in the home have challenging behaviors. All windows should be in good working order, free of cracks, open and close, have locks in working order, and have screens and storm windows where applicable. New thermo pane windows do not have storms.

For ICFs, refer to memorandum, New Requirements for Furnishings, issued by Quality Assurance dated August 25, 2003 [see page 40].

Walls can be decorated with wall borders, stenciling, sponge painting, rag rolling or feather painting to enhance bedrooms. These techniques work particularly well in homes where it is difficult to keep decorations on the walls. In addition, some wall coverings provide heavy-duty protection against wall abuse, with either .040” or .060” protection to stand up to high activity levels in textured and patterned to be aesthetically pleasing. Check on optional trims and moldings to complete the look. Doors can also be protected with full cladding, which protects the entire door surface, including door edges; kick/push plates; door edge protectors and knob protectors to minimize doorknob repair and replacement. When considering wall coverings, remember life safety code flame spread requirements, if applicable for the home. Be familiar with the Safeguarding Alert From OMRDD 99-03, LEAD ALERT [see Safeguarding Alerts page 42].
**Wall hangings** should be used in people’s bedrooms. Coordinating pictures should be purchased and affixed to the wall in a method appropriate to meet the needs of the people. Posters, favorite pictures, and personal artwork can be framed for presentation and preservation. The “secure T mount” hanging system, available from Metro Industries, ensures that items are fastened to the wall without visible bolting or hardware, and therefore, works well when behavior is an issue in a home. Decorative mirror brackets with plexiglas or laminate over posters have also proven to be successful strategies. Another option is tasteful art painted directly on the wall.

Consider framing photographs of families, members and friends. These can be hung in pleasing arrangements on bedroom wall, or placed on dresser tops or the nightstand. Photographs of individuals participating in community activities and recreational outings foster a homelike atmosphere. Enlarging and framing personal photographs adds to each individual’s personal story.

Tape, tacks and staples should not be used on walls. Bulletin boards can be provided for people as an alternative to display personal cards and memorabilia [Refer to page 29 for personal privacy issues].

**Lighting.** When selecting lighting fixtures for the bedroom, remember that table lamps and floor lamps should be substantial enough so that they won’t tip. Be cautious if using “torchiere” lamps, particularly those with halogen bulbs. Wall sconces, pendant lighting, and trac lighting are appropriate sources of illumination. Use unbreakable lens covers on lighting fixtures for safety.

**Flooring** selection should be based on the lifestyles of the people who live in the house, as well as the architectural characteristics of the home. If carpet is selected for the bedroom, construction should be tufted or woven, level or multi-level loop pile. Do not select high pile or shag styles. In addition, pay attention to coloration and soil resistance, to minimize the appearance of wear and dirt. Carpet should have at least five color hues for soil-hiding enhancement, and the weight of the carpet pile should be at least 28 oz/yard.

Patterns can be used when using either vinyl or ceramic floor tile, as shown in Picture 3 on pages 7 and 8. Manufacturers offer a stripwood vinyl tile that provides the look and feel of real wood. If resilient (hard surface) flooring or floor tile is selected, proper maintenance is very important. It will help to preserve overall appearance, protect the floor surface and reduce wear, and increase the life of the flooring. Follow manufacturer’s maintenance recommendations that are readily available from the vendors.

When using resilient flooring or floor tile, coordinating non-skid area rugs can be used to add warmth and aesthetic appeal. Large area rugs may also be placed between beds. Braided rugs without the inner tubing lie flat on the floor and do not pose a trip hazard. They work well in homes that accommodate people who utilize wheelchairs or walkers for mobility.
Safety considerations. Avoid instances of standing water in unemptied humidifiers, which promote mildew growth. Adhere to the agency smoking policy. Adhere to OMRDD’s published “safe bed” policy when purchasing or replacing beds.
KITCHENS/DINING AREAS

The kitchen and dining areas should be functional and cheerful rooms in the home. Many hours are spent in these areas each day and efforts should be made to arrange equipment and utensils so that they are easily accessible and functional in design. These rooms should be well lit and decorated with coordinating colors and/or a consistent motif (i.e., sunflowers, berries, roosters, etc.)

Furniture should be consistent with people’s needs. When furniture is purchased, ask for manufacturer warranty information. This information should be kept on file in the home. All furnishings should be clean and in good repair.

Tables should be made of a hard, durable material. Table surfaces should be smooth, so they are easy to clean and sanitize. Cleaning and sanitizing should take place after each meal. Avoid using chemicals that are too harsh. This will take the finish off the furniture. Clean debris that builds up between the leaves of tables.

Wheelchair height dining tables are available through the OMRDD Warehouse and the NYS furniture contract if needed. They are similar in style to regular dining tables except that the legs are longer. Consider tables with adjustable leg heights for use with people who are non-ambulatory.

Tabletop dimensions should be such that tableware and adaptive equipment can be accommodated. Everyone should still be able to easily converse across the table. If necessary, consider the use of a second table to accommodate people.

Table decorations and centerpieces are encouraged. Table decorations should not contain poisonous plants or other harmful objects. If tablecloths or placemats are used, they must be cleaned after each meal; cloth coverings should be laundered and plastic or vinyl coverings wiped down and sanitized.

Make sure the glides on all chair legs remain in place to avoid floor finish damage. Chairs should be comfortable, with back support, and able to easily fit under the table when someone is sitting in them. There should be enough chairs so that the entire group living at the house may be seated at one time. Side chairs with arms should not be too narrow. When individuals are eating, they should be seated. Chairs should be thoroughly cleaned after each meal.

Window treatment options are numerous for kitchens, as privacy is rarely an issue in this room, i.e., valances, Cape Cods, shutters, etc. Caution must be used to keep curtains away from hot surfaces (stoves, toaster, etc.). The window treatments should be consistent with the kitchen’s décor and color scheme. When selecting window coverings, the laundry requirements and durability should be considered. If windows will be opened, they must have screens that are in good repair. For ICFs, refer to memorandum, New Requirement for Furnishings, issued by Quality Assurance dated August 25, 2003 [see page 40].
**Walls** are often painted in a shade of white or off white, although other colors may be used. Color may be introduced with the use of borders, stencils, wall plaques, clocks, baskets, etc. Avoid posting charts for dining procedures, menus or chore lists [Refer to page 29 for personal privacy issues]. Information can be placed out of sight in a designated drawer or other location for reference if needed. When considering wall coverings, remember life safety code flame spread requirements, if applicable for the home. Be familiar with the Safeguarding Alert From OMRDD 99-03, *LEAD ALERT* [see Safeguarding Alerts page 42].

**Wall coverings** are also an option in the kitchen. When considering wall coverings, remember life safety code flame spread requirements, if applicable for the home. If wallpaper is used, it should be a surface that is easily cleaned. Vinyl wall coverings that are easy to clean are preferable. Chair rails may be used to protect the walls.

**Lighting.** When selecting lighting fixtures for the kitchen, generally, a recessed or surface-mounted ceiling fixture is appropriate. They are available with wood trim to match cabinetry. Task lighting over the kitchen sink and countertops is appropriate. Use unbreakable lens covers on lighting fixtures for safety.

**Flooring** surfaces for the kitchen should be easy to clean. Generally vinyl or ceramic tile and linoleum are considered to be the best surfaces for this room. Manufacturers offer a stripwood vinyl tile that provides the look and feel of real wood. A vinyl cove based molding for easy cleaning should be installed.

Non-skid rugs may be used; however, care should be taken to place them in areas where they do not present a tripping hazard or a “trap” for food spillage and bacteria. Rugs should be washable and must be regularly laundered.

Floor surfaces should be swept and sanitized at least daily. Particular attention should be given to the corners and under appliances, so that no debris remains.

**General Environment.** Trash containers must be covered, lined, emptied at least daily, and cleaned and sanitized at least weekly. An attached cover is best since kitchen trash covers tend to disappear. The container should be no larger than a standard kitchen waste receptacle, and should open with a foot pedal. Large outdoor garbage cans are not acceptable in the kitchen area.

Flypaper and/or extermination traps should not be visible. Traps must be emptied or replaced as needed.

Tape, staples, or tacks should not be used on wall and cabinet surfaces. Bulletin boards can be used to post necessary information (i.e., phone numbers, memos, etc.) [Refer to page 29 for personal privacy issues]. If space is not available for a bulletin board, a binder can be utilized for communications. Choosing a general and consistent location to store a binder will ensure that staff can locate it when needed.
Menus and recipe cards should be maintained in a binder, box or drawer. Consider laminating recipes to maintain longevity. If recipes become soiled they should be immediately replaced.

Dishes, pots, pans, and cooking utensils must be machine or air-dried, never wiped with a dishtowel. Paper towels may be used if space for drying is limited.

Hand washing facilities must be available to all individuals involved in food preparation. Hand washing soap and paper towels should be readily available for staff use. Be familiar with the Safeguarding Alert From OMRDD 99-02, *Hot Water Injuries/Deaths Can Be Prevented* [see Safeguarding Alerts page 42].

