

Adult Day Services Frequently Asked Questions for Providers

NOTE: The term "center" refers to an older adult daily living center.

GENERAL QUESTIONS

What regulations govern older adult daily living centers?

The [6 Pa. Code, Chapter 11, Older Adult Daily Living Centers](#) regulations contain the minimum requirements that must be met to obtain a license or continue to operate. It is the responsibility of the center operator to comply with all other applicable laws, regulations, codes and ordinances.

Is a license required to operate an older adult daily living center?

A license is required to operate a center if older adult daily living center services are provided simultaneously to four or more clients who are not relatives of the operator for part of a 24-hour day.

Are there older adult daily living centers in my area?

Click on the link [Center Directory](#) to determine if a center is located in your area.

How long are licenses valid?

Interim and provisional licenses cannot exceed 6 months. A regular license cannot exceed 12 months.

OPENING AN OLDER ADULT DAILY LIVING CENTER

Is there funding available to start or operate an older adult daily living center?

The Department of Aging offers infrequent grant opportunities. Businesses may apply to the [Department of Community and Economic Development](#) for a grant, loan, etc.

Once licensed, a provider may apply to become a [Medical Assistance](#) provider and establish a contract with the local [Area Agency on Aging](#), Veterans Association, etc. Contracts do not guarantee referrals. It is the center's responsibility to market to private pay clients.

What documents must be submitted to the Department to verify for-profit and non-profit status?

If the legal entity is for-profit and wishes to name the center something other than the owner's or corporation's name, a copy of the Department of State's **approved** fictitious name document must be submitted. The [Registration of Fictitious Names](#) and [Amendment of Fictitious Name Application](#) are available on the Department of State website.

If the legal entity is non-profit, a copy of the Department of Treasury's approval letter of non-profit, § 501(c)(3) status must be included.

How does an applicant become licensed?

1. Contact the Department to obtain an application packet.
2. Submit a complete application packet to the Department. Incomplete packets and packets with incorrect information will be returned.
3. An authorized agent of the Department will conduct an onsite inspection.
4. An interim license will be issued to an applicant if the applicant is suitable, the premises are safe and the applicant is likely to comply substantially with applicable statutes, ordinances and regulations prior to expiration of the interim license.

To request an application packet, call 717-214-6716. Mail the complete application packet to:

Department of Aging
Bureau of Quality Assurance
Division of Licensing
555 Walnut St
Forum Place, 5th Floor
Harrisburg, PA 17101

My application was accepted. When will an interim inspection be scheduled?

An interim inspection generally occurs within 3-6 weeks after an application has been accepted. More information on the interim licensure process is cited in [Aging Technical Assistance Bulletin 06-20-01](#).

PHYSICAL PLANT

Are there building and construction standards for older adult daily living centers?

A use group code of "I-4" is required to operate a center. More information pertaining to the I-4 code is cited in [Aging Technical Assistance Bulletin 06-20-02 "Certificate of Occupancy"](#).

Although the Department of Labor & Industry oversees the Uniform Construction Code (UCC), over 90% of Pennsylvania's municipalities elected to administer and enforce the UCC locally, using municipal employees or certified third party agencies. A listing of Pennsylvania's municipalities and their decisions regarding local enforcement of the UCC is located on the [Department of Labor & Industry Uniform Construction Code](#) website.

How is an older adult daily living center's maximum license capacity determined?

The center must provide at least 50 square feet of indoor program space for each client. Spaces occupied by bathrooms, dining areas, loading docks, kitchens, hallways, offices and first aid rooms cannot be included unless it is documented that the space is used for programming at least 50% of each program day.

Can program space for the older adult daily living center be shared with other programs or services?

No. A center that is co-located in a building housing other services must have its own identifiable space during the center's hours of operation.

EXCEPTION: An older adult daily living center may share space with an adult developmental training facility operated or licensed by the Department of Public Welfare or Education.

REGULATORY/LICENSURE

What are the criminal history background check requirements?

