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|  | HOME AND COMMUNITY LIVING ADMINISTRATION (HCLA)  **Certification Evaluation Checklist**  **Children’s Residential Habilitation Providers** | |
| PROVIDER | | DATE |
| In preparation for your upcoming Children’s Residential Habilitation certification evaluation, please have current copies of all applicable items below ready for review by the HCLA-contracted evaluator.  **Provider-specific records (if applicable)**  Children’s Residential Habilitation Services in a Staffed Residential Home contract (OHS, E-OHS, and RHDY providers only)  Driver’s license and automobile insurance for staff transporting clients  Background check results letters for all employees, administrators, owners, direct support professionals, volunteers, and any other employees who may have unsupervised access to DDCS clients  Current training certificates for CPR, First Aid, and Blood Borne Pathogens  Current food worker card  Record of at least 12 continuing education credits for the most recent year  Completion of 75-hour Training (if contracted after 01/01/2016)  Signed copy of DSHS form [10-403](https://forms.dshs.wa.lcl/formDetails.aspx?ID=8214), Residential Services Providers and County and Count-Contracted Providers: Mandatory Reporting of Abuse, Neglect, Exploitation, or Abandonment of a Child or Vulnerable Adult  Program policies and procedures, and proof of staff training on those policies  Staff schedules  Staff payment records and timesheets (specific to locations worked)  Water temperature records  Infection control practices  Fire drill / fire safety requirements  **Children’s SOLA provider only:** Character, competence, and suitability reviews for staff with non-disqualifying crimes or negative actions on their background check (i.e., Record Review result letters)  **E-OHS provider only:** Specialized training completed within 12 months  **Client-specific Records (if applicable):**  Child and Family Engagement Plan  RHDY Engagement Plan  Individual Instruction and Support Plan  Positive Behavior Support Plan  Signed services acknowledgment  Quarterly Reports  Log of client expenses for community inclusion  Client contact information  Person-Centered Service Plan  Service notes  Medication refusals  Incident reports  Property records upon arrival and departure  Record of money or gift cards managed by the provider, including intake documentation  Medication intake and administration records  Nurse delegation records | | |