For sanitary purposes, liquid soap should be placed near the sink in lieu of bar soap. Consider a decorative soap pump that can be left on the counter. Paper towels can be placed on counters or in closed dispensers mounted on the walls. Efforts should be made to use decorative dispensers compatible with the décor of the kitchen.

Electric outlets located near the sink must be grounded (Ground Fault Interrupter - GFI).

**Storage of Non-Refrigerated Items.** The storage area for food should be clean, dry and in an area neither excessively hot nor cold. Shelves should be spaced to provide adequate ventilation and adequate room to properly rotate food. Food must be stored at least 6” off the floor and should not be placed too close to the ceiling, as it may compromise sprinkler and smoke detector functions. All food must be properly covered. Ambient food storage requires that food be in a sealed container or a secured plastic bag to avoid contamination. The storage container must be clearly labeled as to contents and the date of expiration or date placed in the container. No items should be stored closer than 18 inches from sprinkler heads.

Evidence of proper rotation should be present. Foods should either have a manufacturer’s date or be dated with month, day, year when it is placed in storage.

Amounts of inventory in food storage areas should be maintained at levels sufficient to accommodate the people living in the home for a one to two week period. These levels should be monitored to determine compliance with the menu and to reduce excessive inventories.

Canned foods must be free of dents at seams. Swollen or bulging cans must be discarded.

Cleaning supplies and household items, such as brooms, buckets, etc., should be stored in a separate cabinet or closet. The area should be maintained in an orderly manner.

All cleaning products stored must have the “Right to Know” information, also known as Material Safety Data Sheets or MSDS, available for review, in a specifically designed area.
Cleaning products should be stored in a secure area. Adequate supplies should be available. Additional inventories of cleaning supplies should be stored in an area away from supplies in use, and should be kept at a minimum with established inventory levels. Excessive quantities should be avoided.

**Storage in the Refrigerator and Freezer.** The refrigerator and freezer must be equipped with thermometers. Refrigerator storage must be maintained between 40 degrees F and 32 degrees F. Frozen storage must be maintained at 0 degrees or less and should be free of frost build-up. Cooked food and/or raw produce stored in the refrigerator should be positioned on shelves above raw meats in order to avoid contamination.

Frozen foods should be thawed in the refrigerator or microwave, never left on the counter to defrost. Thawed food should be used immediately or stored in a refrigerator for a short period of time. Thawed foods should never be refrozen. Foods may be thawed in the microwave, but must be cooked immediately. Never refrigerate food that has been thawed in the microwave unless it has been thoroughly cooked.

During the preparation of meals, perishable foods should be left in the refrigerator until they are ready to be used; or placed back in the refrigerator if not being cooked immediately.

All foods stored in the refrigerator and freezer must be clearly labeled with the date and contents of each container. All food items must be covered or securely wrapped. Staff food should be stored in a separate refrigerator designated for that purpose.

**Kitchen Equipment and Appliances.** The following items should be in good repair and cleaned according to manufacturer’s instructions. Routine cleaning schedules and written directions for cleaning should be established and followed.

**MICROWAVE OVEN**
- Clean and sanitize the microwave following each meal preparation.

- Microwave ovens should be in good working order. They should be immediately taken out of service if malfunctioning is suspected.

**RANGE/OVEN**
- All burners should be working and clean. The reflector pans should be promptly removed and cleaned if spillage occurs. All other exterior surfaces should be cleaned and sanitized daily.

- Oven interiors should be cleaned regularly. Spillage should be immediately addressed, and general oven cleaning done at least monthly.

- Monitor the condition of seals on the oven door and make sure the oven door closes fully.
RANGE HOOD ANCILLARY SYSTEM/EXHAUST FANS
- The filtering system should be replaced and cleaned in accordance to manufacturer’s recommendations. There should be no presence of grease build-up.

REFRIGERATOR/FREEZER
- Clean and sanitize the outer surfaces, especially handles, daily.
- Wipe and sanitize any spillage within the refrigerator/freezer.
- Vacuum the refrigerator and freezer condenser/fan, located on the back of the appliance, on a monthly basis. (See Refrigerator Storage for additional information).
- Make sure door seals are in good condition and that the door is properly hung so that there is a good seal all around when the door is closed.
- Do not use chains or locks on refrigerators and freezers.
- Refrigerators and freezers should be located in the kitchen. A second refrigerator or freezer may be used; however, these items should NOT be located in the dining room or other common living space.

DISHWASHER
- The dishwasher should be in good repair and water temperatures should reach the internal temperatures recommended by the manufacturer.
- Dishes must be machine or air dried, not wiped with a dishtowel. Never store dishes wet.

LIGHTS
- All bulbs should be working and covered with a shade or cover. Light covers should be clean and bug-free.
- Use compact fluorescents where possible. They last longer and use less energy.

FANS
- If fans are present they must be dirt and dust free.
- Safety screens must be present for tabletop or floor standing models.
- Ceiling fans cannot be placed less than 3 feet from smoke detectors. Consider ceiling height when selecting ceiling fans.
- Commercial style fans are not conducive to a home-like environment.
SMALL APPLIANCES
- Small appliances must be UL approved, and in good working order. All small appliances should be periodically checked for frayed cords.

- Toasters should be emptied of crumbs after each use. Avoid the use of toaster ovens for safety.

- Coffee makers should be periodically cleaned using a vinegar solution. Use the manufacturer’s instructions for specific directions.

- Sanitize can openers after each use. Especially note the blade, and remove any caked on food debris.

- If a telephone is in the kitchen, it should be clean and in good working order.

- If the kitchen has an air conditioner, change the filter more often than other unit filters due to grease accumulation.

DRAWERS AND CABINETS
- These should be well organized, free of clutter. The inside and outside of drawers and cabinets should be cleaned at least once per month.

- Ensure that doors are properly hung and close tightly.

COUNTER TOPS
- Counter tops should be made of a plastic laminate or an otherwise durable, smooth surface, without pits or cracks. If a plastic laminate is used, watch for seams that lift over time when wet. Corian or stone may be better if budget permits.

- Care should be taken to use cutting boards to protect the countertops from cuts and gouges. They should be cleaned and sanitized after each use, and generally clear and free of clutter. Provide trivets to avoid burn marks from hot pots.

- Make sure paper towels are available near the sink.

GENERAL COMMENTS
- The equipment and utensils in the kitchen and dining areas should accommodate the needs of the people to be served. If staff are to support these individuals and encourage the highest level of independence possible, the space, equipment and design must be practical and functional. Once a menu outline is determined, review equipment required to prepare that menu.
BATHROOMS

Bathrooms should be decorated and maintained in a manner to promote both cleanliness and a homelike atmosphere. The room should be well lit and decorated with coordinating colors and/or a consistent motif. Bathrooms should be available for use by both the individuals who live there and staff without designation between the two.

Window Treatments. If there is a window, curtains and/or decorative blinds must be used to insure privacy. For ICFs, refer to memorandum, New Requirement for Furnishings, issued by Quality Assurance dated August 25, 2003 [see page 40].

Walls. Tiles are a durable option for a bathroom, as they are resistant to mildew and peeling from moisture. When considering wall coverings, remember life safety code flame spread requirements, if applicable for the home.

Lighting. When selecting lighting fixtures for the bathroom, a combination ceiling light fixture/exhaust fan should be used. The fan should have a low “sone” (noise) level. A dedicated ceiling light should be used over the tub/shower area. Appropriate task lighting should be used over the mirror, or one on either side of the mirror. Use unbreakable lens covers on lighting fixtures for safety.

Flooring surfaces for the bathroom must maintain a sanitary environment. Generally vinyl or ceramic tile and linoleum are considered to be the best surfaces for this room. A vinyl cove based molding for easy cleaning should be installed.

Bath mats may be used; however, care should be taken to place them in areas where they do not present a tripping hazard. Bath mats must be regularly laundered.

Toiletries and Accessories. Toilet paper must be available and accessible at all times. For sanitary purposes, liquid soap should be used in lieu of bar soap. Consider a decorative soap pump that can be left on a vanity counter. Paper towels should be placed in closed dispensers, which can be placed on vanities or mounted on the wall. Efforts should be made to use decorative dispensers compatible with the décor of the bathroom. For both sanitary and aesthetic reasons, personal grooming articles should be stored in other areas or in closed vanities/cabinets within the bathroom.

General Environment. Decorative items, as appropriate to people’s needs and abilities, should be utilized to prevent an institutional/sterile appearance. These may include tank covers, non-skid area rugs, bath mats, unbreakable mirrors/pictures, decorative hand towels, and any wall coverings as suggested for other rooms. These decorative items should be accents to a color and style theme represented by the fixed items in the bathroom – flooring, vanities, and tub/sink/toilet. When appropriate, covered wastebaskets should be step-on type. Non-decorated diaper pails with liners may provide a good alternative.

Ventilation fans should be clean and in working order.
**Adaptive Equipment.** If a shower cart is used, it must be wiped clean after each use, and once weekly, it should be cleaned on both sides. Weekly, the cart and upholstery must be cleaned. A proper cleaning means both sides of the upholstery. On a monthly basis, the carts/upholstery must be inspected to ensure that there are no tears and rips in the upholstery or netting. All repairs must be addressed immediately. Replacement should occur when the equipment can no longer be repaired. Hoyer lifts should be inspected after each use to determine if general cleaning of the canvas surface is needed.