Operators applying to the Department of Aging for licensure must obtain a [criminal history background check](#) for themselves and for prospective full-time, part-time and temporary staff. Reports for operators must be requested prior to submitting an application. Reports for prospective staff must be requested prior to hire.

IMPORTANT: The criminal history background requirements set forth in the Older Adult Protective Services Act and 6 Pa. Code, Chapter 15 (§§15.141-15.147) supersede the criminal history background requirements cited in 6 Pa. Code, Chapter 11.

What constitutes a quarterly review period?

Required quarterly trainings and reviews include: emergency procedures (§11.21); fire safety training (§11.90); and standard nursing functions (§11.123(2)(i)). Centers must complete the aforementioned trainings and nursing functions at least once every 3 months.

Define your center's quarterly periods and schedule trainings and nursing reviews in advance of the minimum requirement.

What happens if a staff person or client misses a scheduled quarterly training or review?

Absent a compelling reason, quarterly trainings and reviews must occur within 3 months from the date of the last training or review. If a staff person or client was absent for an entire quarter, the center must complete the training or review upon the person's return to the center.

What constitutes a semi-annual review period?

Semi-annual requirements include: fire drills (11.88) and care plan reviews (11.105). Fire drills and care plan reviews must occur at least once every 6 months from the date of the last fire drill or care plan review, respectively.

Schedule fire drills and care plan reviews in advance of the minimum requirement. Advance scheduling prevents areas of noncompliance by allowing centers time to reschedule due to inclement weather, absenteeism, hospitalization, etc.

For example, if a center holds a fire drill 5/11/12, the next drill must be held by 11/11/12. To insure compliance, a center could schedule a drill to occur 10/15/12.

What happens if a client misses a semi-annual care plan review?

If a client misses a scheduled care plan review, the center must complete the review upon the client's return to the center.

What constitutes an annual period?

Annual requirements include: fire safety inspection (11.83); client physical examination and medical report (11.102); and annual inspection (11.241). Each of the aforementioned requirements must occur at least once every 12 months from the date of the last inspection or examination.

Schedule in advance. If unforeseen circumstances arise, you will have time to reschedule within the 12 month period.

For example, a center's current fire safety inspection was conducted in February. The center could schedule the next inspection to occur in January of the following year.

Are there exceptions to annual requirements?

Regarding 11.83 – If the center's fire safety inspection is conducted by the Department of Health (Life Safety) or if the original inspection date is canceled due to unforeseen circumstances, the Department of Aging will review the circumstances on a case by case basis.

If a center's inspection is canceled due to an emergency, the center must obtain written proof of the original date from the fire safety authority and reschedule the inspection within a reasonable amount of time.

Regarding 11.102 - If a client's insurance does not cover more than one physical exam per calendar year, the Department will permit the client to attend the center for a limited period of time. The Department will review the circumstances on a case by case basis.

If a client's appointment is canceled by the physician's office or due to inclement weather, obtain written proof of the original date from the physician's office. The appointment must be rescheduled within a reasonable amount of time.

Send reminder letters to clients and responsible parties in advance. The letter should reference the State's annual requirement and explain that the client will be suspended or discharged for failure to submit a current physical examination.

Regarding §11.241 – If the Department fails to inspect a center at least once every 12 months, a representative of the Auditor General will review the circumstances to determine the Department's compliance.

If a center completes more than the required number of reviews, trainings or drills, is the center required to document each subsection of the relevant regulatory section?

Yes. Exceeding a quarterly or semi-annual requirement does not exempt a center from documenting required information.

For example, if a center completes staff trainings or client nursing reviews more than once every 3 months, the requirements cited in §11.21(b), §§11.90(a) – (c) and 11.123(2)(i) must be met and documented.

For example, if a center holds fire drills or reviews care plans more than once every 6 months, the requirements cited in §§11.88(a) – 11.88(e) and §§11.105(a) – 11.105(c) must be met and documented.

