

Ref #	Review Items	Week 1	Week 2	Week 3	Week 4	Week 1	Week 2	Week 3	Week 4	Week 1	Week 2	Week 3	Week 4
		Date X/C	Date X/C	Date X/C	Date X/C	Date X/C	Date X/C	Date X/C	Date X/C	Date X/C	Date X/C	Date X/C	Date X/C
Daily Log books/House Records													
1	Daily Facility Activity Log is up to date and signed. All actual daily activities logged each day including dates/names/time, shift changes/census/activities, etc. All visitors are logged in and out. No exceptions!												
2	End of Shift Reports are all filled out per shift. All vital information is noted including restrictions. A count of all keys is noted on the form.												
3	Schedules of House routine posted (chores, activities, groups, etc. All schedules are to be posted in common areas such as group rooms in sight of residents and staff.												
4	Room Restriction Plans written, followed and logged.												
5	Unusual incident report completed, submitted to PM and filed.												
6	Staff Assignment Sheets filled out and filed.												
7	Inventory of Supplies updated.												

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Clinical Charts/Therapy/Group Notes Weekly Review and Verification													
8	Clinical Charts are up to date with proper documentation indicating each Therapy Session, Group Notes and Progress Notes. Each resident file and their notes are completed, signed and dated by the assigned Therapists and Staff.												
Living Environment (Cleanliness, Furnishings, Orderliness, Lighting)													
9	A Certificate of Occupancy is visible on each floor.												
10	Kitchen (Stove, Oven, Cabinets, Shelves)												
11	Weekly Menu's (up-to-date, posted, followed, considerate of all restrictions)												
12	Pantry Clean (shelves, food items separated from on-food items).												
13	Floors Clean												
14	Refrigerator clean and working (perishables & non-perishables labeled if out of original containers, thermometer).												
15	Dining Area Clean at all times and sanitized.												
16	Living Room Clean at all times.												
17	Bathrooms Clean at all times and sanitized.												
18	Bedrooms (including resident's clothes & belongings/Closets) clean and straightened.												
19	Laundry/Utility room clean and safe (lint trap clear, area behind dryer clear of debris).												
20	Other Rooms (Basement/Furnace Area (Carpet, Computers, books) Cleaned.												
21	Front/Back Porches clean and clear of debris												
22	Trash (Indoor and Outdoor) *REMEMBER TRASH DAYS												

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23	Laundry/Utility room clean and safe (lint trap clear, area behind dryer clear of debris).												
Safety Devices													
24	Water Temperature (110 degrees)												
25	Fire Extinguishers (on each level of house/tagged and up-to-date)												
26	Evacuation Plan Posted on each Floor in clear view.												
27	Smoke Detectors (one on each level of house & each resident's room).												
28	Emergency Numbers posted.												
29	Client Log (Face Sheets available)												
30	Exit Lights are in working order.												
31	Fire Drill documented for Month.												

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Vehicle													
32	Vehicle Van Check Log is completed daily by staff entering and exiting shift. Van assignments sheets are completed daily indicating First Aid Kit & Fire Extinguisher is present/up to date/and stocked. Vehicle is clean. Van monthly maintenance check form is completed and attached.												
33	Nextel Phones are charged daily and handed off during each shift's "touch down"												
34	Mileage Log updated daily.												
35	Start and Ending Mileage (Current Mileage) documented.												
36	Oil Check												
37	Date and Mileage of last oil change documented.												
38	Date of Last Tune-up (annual)												
39	Date of last hydraulic lift (6 months)												
40	Maintenance needed for vehicle Y/N (Maintenance Request Submitted) Y/N												
41	Condition of tires. Seat belts are operational. Emergency equipment present in the van. Working tagged extinguisher mounted in the van.												
ADDITIONAL REVIEW ITEMS													