**Storage.** Plungers and toilet bowl brushes should be stored out of sight and separate from supplies for daily living. Cleaning supplies should not be stored in the bathroom unless in a separate secure cabinet.

**Safety Considerations.** Have thermometers available to spot check water temperatures. Digital thermometers are best. For safety, glass thermometers should never be used. If grab bars are used, ensure that they are securely fastened to the wall. Check this regularly. Be familiar with the Safeguarding Alert From OMRDD 99-02, *Hot Water Injuries/Deaths Can Be Prevented*, as well as 00-01, *Drowning Alert* [see Safeguarding Alerts page 42]. Be mindful of mildew growth in the bathroom or other damp areas of the home. Mold spores can initiate allergic reactions in some people. All electrical outlets must be grounded.

**Sanitation Procedures.** Floor surfaces should be swept and sanitized at least daily. Commercially prepared products should be used for sanitizing. Particular attention should be given to the corners and under vanities and bathroom fixtures, so that no debris remains. Shower curtains or tub enclosure should be installed to insure privacy and prevent water damage to the floor adjacent to the tub/shower. Bathtubs must be cleaned after each use. Broken or damaged fixtures should be repaired or replaced. Specialized tubs must be cleaned according to manufacturer’s instructions.
HALLWAYS

All hallways should be free of clutter. Borders, pictures, and other wall hangings should be used to provide continuity of decorating theme throughout the house. In addition, decorations may be strategically placed to aid people in traveling around the home and locating rooms.

Walls can be decorated with wall borders, stenciling, sponge painting, rag rolling or feather painting to enhance living room/family rooms. These techniques work particularly well in homes where it is difficult to keep decorations on the walls. In addition, some wall coverings provide heavy-duty protection against wall abuse, with either .040” or .060” protection to stand up to high activity levels, and are available in textured and patterned to be aesthetically pleasing. Check on optional trims and moldings to complete the look. Handrails and/or bumper rails should be considered for homes that accommodate wheelchairs, walkers, etc. Doors should also be protected with full cladding, which protects the entire door surface, including door edges; kick/push plates; door edge protectors and knob protectors to minimize door knob repair and replacement. When considering wall coverings, remember life safety code flame spread requirements, if applicable for the home. Be familiar with the Safeguarding Alert From OMRDD 99-03, LEAD ALERT [see Safeguarding Alerts page 42].

Lighting. Ensure sufficient lighting in hallways for safety. Wall sconces and surface-mounted or recessed ceiling fixtures are appropriate sources of illumination. Use unbreakable lens covers on lighting fixtures for safety.

Flooring selection should be based on the lifestyles of the people who live in the house, as well as the architectural characteristics of the home. If carpet is selected for the hallway, construction should be tufted or woven, level or multi-level loop pile. Do not select high pile or shag styles. In addition, pay attention to coloration and soil resistance, to minimize the appearance of wear and dirt. Carpet should have at least five color hues for soil-hiding enhancement, and the weight of the carpet pile should be at least 28 oz/ yd.

Floor patterns can be used when using either vinyl or ceramic floor tile, as shown in Picture 3 on pages 7 and 8. Manufacturers also offer a stripwood vinyl tile that provides the look and feel of real wood. If resilient (hard surface) flooring or floor tile is selected, proper maintenance is very important. It will help to preserve overall appearance, protect the floor surface and reduce wear, and increase the life of the flooring. Follow manufacturer’s maintenance recommendations that are readily available from the vendors.

When using resilient flooring or floor tile, coordinating non-skid area rugs can be used to add warmth and aesthetic appeal. Braided rugs without the inner tubing lie flat on the floor and do not pose a trip hazard. They work well in homes that accommodate people who utilize wheelchairs or walkers for mobility.
**General Environment.** Office furniture/coat racks should not be used in front hallways and entrance areas. All doors off the hallway should open into the room not the hallway. Ensure that egress doors have single function locks. Ensure that lighting is adequate. Smoke/fire doors in the hallway should have magnetic door openers or should be closed. Doors should not be propped open. Remember to consider safety when placing seasonal decorations, or when candles are used for the holidays.
OFFICES

Whenever possible, office items such as file cabinets and fax machines should be located out of common living space. If not possible, office furniture should be appropriately coordinated with the room’s décor.

Furniture. Office furniture, including a desk, chair, bookcase, file cabinet, computer, FAX machine, phone, and/or bulletin board, etc., should be appropriate for the size of the room. All homes must have a safe. Ideally, it should be secured to the wall or floor.

Lighting. A surface-mounted or recessed ceiling fixture, in conjunction with task lighting is generally appropriate.

General Environment. Individual charts should be arranged in the bookcase or on a shelf. Appropriate policy manuals and reference information should be available to staff. Binders should be available for additional memos and other correspondence to avoid a cluttered appearance, to provide a greater degree of organization for the home, and to respect the confidentiality of the people who live in the home [Refer to page 29 for personal privacy issues].

If a bulletin board is used, it should be big enough to accommodate emergency phone numbers, lists of medication certified staff and other important messages (i.e., notes, memos). Notes, memos or other papers should never be tacked or taped to walls. Only current information should be displayed.

The telephone should be clean and in good working order. At least one corded phone should be available in every home to ensure service in case of power outages.

When possible, a dedicated line should be available for the fax and computer.

Office supplies should be available to staff and kept in an appropriate cabinet or closet.

Staff mailboxes should be available for communication.
MEDICATION AREAS

The medication area should be in a location that is relatively quiet and free of distraction to minimize medication errors. The area should be well lit, and have ample space for pouring the medications. It should always be kept clean, cool and dry. Areas in laundry rooms, bathrooms or in close proximity to heating systems/vents are not appropriate due to the fluctuating heat and the high humidity in these areas.

Storage. Other than in a supportive community residence, all medication, including prescription medication, over-the-counter medications, vitamins and herbal medications must be kept in a secured, locked storage area. Only medication certified staff and nurses may have access to the keys. The only exception to this rule is for persons who are capable of independent self-administration of medication. These individuals may have their medication stored in such a manner that it is only accessible to them and staff (AMAPs and/or nurses) provided that this type of storage does not expose other people to harm.

All medications must be maintained in the container in which it was received, except in those instances where the medication is placed into a “day minder” for a person with developmental disabilities who is self-directed. All containers must be labeled. The labels must be clear and legible.

Each person’s medication should be stored together with the exception that internal and external medications should be kept separately to avoid error.

Medication that must be refrigerated may be stored in a refrigerator containing food, provided that it is in a locked box and clearly identified as medication. Alternatively, the home may have a locked refrigerator specifically for medication.

Controlled medications, syringes and needles must be kept in double-locked cabinet of substantial construction. This cabinet is to be bolted to the floor or to a wall in such a fashion that it cannot be moved. Both the inner and outer doors must have key locks with separate keys; spring locks or combination dial locks are not acceptable. For new construction the cabinets should be made of steel or other approved metal.

Equipment and supplies. All supplies that are required for administering medication (such as cups, water, spoons, etc) should be readily accessible to the medication area.

Each area should have space for the medication administration records, person-specific medication information sheets, a drug reference book and if appropriate, a sharps container.

Other equipment, such as a spill kit, gloves, thermometer, blood pressure cuff, stethoscope, scale and first-aid supplies should be available within easy access to the medication area. However, as staff other than medication certified staff may need to access these supplies they should not be locked in the medication area.
LAUNDRY ROOMS

Safety Considerations. Venting from the dryer should be with flexible metal conduit, not plastic hose. The lint filter in the dryer should be cleaned after each use. The home should also implement a schedule for the regular cleaning of the dryer vent pipes. Be familiar with the Safeguarding Alert From OMRDD 01-01, Dryer Safety [see Safeguarding Alerts page 42].

The door should be kept locked or cabinets with locks should be utilized to prevent ingestion or misuse of chemicals.

Measuring cups for bleach and laundry soap, dry or liquid, should be clearly labeled and stored with the item it will be used with.

Lighting. A surface-mounted florescent light fixture is generally adequate lighting in the laundry room.

Storage. Supplies should be kept on neatly organized shelves.

Ironing board organizers should be installed on a wall to store the ironing board, iron and spray starch.

General Environment. Baskets should be used to sort dirty clothing. Dirty clothing should not be sorted on the floor. Laundry baskets should be washed and disinfected after being used for “soiled” laundry.

The washer should be wiped down after each use.

Utility sinks should be cleaned weekly.

Mops should be cleaned and appropriately stored to dry.

Pails and buckets used for cleaning floors should be emptied and sanitized after use.
STORAGE AREAS

All storage areas should be neat and organized. Specific areas should be identified for the storage of items, such as out-of-season clothing or all seasonal decorations not in use.

Regardless of the area, certain principles apply:

- No items should block exits, or inhibit the opening or closing of doors.
- No items should block vents.
- No items should be stored on stairways.
- No items should be stored closer than 18 inches from sprinkler heads.
- No items should be stored directly on the floor. Consider metal shelving, pallets, pegboards, etc.