How does a center submit a regulatory waiver request?

The center must submit a [Request for Waiver of Regulation form](#) to the Division of Licensing. Waivers granted by the Department will be in writing and retained by the licensee

and be part of the licensee's permanent record. A waiver is subject to an annual review by the Department to determine whether acceptable conditions exist for renewal of the waiver.

Are Adult Day Centers required to keep water temperature logs?

There is no requirement to keep water temperature logs. Per regulation § 11.59, centers are required to have hot and cold running water in all bathrooms and kitchen areas. Hot water temperatures in areas accessible to clients may not exceed 130° Fahrenheit. Department of Aging inspectors will check your water temperatures during an inspection. If a problem is identified with the water temperatures, centers may be required to keep water temperature logs for a specified period of time as part of their approved plan of correction to ensure whatever caused the regulatory citation is corrected.

Are Adult Day Centers required to keep temperature logs for food storage?

There is no requirement to keep food temperature logs. Centers are required to store cold foods at or below 41° Fahrenheit and frozen foods at or below 0° Fahrenheit. PA Department of Agriculture regulations (Title 7, § Chapter 46) override the adult day regulation (Title 6, § Chapter 11.152) when it comes to food storage and serving requirements. The Department of Agriculture does not require that daily food storage temperature log be kept. However, several counties in Pennsylvania have their food preparation sites inspected and licensed by their County Health Department. Those county entities may require centers to maintain food storage temperature logs. In those instances PA Department of Aging inspectors may review your food temperature logs based on the requirement that centers must comply with all applicable laws, regulations, codes, and ordinances (11.2(f)). Department of Aging inspectors will check to ensure food is stored at the proper temperatures during an onsite inspection. For health and safety reasons, it is important that food is stored at the required temperatures.

Are Adult Day Centers required to maintain a log of food serving temperatures?

There is no state requirement to do so, either in the adult day regulations (Title 6, § Chapter 11), nor the PA Department of Agriculture regulations (Title 7, § Chapter 46 Food Code). However, several counties in Pennsylvania have their food preparation sites inspected and licensed by their County Health Department. Those county entities may require centers to maintain food serving temperature logs. In those instances PA Department of Aging inspectors may review your food serving temperature logs based on the requirement that centers must comply with all applicable laws, regulations, codes, and ordinances (11.2(f)). Department of Aging inspectors will check to ensure food is served at the proper temperatures during an onsite inspection. For health and safety reasons, it is important that food temperatures are checked before serving to ensure it is served at the required temperatures.

HEALTH/CARE PLANNING RELATED

Who may administer medications to clients?

Medications and injections of substances that are not self-administered by clients must be administered by a licensed physician, dentist, physician's assistant, CRNP, registered nurse and licensed practical nurse. Non-medical center staff persons who have passed the

Department of Human Services (DHS) Medications Administration Course may administer oral, topical, eye and eardrop prescription medications. To administer insulin, a staff person, who has passed the Medication Administration Course, must also pass an approved Diabetes Patient Education Program. For more information, visit the [Department of Human Services website](#).

May a chest x-ray be accepted in lieu of a tuberculin skin test?

No. The results of a chest x-ray are only accepted if a staff person or client has previously had a positive TB skin test. While it may appear that a chest x-ray is used to refute a positive skin test, there are important medical reasons why a chest x-ray cannot replace a skin test. Chest x-rays only demonstrate the possible presence of latent (inactive) or active TB. Many people have latent TB with normal chest x-rays. Thus, a chest x-ray is a poor method to determine if, in fact, a person has been exposed to TB. For example, a person can have active TB in the liver, kidneys, or bones and have a negative chest x-ray. Individuals with latent TB could become active and spread TB to persons who are immune suppressed.

Who must sign a client's care plan?

The client or responsible party, or both, must sign and date the care plan. Staff persons who participated in the development of the care plan are also required to sign the plan. If a client or responsible party is unable or chooses not to sign the initial or subsequent care plans, document the inability or refusal to sign in the client's record.