In facilities that are Life Safety Code certified, the use of the attic is prohibited unless the attic is sprinklered, or is fully sheathed in 5/8-inch thick sheet rock. Attic storage is permitted in facilities that do not need to meet Life Safety requirements, e.g., small IRAs and supportive residences. However, in these facilities, items stored in the attic should be in a metal cabinet or a non-combustible storage container.

The exterior of all storage cabinets and containers should be labeled as to contents. If a storage area is subject to humidity, items should be stored on pallets or in plastic containers, e.g., new mattresses on pallets, clothing in a waterproof container.

Outdoor furniture should be cleaned and stored in the basement, shed, or garage when not in use.

Yard/gardening tools such as rakes, clippers, shovels, etc. should be cleaned then stored in the outside shed or the garage. They could be stored on pegboard if desired. Dangerous implements should always be secured.

Gasoline-operated equipment, e.g., lawn mowers, leaf blowers, etc., must be stored in the outside shed which must be at least 15 feet from the house. If the equipment is out of season, the gasoline must be drained before storing.

Propane tanks and/or flammable liquids must be stored in the outside shed, and never in the home. Propane tanks should be turned off when not in use. If there is no shed, tanks and grills should be covered when not in use. When in use, grills should be pulled away from house siding, overhanging soffits, or any other structure.

Flammable materials should be stored in a locked, well-ventilated metal storage cabinet away from extreme heat or changes in temperature. Do not store flammable items in a boiler room. Bleach should never be stored near ammonia or agents containing ammonia.

No flammable, combustible or chemical materials should be left unattended in an area where individuals have access.
HOUSE EXTERIORS

Walkways and Driveways. These areas should be inspected for cracks or signs of deterioration. If vehicles are damaging the lawn by driving off the driveway, consider the tasteful use of landscaping ties or other borders to protect the property.

Steps and Railings. Steps should be checked for cracks or signs of deterioration. Railings should provide adequate support and be securely anchored.

Porches, Decks and Patios. These areas should be checked for cracks or signs of deterioration. Such areas built with wood should be weatherproofed. If nail heads are protruding, they should be set. Watch for splintering as wood ages.

Decorations. The use of seasonal wreaths, both winter and summer, can enhance the appearance of the home. Decorative flags or banners with seasonal motifs are available. An attractive mailbox says a lot about a home. Make sure house numbers are clearly visible. Be aware of contrast. Do not put white numbers on a white background. Avoid cheap stick on numbers.

Brickwork. Masonry work should be checked and repointed as needed.

Foundation. If leakage in the basement is noted, check the foundation for cracks.

Gutters and Downspouts. Should be checked for leaks and/or clogs. Leaf strainers could be considered for areas where clogging is problematic.

Shakes and Shingles. The exterior of the home should be checked for missing shingles and replaced as needed.

Vinyl and Aluminum Siding. Should be power washed as needed.

Outside Faucets. Should be shut off and drained for the winter.

Outdoor Lights and Fixtures. The code requires lighting at all exit doors. Lighting is a key to an attractive exterior and can be used to highlight special plantings or other decorative features. It is also essential to safe egress from the home. Consider the use of flood lighting with timers. All lights should be checked for functionality and good repair.

Weather-stripping. Should be checked and replaced as needed.

Fencing. Should be intact. Chain link fences can be made more attractive with climbing plants such as Clematis, honeysuckle, etc. Gates should open and close freely.

Windows. Glass and/or screens should be intact.
Doors. Should open and close freely. Locks should be functional. If alarmed, alarms should be working.

Garbage/Recycling. A plastic container should be used if trash or recycling has a tendency to spill on the property.

Window Boxes. Can be a simple inexpensive way to improve the appearance of the home. Consideration to care and color should be given to plant selection.

Shrubbery. Can be useful in sectioning the property. Shrubs can be used to provide shade in particularly sunny areas. Hedges can be used to provide privacy. Avoid placement of shrubbery too close to the home, as the ground stays wet longer and may compound leaks if there are cracks in the foundation.

Flower Gardens. Can bring out color in drab areas or accentuate existing colors of the home. Whether creating a new bed or working an existing bed, perennials are worth the investment. Selection should be based on the soil, amount of sun/shade, and color enhancement. Be sure to allow for growth when planting. Toxic plants such as Foxglove are prohibited.

Poison Ivy. The property should be inspected on a monthly basis for poison ivy growth. Once identified, the poison ivy needs to be treated and removed. The old adage “Leaves of three, leave them be” is still applicable.

Vegetable Gardens. Can provide a lot of satisfaction for the individuals who live in the home. Get people involved in the project from start to finish. Besides being relatively inexpensive, you can reap what you sow. People would surely enjoy making a salad from their garden. Some vegetables mature quite rapidly providing a more immediate satisfaction for their efforts.

Standing Water. Avoid instances of standing water, which can be a breeding ground for mosquitoes and other insects.

Swimming Pools. If a home has a swimming pool, be familiar with the Safeguarding Alert From OMRDD 00-01, Drowning Alert [see Safeguarding Alerts page 42].

Smoking Area. Any identified smoking area should have receptacle for discarded butts. Placement should be directly away from the home to eliminate fire hazards. Do not have designated smoking area on an exterior stair.
PERSONAL PRIVACY

Individual privacy and environmental restrictions in homes have been a focus during look-behind visits from the Center for Medicare and Medicaid Services (CMS). Even though CMS concerns are specific to ICF programs, they have important considerations for all homes.

**Posting of Information.** Do not post information about people in areas of the home accessible to others such as guests. For example, do not post lists of food allergies, dietary restrictions, birthdays, behavioral strategies, feeding protocols, toileting schedules, chore lists, special staff assignments, individual sign language vocabularies, day program rosters, bus schedules, medical appointment calendars, family addresses and phone numbers etc. Keep such information in some kind of book or binder that is kept unobtrusively in a drawer or cabinet. The same idea applies to individual records, which must not be kept in visible areas of the home.

**Environmental Restrictions.** Do not routinely lock individual closet doors, kitchen cabinets, or refrigerators, or restrict phone access. Do not use devices to monitor or restrict movement within the home or in and out of the home. Refer to your specially designated committee for review of any proposed permanent or time-limited environmental restriction that may be considered on behalf of a person.
HOME MAINTENANCE

Under the direction of the appropriate home manager, home staff perform various tasks and duties to assure that the living environment is properly maintained and kept in a clean, neat and orderly condition.

The following household supplies should be available in the home for routine use:

- Stepladder
- Toolbox
- Drill with bit assortment
- 2 regular screw drivers (1 small, 1 large)
- 2 Phillips head screw drivers (1 small, 1 large)
- 1 claw hammer
- 2 adjustable wrenches
- Carpenter glue
- Ball of twine
- Assorted screws, nails, brads, picture hooks
- Tape measure
- Level
- Clamps
- Plastic eye goggles
- Putty knife
- Duct tape
- WD 40

CALL AGENCY MAINTENANCE for any of the following home repairs.

1. Any electrical outlets, switches, electrical cords, or fixtures, etc.

2. Any plumbing, heating or air conditioning, fixtures, equipment or controls.

3. Any kitchen, laundry room, boiler room or basement appliances or equipment, such as refrigerators, freezers, stoves, ovens exhaust fans, washers, dryers, dishwashers, heating boilers, hot water heaters or well water equipment.

4. Any application of screws or nails into interior or exterior walls longer than one (1) inch in length.

5. Any safety railings such as deck rails, bed rails, grab bars, or handrails.

6. Any specialty indoor or outdoor lighting other than standard incandescent or fluorescent bulbs, which are easily accessed.

7. Any roofing or gutter repairs.
8. Any ceramic tile repairs.

9. Any bathroom fixtures such as toilets, sinks or bathtubs, shower units, etc.

10. Any plumbing fixtures such as faucets, missing valves, hose bibs, etc.

11. Any repairs to exterior finish of homes such as vinyl or aluminum siding, cedar shakes, shingles, etc.

12. Any problems related to smoke detection and fire alarm systems in the home. These systems must be operational at all times.

13. Any situation, which requires use of emergency generators. Note: emergency generators should only be operated by fully-trained personnel.

Be familiar with the Safeguarding Alert From OMRDD 00-02, *Carbon Monoxide Poisoning* [see Safeguarding Alerts page 42]. Note that placement of detection unit(s) must result in functional warning to building occupants.
VEHICLES

Standard Operating Procedures for all vehicles:

1) **No smoking** in vehicle by any driver or passenger.
2) No eating in vehicle while in motion.
3) Seatbelts must be used at all times by all occupants.
4) Wheelchairs must be secured appropriately.
5) The number of passengers in vehicle must **NOT** exceed the seating capacity of the vehicle.
6) Vehicle is for transportation of staff, individuals and registered volunteers.
7) When using a lift for ambulatory individuals, staff should ride the lift.
8) Auxiliary step should be added as appropriate.
9) Be familiar with the Safeguarding Alert from OMRDD issued 4/19/02 on *Van Safety* [see Safeguarding Alerts page 42].

The following should be present in the vehicle:

1) Spare tire
2) Jack
3) First-aid kit (including CPR mask)
4) Emergency sign and telephone numbers
5) Snow/ice scraper
6) Blood spill kit
7) Body fluid absorption/protective barrier kit
8) Emergency medical information on each individual
9) A cell phone (must not be used by the driver when the vehicle is in motion)
10) Current registration, insurance card, credit card and van log

Bumper stickers are not permitted on the vehicle.

Maintenance Schedule:
All vehicles should be regularly serviced according to manufacturer’s schedule. This would include the following:

1) Oil change
2) Tire rotation
3) Inspection
4) Brake & transmission fluid check and/or replacement
5) Antifreeze check and/or replacement

Mechanical problems should be reported to the House Manager immediately.
The following should be checked on a weekly basis:

1) Vehicle should be swept and/or vacuumed.
2) Seatbelts should be checked for cleanliness and functionality.
3) Mirrors and lights should be checked and functional.
4) Seats should be checked for rips or tears and repaired.
5) Seats should be cleaned with a mild detergent.
6) Windows and mirrors should be cleaned if needed.

Toileting accidents and spilled items must be cleaned immediately.

Petty cash can be used for vehicle washing.

Keeping the fuel tank as full as possible will minimize condensation. During extremely cold weather, a container of gas line antifreeze should be added to the gas tank with each refill.
SOME REVIEW ITEMS TO MAINTAIN A HOME-LIKE ENVIRONMENT

Entrance
1. Area is clean
2. Doors open & close freely
3. Lights are functional
   A) Light covers are clean

Hallways
1. Area is clean
2. Walls and ceiling are dust-free, clean and in good condition
3. Floor coverings are clean and in good condition
4. Wall hangings are present and coordinated with décor
5. Ventilation ducts, baseboard heaters/radiators are clean and in working order
6. Lights are functional
   A) Light covers are clean
7. Hallways are free of clutter

Stairs
1. Stairs and stair coverings should be maintained and in good repair
2. If carpeted, check to ensure that carpet is secured
3. Handrails are secured
4. Steps are free of clutter or debris

Living Room/Family Room
1. Furniture is adequate, clean & in good repair
2. Furniture is placed in a home-like arrangement
3. Windows are clean & functional
4. Window sills are clean
5. Window coverings are clean & intact
6. Area is clean
7. Walls and ceiling are dust-free, clean & in good repair
8. Floor covering is clean and in good repair
9. Wall hangings are present & coordinated with décor
10. Ventilation ducts, baseboard heaters/radiators are clean, intact and in working order
11. Lights are functional
   A) Light covers are clean
**Bedrooms**
1. Furniture is adequate, clean & in good repair
2. Windows are clean & functional
3. Window sills are clean
4. Window coverings are clean & intact
5. Area is clean
6. Walls & ceiling are dust-free, clean & in good condition
7. Floor covering is clean & in good condition
8. Ventilation ducts, baseboard heaters/radiators are intact, clean & in working condition
9. Dressers, nightstands & closets are clutter-free, neat & organized
10. Clothing is adequate & seasonably appropriate
11. Personal objects are displayed & reflect personal interest
12. Wall hangings are present & personalized
13. Bed linens/comforters are clean & match décor
14. Lights are functional
   A) Light covers are clean

**Bathrooms**
1. Windows are clean & functional
2. Windows sills are clean
3. Window coverings are clean & intact
4. Area is clean and odor-free
5. Walls & ceiling are dust-free, clean and in good condition
6. Ventilation ducts, baseboard heaters/radiators are clean & intact & in working order
7. Exhaust fan is functional
8. Toilet paper is available
9. No evidence of communal use of ADL supplies
10. Toilet is clean inside & outside
11. Sink faucets & vanity are clean
   A) Sink drains properly
12. Mirror is clean
13. No cleaning supplies stored in room (unlocked)
14. Bathtub/Shower enclosure is clean
   A) Showerhead is operational
   B) Drain functions properly
   C) Tiles & grout are clean & free of mildew
   D) Shower curtain is clean
15. All electrical outlets are grounded
16. Covered refuse container is available
17. Lights are functional
   A) Light covers are clean
Kitchen/Dining Room
1. Hand washing materials are available (soap & paper towels)
2. Furniture is adequate, clean & in good repair
3. Windows are clean & functional
4. Window sills are clean
5. Window coverings are clean and intact
6. Area is clean
7. Walls & ceilings are dust-free, clean & in good condition
8. Floor coverings are clean and in good condition
9. Electrical outlets near the sink are grounded
10. There is no evidence of smoking in the kitchen
11. Refuse containers are clean & covered
12. Current menu is available
13. Lights are functional
14. Light covers are clean
15. Refrigerator is clean inside and outside
16. Area under and behind refrigerator is clean
17. Thermometer registers between 32 F - 45 F
18. Freezer is devoid of frost buildup
19. Items in refrigerator are labeled and dated
20. Range/Oven is clean inside and outside
21. Burners are functional
22. Exhaust system is free of grease
23. Microwave is clean inside and outside and in working order
24. Dishwasher is clean and in working order
25. Small appliances are clean and in working order
26. Countertops are clean and in good repair
27. Drawers and cabinets are clean and well organized
28. Cleaning supplies are secured as needed
29. All food products are properly stored
30. Ventilation ducts, baseboard heaters/radiators are clean and in working order

Office
1. Furniture is adequate, clean and in good condition
2. Windows are clean and functional
3. Window sills are clean
4. Area is clean
5. Walls and ceiling are dust-free, clean and in good condition
6. Floor covering is clean and in good condition
7. Ventilation ducts, baseboard heaters/radiators are clean, intact and in working order
8. Lights are functional
   A) Light covers are clean
9. Bulletin board is organized and devoid of clutter and outdated material
10. Phone, computer, fax machine, etc. are functional and clean
11. Safe is secure and locked
12. Policy & Procedure manual is available
Medication Area
1. Area is clean
2. Walls and ceiling are dust-free, clean and in good condition
3. Floor covering is clean and in good condition
4. Ventilation ducts, baseboard heaters/radiators are clean, intact and in working order
5. Lights are functional
   a. Light covers are clean
6. All medications are properly stored
7. Scale, thermometer, B.P. machine and stethoscope are available and in working order
8. Blood spill kit, sharps container and CPR mask are available
9. First Aid supplies are available
10. Ready to go packets are available

Laundry Room
1. Washer is clean inside and outside
2. Dryer is clean inside and outside
   A) Lint filter is clean and intact
3. Area under and behind appliances are clean
4. No items are stored on the floor
5. Cleaning agents are secured as needed
6. Floor covering is clean and in good condition
7. Walls and ceiling are clean, dust-free and in good condition
8. Windows are clean and functional
9. Window sills are clean
10. Ventilation ducts, baseboard heaters/radiators are clean, intact and in working order
11. Lights are functional
   A) Light covers are clean
12. Hopper sink is clean
13. Soap and paper towels are available

Basement/Attic
1. No items are stored directly on floor
2. Area is clean and well-organized
3. Lights are functional
   A) Light covers are clean
4. Storage cabinets are labeled as to contents
5. Flammable materials are properly stored
6. Potentially dangerous implements are secured
7. Out-of-season clothing is properly stored
**Medication Area**
1. Area is clean
2. Walls and ceiling are dust-free, clean and in good condition
3. Floor covering is clean and in good condition
4. Ventilation ducts, baseboard heaters/radiators are clean, intact and in working order
5. Lights are functional
   A) Light covers are clean
6. All medications are properly stored
7. Scale, thermometer, B.P. machine and stethoscope are available and in working order
8. Blood spill kit, sharps container and CPR mask are available
9. First Aid supplies are available
10. Ready to go packets are available

**Laundry Room**
1. Washer is clean inside and outside
2. Dryer is clean inside and outside
   A) Lint filter is clean and intact
3. Area under and behind appliances are clean
4. No items are stored on the floor
5. Cleaning agents are secured as needed
6. Floor covering is clean and in good condition
7. Walls and ceiling are clean, dust-free and in good condition
8. Windows are clean and functional
9. Window sills are clean
10. Ventilation ducts, baseboard heaters/radiators are clean, intact and in working order
11. Lights are functional
   A) Light covers are clean
12. Hopper sink is clean
13. Soap and paper towels are available

**Basement/Attic**
1. No items are stored directly on floor
2. Area is clean and well-organized
3. Lights are functional
   A) Light covers are clean
4. Storage cabinets are labeled as to contents
5. Flammable materials are properly stored
6. Potentially dangerous implements are secured
7. Out-of-season clothing is properly stored
**House Exterior**
1. Lawns & shrubbery have been tended (seasonal)
2. Driveway & walkways are intact & free of debris
3. Paint & Siding is in good condition
4. Windows & screens are intact
5. Porches/Patios, etc. are in good repair
6. Railings are secure & in good repair
7. Outdoor furniture adequate, clean, in good repair
8. Fire exit doors open freely, exits are not blocked, access to safe area is clear
9. Refuse is properly contained
10. Gutters are functional & clean
11. Fencing is intact. Gate swings freely
12. Exterior lights are functional & in good repair
13. (Winter) Ice Melt is available in closed plastic container

**Shed/Garage**
1. Area is clean and well-organized
2. Lights are functional
3. Flammable materials are properly stored
4. Potentially dangerous implements are secured
5. Propane tanks/flammable liquids are properly stored
6. Yard/Gardening equipment is clean and properly stored

**Safety**
1. Fire evacuation test records are current and available
2. Emergency evacuation plan is current and posted
3. External doors have single-action locks
4. Smoking policy is adhered to?
5. Fire extinguishers are charged and inspected monthly

**Vehicles**
1. Record of Vehicle Cost Report is available
2. Exterior is clean
3. Any damages have been reported
   A) Repair efforts initiated
4. Interior is clean
5. No rips or tears in upholstery
6. No evidence of eating or smoking present
7. Safety Belts are clean and functional
8. Mirrors are present and intact
9. First-Aid Kit, blood spill kit, spare tire & jack are present
1. Home is maintained at a comfortable temperature
2. Home is order-free
3. Home is accessorized with plans, decorative wall hangings, etc.
4. Seasonal decorations are appropriate
5. ADL kits are clean and properly labeled
6. There are no surplus supplies
OMRDD Memorandum on

New Requirements for Furnishings in ICFs
TO:    DDSO Directors
       Executive Directors of Voluntary Agencies
       Operating ICFs

FROM:  Joel Altshul
       Division of Quality Assurance

RE:    New Requirements for Furnishings in ICFs

DATE:  August 25, 2003

As you are aware, on September 11, 2003, all ICFs must comply with the 2000 edition of
the NFPA Life Safety Code. There is one change that you should be made aware of
regarding the standards for furnishings and curtains. For all currently certified ICFs
where the furniture will be replaced, any new furnishings must comply with new
requirements. These requirements, outlined below, have changed only at Board and Care
facilities (currently called Chapter 21 of the 1985 LSC). There is no change to these
requirements at Health Care facilities (currently Chapter 12 or 13 of the 1985 LSC).

The change is essentially as follows: All new upholstered furniture in facilities not
protected throughout by an approved automatic sprinkler system, must meet the Class I
standard when tested in accordance with NFPA 260 (Standard Methods of Tests and
Classification System for Cigarette Ignition Resistance of Components of Upholstered
Furniture). All new draperies or curtains must be flame resistant as demonstrated by
testing in accordance with NFPA 701 (Standard Methods of Fire Tests for Flame
Propagation of Textiles and Films). There are exceptions so I urge you to check Chapter

The above means that any furniture or draperies ordered and installed after September 11,
2003, must meet the above requirements. Please note again that these are not new
requirements for ICFs which complied with Chapter 12 or 13, Health Care, of the 1985 or
1981 LSC. Typically, furnishing suppliers should be aware of these requirements
already, but you may want to ensure that your Business or Purchasing officer is made
aware of them as well.

If you have any questions, please contact me or Michael Schongar at 518 473-7032.

cc:    Jan Abelseth
       Gretchen Finn
       DQA Survey Staff
       DQA Area and Regional Directors
OMRDD Memorandum on Health Information;

*Ready to Go Packets*
MEMORANDUM

TO:        DDSO Directors  
               Voluntary Provider Agency Executive Directors

FROM:      Thomas A. Maul
               Commissioner

DATE:      February 6, 1995

SUBJECT:   Health Information; "Ready to Go Packets"

The communication of information to health care providers is of major importance in the promotion of availability and access to appropriate and high quality health care services in local communities. Therefore, it is highly recommended that each Developmental Disabilities Services Office (DDSO) and Voluntary Provider Agency ensure that current legible written information about the health and medical status of each individual with developmental disabilities is readily available. This can be achieved through the development and maintenance of a "Ready To Go Packet," or an equivalent method that will meet this criteria.

The following alternatives to "Ready To Go Packets" are considered to be acceptable:

1. Complete medical/health records kept separate from the full record.

2. Comprehensive copies of current medical/health status information abstracted from the medical records.

3. Consultant forms filled out by the primary care physician or licensed nursing staff who are familiar with the individual, and who are able to articulate all relevant information specific to the visit or complaint. In addition, the consulting provider would complete a summary of findings, including any instructions needed for subsequent care.

4. Any alternative that fulfills the goals stated above.

Right at home. Right in the neighborhood.
To assist in the development of this proposal, the DDSOs were asked to share forms and procedures they currently use to ensure pertinent information accompanies individuals with developmental disabilities on visits to primary providers, emergency room visits and hospitalizations. Although some DDSOs prefer to take the entire chart or a separate medical chart to visits, many have developed specific forms to transmit information. Examples of some of the forms and policies that were sent are attached. These examples may be used as a resource for the development or revision of your current DDSO/agency policies and procedures to enhance communication with health care providers in the community.

TAM:SOR
Attachment
cc: Central Office Leadership Team
    Willowbrook Task Force Committee on Health Care
Safeguarding Alerts From OMRDD
SAFE BATHING PRACTICES

SAFEGUARDING ALERT FROM OMRDD

SAFE BATHING ALERT (7/03)
NEW YORK STATE
George E. Pataki, Governor

Office of Mental Retardation and Developmental Disabilities
Thomas A. Maul, Commissioner

OMRDD Standing Committee on Incident Review
44 Holland Avenue
Albany, NY 12229
MONITORING OF HOT WATER

- Hot water temperatures should be tested and the results recorded at least weekly. Hot water temperature should not exceed 110 degrees Fahrenheit.
- Hot water temperatures should be tested at a time of day when the system has not been depleted, thus giving false low temperature readings. For example, in a residential setting, one could test the hot water temperature in the afternoon before individuals arrive home, assuming that laundry was not done during the day. In a day setting, an appropriate time to test would be in the morning before program participants arrive.
- In freestanding buildings, test hot water on every floor and in bathrooms in various parts of the building. The larger the building, the more sites should be tested. This is particularly true if the building has multiple hot water heater systems.
- In apartment settings, test every bathroom weekly; each bathroom may have its own mixing valve and the operation of each needs to be monitored.
- Always test hot water at a bathtub or shower spout as well as at a sink spout. The potential for serious injury is greatest in the bathing areas; readings have been known to vary from one spout to another even within one bathing area, due to variations in plumbing.
- When testing hot water use a standard test thermometer that measures from 0 degrees to 220 degrees Fahrenheit. A candy thermometer may also be used. Do not use thermometers designed for use in a refrigerator or oven, or one for taking peoples’ temperatures.
- When testing the hot water, turn on the hot-water faucet only. Hold the thermometer in such a way that the stem is in the stream of running water. The thermometer can also be put into a cup that is then filled continuously from the faucet.
- Keep the thermometer in the stream of water until the reading has been constant for 30 seconds.
- Staff should monitor hot water each time they supervise consumers in bathing/showering. If staff suspect that the hot water temperature is too high, they must take appropriate action.
- Some sites use “Scald Safes,” which are mechanical devices that attach directly to faucets and shower spouts. These units are designed to interrupt the flow of water if the temperature exceeds a pre-set limit. These devices should be checked regularly to ensure that they are operating properly. These devices are NOT acceptable as the sole means of regulating hot water temperature, although they can be installed as a secondary back up device.
• Mixing valves can wear out and fail. Water temperature should be regularly tested, including at bath/shower time.
• Be mindful that flushing a toilet or using cold water anywhere else in the home can momentarily raise the water temperature in the shower. Take any necessary precautions.
• In all cases in which testing shows that hot water temperature exceeds stated limits, the service provider must have a procedure to correct the problem expeditiously.

BATHING PROCEDURES:
• Assess each person’s need for bathing supervision and assistance. Make sure that this assessment is clear and that staff know each person’s supervision needs. Be particularly aware of how a person’s health care conditions can impact upon their need for supervision or assistance when bathing. Be particularly vigilant for people:
  ✓ with a history of seizures
  ✓ who are taking sedation drugs
  ✓ who can’t sit up without assistance
  ✓ who have difficulty getting in and out of tubs
  ✓ who have a history of falling

• Consumers who require constant supervision when bathing or showering should NEVER be left alone in the shower or tub.
• Showers are generally safer than tubs, particularly for people with seizure disorders.
• Extreme water temperatures increase the likelihood of seizures.
• Bathing times should be chosen to allow for needed supervision.
• BEFORE beginning the bathing process, make sure you have all the supplies that you will need, such as clothing, soap, shampoo and towels.
• Test hot water before the consumer gets into the tub or shower. If the hot water feels too hot to your touch, IT IS PROBABLY TOO HOT FOR THE CONSUMER’S BATH/SHOWER.
• Staff must be able to correctly operate all special tubs and bathing equipment. Specialty tubs generally have safety gauges; use them.
• Beware of drips from a tub spout; if the water is too hot and drips from a tub spout onto a consumer’s leg or foot, injury can result.
• If after bathing or showering, a consumer has reddened skin, apply cool compresses and seek medical evaluation.
SAFEGUARDING ALERT FROM OMRDD

SAFEGUARDING ALERT 99-03
THOMAS A. MAUL, COMMISSIONER
NEW YORK STATE
OFFICE OF MENTAL RETARDATION & DEVELOPMENTAL DISABILITIES
Standing Committee on Incident Review
44 Holland Avenue
Albany, NY 12229
LEAD ALERT

CONSUMERS WITH PICA BEHAVIOR (INGESTING OF NON-FOOD ITEMS OR SUBSTANCES) AND ALL CHILDREN ARE AT RISK FOR ELEVATED BLOOD LEAD LEVELS DUE TO THE POTENTIAL FOR INGESTION OF LEAD-BASED PAINT OR PAINT CHIPS. ELEVATED LEAD LEVELS CAN CAUSE:

- HEART ATTACKS
- STROKES
- ELEVATED BLOOD PRESSURE
- DEVELOPMENTAL DELAYS
- BEHAVIOR DISORDERS
- ANEMIA

Lead-based paint has not been distributed for general use since 1980. Prior to that time, however, it was commonly used. It is impossible to tell any difference visually between lead and non-lead paint. If a site existed prior to 1980, there may be lead-based paint which is a potential hazard to consumers.

It is important to identify those consumers with pica behavior. It is recommended that for consumers with pica behavior and children under the age of six years, blood tests be conducted to determine lead levels. The frequency of testing is to be determined by a physician, however, the following guidelines are recommended by the New York State Department of Health:

- If the lead level is 10-20 ug/dl a blood test should be drawn every three months.

- If the lead level is 50-60 ug/dl, hospitalization is recommended for chelation (chelation is administering medications which are capable of bonding to the lead, enhancing urinary and fecal excretion, which will lower the lead levels in the person’s blood.)
- If one person in a facility has elevated blood lead levels, an inspection of the facility for lead must be conducted. Test kits are available from hardware stores. Your local Department of Health can conduct an environmental study.

- If technical assistance is needed, the New York State Department of Health Office for Environmental Health should be contacted at (518) 458-6706. In addition, your local Department of Health can be contacted.

**MANAGING THE PROBLEM**

In ALL cases where lead has been found in the environment, it is essential to confer with trained lead abatement professionals to determine the best course of action. Possible remedies for surfaces identified as containing lead-based paint include:

- Enclosure
- Encapsulation
- Replacement
- Removal

Contact your local health department for additional information or for help in identifying qualified contractors experienced in addressing the presence of lead in the environment.
Members of the Statewide Standing Committee: Judy Trent, Gary Bagnato, Carolyn Douville, Barbara Brundage, David Picker, Elaine Czerw, Donna Ford, Linda Barone, Judy Delasi, Kathy Donough, Sharon McCooch, Cheryl Mugno, Nancy Cannon, Richard Monck
DROWNING ALERT

SAFEGUARDING ALERT FROM OMRDD

SAFEGUARDING ALERT 00-01
THOMAS A. MAUL, COMMISSIONER
Standing Committee on Incident Review
New York State Office of Mental Retardation &
Developmental Disabilities
44 Holland Avenue
Albany, NY 12229
DROWNING ALERT

People can drown in lakes, oceans, swimming pools, whirlpools, bathtubs or showers. Wherever there is water, there is risk.

Nationwide, more than 8,000 people died due to drowning last year. Near drownings can cause serious impairments and/or brain damage.

Be alert to these contributing factors:

- Inadequate supervision
- Seizure disorder
- Medical emergencies while in the water (heart attack/stroke)
- Use of alcohol or drugs
- Water conditions, including temperature and clarity; hidden objects

SUPERVISION SAVES LIVES --
DROWNING CAN OCCUR IN SECONDS

BEFORE A SWIMMING/WATER SPORT ACTIVITY

- Assess each persons' swimming abilities and the level of supervision needed
- Know each person's health care needs, behaviors and other conditions which may impact upon their safety in the water
- Make specific staff/consumer supervision assignments; one to one supervision should be provided to people with seizure disorders and people who are not ambulatory
- Use U.S. Coast Guard-approved personal flotation devices (PFD) for people who cannot swim, those who have seizure disorders and those who are not ambulatory. PFDs must be properly sized and maintained to be effective; however, they are not a substitute for supervision.
- Establish a system for ensuring that the whereabouts of all consumers is known. Visual contact must be maintained with all consumers in the water at all times.
- Alert lifeguards to the special needs of consumers, ask lifeguards if the swimming area poses any special risks.
- Before consumers enter the water, assess clarity and temperature of the water, weather conditions, and potential for overcrowding of the area. Provide supervision appropriate to the conditions found.
- Be responsive to and anticipate changing conditions.
IN THE WATER

- Staff cannot rely upon lifeguards to provide supervision.
- Staff who are responsible for consumers must be directly supervising the consumers and must be in the water with them.
- Staff must call for help at the first sign of trouble.
- Staff must maintain visual contact at all times with consumers for whom they are responsible.
- Supervision of consumers must not be interrupted by assigned staff to perform other duties, such as escorting consumers to the bathroom.
- Observe all rules of the swimming area.

BATHING

- Assess each person's needs for bathing supervision and assistance.
- Be aware of each person's health care needs which could impact upon their need for supervision when bathing.
- Consumers should never be left alone in the tub or shower if they require supervision when bathing.
- Staff should ensure that all bathing supplies are available in the bathroom before assisting a consumer with bathing.
- Staff must be able to correctly operate all special tubs and bathing equipment.
- For people with seizure disorders, showering is safer than bathing.

Members of the Statewide Standing Committee on Incidents:

Gary Bagnato
Linda Barone
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Judy Trent
CARBON MONOXIDE POISONING

SAFEGUARDING ALERT FROM OMRDD

SAFEGUARDING ALERT 00-02  (9/00)
NEW YORK STATE
George E. Pataki
Governor

Office of Mental Retardation and Developmental Disabilities
Thomas A. Maul
Commissioner
OMRDD Standing Committee on Incident Review
44 Holland Avenue
Albany, NY 12229
WARNING - Carbon Monoxide (CO) is a colorless, odorless and tasteless poisonous gas that can cause serious illness and, at high levels, death.

HOW TO PREVENT CO POISONING:

- Install a CO detector/alarm, which meets the requirement of the UL standard 2034 or the AS 6-96 standard.

- Never use gasoline-powered tools indoors.

- Never operate fuel-burning appliances without proper ventilation.

- Never burn charcoal inside a home, garage, or tent.

- Never leave a car running in an attached garage even if the garage door is open.

- Heating systems must be regularly inspected and serviced.

- Never use gas appliances such as an oven to heat your home.

REMEMBER:

YOU CAN'T SEE, SMELL OR TASTE CARBON MONOXIDE, BUT IT IS A POISONOUS GAS!
SYMPTOMS OF CO POISONING:

- Headache
- Dizziness
- Weakness
- Shortness of breath
- Sleepiness
- Nausea
- Vomiting
- Confusion

Chronic CO poisoning can also occur. It is commonly mistaken for chronic fatigue syndrome, viral or bacterial pulmonary or gastrointestinal infection. Exposure may have occurred for many days or months. Long-term exposure can produce serious and persistent health condition.

WHAT TO DO IF YOU SUSPECT CO POISONING:

- Get fresh air immediately.
- Leave the area.
- See a physician for proper diagnosis.
- If you have an alarm, which sounds, operate the reset button.
- Call emergency services (Fire Department or 911).
- Turn off appliances or sources of combustion.
Members of the OMRDD Standing Committee on Incident Review

Judy Trent, Gary Bagnato, Carolyn Douville, Barbara Brundage, David Picker, Elaine Czerw, Donna Ford, Linda Barone, Judy Delasi, Sharon McCoach, Cheryl Mugno, Nancy Cannon, Richard Monck, and special thanks to Joel Altschul for his all of his research.
DRYER SAFETY

SAFEGUARDING ALERT FROM OMRDD

SAFEGUARDING ALERT 01-01 (8/01)
NEW YORK STATE
George E. Pataki
Governor

OFFICE OF MENTAL RETARDATION AND DEVELOPMENTAL DISABILITIES
Thomas A. Maul
Commissioner
Standing Committee on Incident Review
44 Holland Avenue
Albany, NY 12229
Most of us take the safety of clothes dryers for granted. However, nationally the U.S. Consumer Product Safety Commission estimates that more than 24,000 fires occur annually because of clothes dryers. Clothes dryers are the leading cause of fires in OMRDD-certified residences.

- READ ALL INSTRUCTIONS SUPPLIED WITH YOUR DRYER AND KEEP THEM AVAILABLE FOR REFERENCE. FAMILIARIZE YOURSELF WITH THE INSTRUCTIONS BEFORE USING THE DRYER.

Nearly all of the fires caused by clothes dryers can be prevented.

Clothes dryers can cause fires in several ways.

Drying certain items in the clothes dryers can cause a fire because those items may spontaneously combust, or start to burn all by themselves if the conditions are right! DO NOT USE CLOTHES DRYERS TO DRY:

- Any item containing plastic, foam rubber, or rubber-like materials.

- Any item that has had anything flammable on it, even though it has been washed.

- Any items that have ever had any type of oil on it, INCLUDING COOKING OIL. Washers cannot completely remove oil even though the items may appear clean. The safest practice is to use paper towels or disposable cloths to wipe up anything oily, including oily pans, and then throw them away safely.

- Dryer sheets (fabric softener sheets) if the package does not state specifically that they are safe to use in a dryer.
- Garments cleaned with dry cleaning fluid.

**Accumulated lint can catch on fire!**

- Clear the lint screen before each load.

- Check the inside of exhaust ducts from time to time and remove trapped lint or replace the duct. Flexible plastic exhaust ducts can trap lint.

- Check the outside exhaust vent from time to time to make sure that air from the dryer can blow through the vent normally. Remove any lint that is blocking air flow.

- Be aware if clothing requires a longer time than usual to dry, the exhaust or lint screen may be blocked and should be checked.

The heat from dryers can ignite flammable materials and vapor!

Keep all flammable materials away from dryers, furnaces or other heat sources, including flammable cleaning supplies and dry cleaning supplies. Check the label to see if an item is flammable.

**Members of the Standing Committee on Incident Review**

- Teresa Toulon
- Art Law
- Nancy Cannon
- Richard Monck
- Barbara Brundage
- Linda Barone
- Cheryl Mugno

- Ron Kassover
- Elaine Czerw
- Judy Trent
- Sharon McCoach
- Judy Delasi
- Carolyn Douville
MEMORANDUM

TO: Executive Directors  
    DDSO Directors

FROM: Judy Trent, Chairperson  
    Statewide Standing Committee on Incident Review

DATE: April 19, 2002

SUBJECT: Van Safety

Attached is a training guideline developed by the Statewide Standing Committee on Incident Review on safe practices to follow when transporting consumers. The material was developed in response to a review of incidents in which consumers were injured during the process of being transported, and in consultation with provider agency staff who have expertise in this area. If staff are trained to follow these safety practices, the number of accidents and injuries to consumers during transport can be reduced.

Please call me at (212) 229-3350 if you have any questions about the guideline.
General Guidelines for Safe Van Operation:

- Consumers should not be left unattended in a van.
- Vehicle keys must ALWAYS be in the possession of staff and NO vehicle should be left with the engine running unless there is a licensed driver in the driver’s seat. (An exception is noted in situations that require the driver of the vehicle to operate the wheelchair lift. At a minimum the parking brake should be engaged and the transmission set in park.)

- It is the responsibility of the van driver to:
  - Have a valid NYS driver’s license,
  - Obey all traffic laws,
  - Use seatbelts for all passengers and driver (including wheelchair securement straps and tie downs),
  - See that the vehicle is in good operating condition,
  - Be familiar with safety procedures,
  - Be free from medications, drugs or alcohol that might cause drowsiness or impede driving,
  - Never exceed the passenger capacity for the vehicle, and
  - Perform a pre-trip vehicle inspection prior to each trip.

- Drivers need to know the consumers (seizure disorder, behavioral issues, osteoporosis, sensitivity to heat and cold) and their individual needs and take appropriate precautions.

- Drivers need to drive in a conservative, defensive and courteous manner.
  - Vans are heavier than passenger cars and require a greater stopping distance. Try to avoid situations where emergency maneuvers may be required.
  - Vans are higher than passenger cars and are more difficult to handle in the wind (especially on wet or icy roads and bridges). They are more difficult to turn due to a higher center of gravity and may not fit under overhangs. Therefore the driver must:
• Grip the wheel firmly for control,
• Drive more slowly,
• Know the height of the vehicle, and
• Watch out for overhangs (drive-in windows, wires, roof overhangs, and low-ceilinged parking garages).

- Vans are longer and wider than passenger cars and, therefore, have a greater turning radius and are less maneuverable. Drivers must allow for more room when turning corners and parking.

- Vans have poorer rear visibility than passenger cars so drivers must use caution (along with the side and rear view mirrors) when backing up. Mirrors must be properly adjusted for each driver. Whenever possible, an additional staff member should leave the van, proceed to the back of the van, and assist the driver in backing up.

- If the driver is the only staff person available, it is advisable for him/her to get out of the van to check behind the van before backing up. (The driver should be sure to set the parking brake, put the van in park, and take the keys.)

- Staff should make the ride as comfortable as possible for consumers.

• Wheelchairs ride with a higher center of gravity. Therefore, bumps and curves are intensified for consumers. Generally, the ride is smoother toward the front of the van.

• Accelerate and brake slowly. Take it easy around corners.

• Drive defensively (anticipate stops, avoid bumps and potholes).

- To reduce rollover risk, (taking into consideration behavioral and personal space issues), vans should be loaded so that any empty spaces/seats are in the back.

- Adequate ventilation and appropriate air temperature must be provided for passengers.

- Van doors must be locked when the vehicle is in motion.
- Adequate staff supervision must be provided. When two (or more) staff are transporting consumers, staff should be placed so as to properly supervise consumers. Both staff should not be seated in the front of the van.

- Vans should have regular preventive maintenance as recommended by the manufacturer.
  - This should include proper tire maintenance, inflation and inspection.
  - A Vehicle Safety Inspection checklist should be completed at least monthly.

- Vehicles should be equipped with:
  - First aid kit (including CPR mask);
  - Body fluid absorption/protective barrier kit;
  - Seat belt cutter;
  - Road safety kit (including triangular reflectors);
  - Emergency telephone numbers; and
  - A cell phone (must not be used by the driver when the vehicle is in motion).

**Staff Training:**

- **Staff should be trained in the agency’s policies and procedures regarding transporting consumers and the use of wheelchair lifts.**

- **Staff should be trained on the individualized needs of each consumer that they will be transporting.**

- **Staff should be trained in proper procedures in case of vehicle breakdown.**

- **Staff should be trained in evacuating the van safely and efficiently.**
Use of the Van Lift for Consumers who are Ambulatory:

- Consumers who are ambulatory should not use the lift if another safe means of entering and exiting the van is available to them. When indicated, physical therapists, or other appropriate clinical staff, should evaluate a consumer to determine the safest way for him/her to enter/exit a van.

- It is generally the safest alternative for an ambulatory consumer who must ride on a lift to do so in a wheelchair, even if he/she doesn’t ordinarily need a wheelchair for mobility. A transport wheelchair should be used for loading and unloading in these situations.

- Consumers who are ambulatory and ride on the lift in the standing position should:
  1. Be evaluated for the safest technique for entering and exiting the van. The individual’s program plan should include information on the recommended technique for entering and exiting the van specific to the individual’s needs. There should be a written procedure for the staff to follow.
  2. Be assisted by two staff whenever possible. One staff should stand on the ground and one should stand in the van. The consumer should face the van when ascending and face away from the van when descending. One staff should assist the consumer as he/she enters and exits the van to prevent him/her from bumping his/her head. When the consumer is on the lift, staff should be supporting the consumer. The consumer should hold the railing with at least one hand, even if he/she uses an assistive device such as a walker.

- Step-well entryways are generally the safest way for consumers who are ambulatory and capable of negotiating steps to enter and exit a van. Step-well entryways can be retrofitted to most vans.

Transporting Consumers Who Use Wheelchairs:

- Wheelchair seatbelts and brakes should be checked prior to transporting the consumer in a van. Wheelchairs with custom seating systems should be checked to determine that the seating system is well secured to the frame.

- No consumer should be transported in a vehicle unless all wheelchair seatbelts and brakes are functioning properly and used.

- Staff operating lifts must use safe operating procedures.
Vehicle should be parked on a level surface that is free from obstructions, away from traffic, with the vehicle in park and the emergency brake engaged.

Consumers should be discharged on sidewalks or in a parking lot. If it is necessary to discharge to the street, have staff immediately available to provide assistance and supervision.

Both wheelchair brakes should be locked whenever the wheelchair is on the lift.

The roll stop mechanism must be in the upright position before the lift is operated.

Staff should check the consumer’s head, arms and leg clearance as he/she enters and exits the van.

The entire wheelchair must fit on the lift.

The safest procedure for loading/unloading using a lift involves two or more staff.

Staff should know how to operate the lift manually.

As consumers board the van, staff should ensure that each wheelchair is secured before the next person boards. When exiting, wheelchairs should have the tie-downs removed one at-a-time, just prior to exiting.

It is generally not a safe practice for staff to ride on the lift with a consumer. If it is necessary for staff to ride on the lift with a consumer who is in a wheelchair, the staff must be able to stand between the van and the outward-facing wheelchair. Be aware that staff should not overload the lift (maximum of one staff and one passenger on the lift at a time).
• Many accidents occur when tie downs are not properly used or when the brakes are not engaged. When securing the wheelchair on the van, the brakes should be locked, the seat belt should be rechecked and the wheelchair should be properly secured with floor straps, bars or other approved mechanisms. (Electric wheelchairs should have drive belts engaged and be switched to “off” position.)

• Tie-downs are always safer than bar systems.

• Wheelchair tie-down attachment points should be near the wheelchair’s center of gravity, at welds and stress points, and NOT on removable parts such as footrests.

• Staff should be trained to identify tie down attachment sites on each wheelchair that they will be securing.

• It is helpful to mark these tie-down sites so there is no confusion.

ALL FOUR TIE DOWN POINTS MUST BE USED, EVEN FOR SHORT DISTANCES.

The SCIR thanks Janis Steven, Division of Quality Assurance, who researched and developed the content of these guidelines.