IMPORTANT: When parties are unable to be present at the center for a discussion of the plan, the center must discuss the plan by phone. Documentation of the discussion must be kept in the client's record.

What happens if a client's care plan is modified prior to the predetermined date?

If a client's care plan is revised due to a significant change (e.g. a new need), the next care plan may be completed 6 months from the date of the significant/critical revision if the entire plan is reviewed.

If a client's care plan is revised due to a minor change (e.g. an additional method to reach a goal), the predetermined date for the next review will remain the same.

What constitutes monthly service documentation?

Progress notes must be written in each client's record at least once per calendar month and as necessary to reflect a review of the care plan, changes in the client's status, treatment notes and notes on significant events.

IMPORTANT: Document changes, events, etc. as they occur.

How does a center address a client who is on hold?

Document the initial reason for the hold in the client's record and maintain contact with the client's responsible party. If a client remains on hold for more than one month, document the continued absence in the client's record.

If a client has late stage dementia, who may sign center paperwork on the client's behalf?

A client's responsible party may sign center paperwork. The client's power of attorney (POA) or legal guardian may also designate an alternate person to sign paperwork. The designation must be written and kept in the client's record.

If the client does not have a POA or legal guardian, the center should discuss the guardianship process with the caregiver. If the caregiver is not willing or unable to seek guardianship, the center may allow the caregiver to sign paperwork, thereby assuming the associated risks (e.g. family disputes).

INSPECTION PROCESS

May an inspection exceed a center's scheduled hours of operation?

An inspection may exceed a center's hours of operation if the Center Director and Licensing Representative agree to stay. If you are unwilling or unable to stay past the center's hours of operation, discuss your concerns with the Licensing Representative when you are contacted to schedule the date(s) of the inspection.

Gather the materials on the OADLC Inspection Checklist prior to the inspection. Readily available materials will facilitate the inspection process.

Why do centers receive citations?

The Older Adult Daily Living Centers Licensing Act states, "Whenever the department, upon inspection or investigation, learns of a violation of this act or of regulations adopted by the department pursuant to this act, it shall give written notice thereof to the offending person. The notice shall require the offending person to take action to bring the facility into compliance with this act or with the relevant regulations within a specified time."

What is a repeat citation?

A repeat citation occurs when the Department observes an area of non-compliance during the current inspection that was cited during the previous inspection. For example, if a center received a citation for §11.53(a) during the previous inspection and receives a citation for §11.53(a) during the current inspection, the License Inspection Summary will identify the area as a repeat citation.

What constitutes an acceptable Plan of Correction?

An acceptable plan demonstrates compliance with the relevant section or subsection of the regulations. A plan must include, but is not limited to:

- 1) A concise plan to correct each area of non-compliance
- 2) The person(s) responsible for the implementation and continued compliance of the plan
- 3) The date the plan was completed
- 4) The method(s) implemented to ensure the violation will not occur again
- 5) Indication that supporting documentation is attached, if applicable

Examples of supporting documentation include, but are not limited to:

- 1) Staff in-service trainings
- 2) Policy, procedure and form revisions

- 3) Physical examination forms
- 4) Photographs
- 5) Work orders and receipts

Are License Inspection Summaries available to the public?

To view a License Inspection Summary, select the [Adult Day Center Directory](#), then select the link for the appropriate county. Each county's page will list the adult day services centers in that county. Select the link to the right of the appropriate center to view the summary.

What is the purpose of the License Inspection Instrument?

The License Inspection Instrument (LII) contains the Department's interpretive guidelines for sections of the 6 Pa. Code, Chapter 11 regulations. The LII does not contain regulatory revisions. The Department will notify providers when changes to the document are made.

For more information, contact:

Department of Aging
Bureau of Quality Assurance
Division of Licensing
555 Walnut Street
Forum Place, 5th Floor
Harrisburg, PA 17101
Phone: (717) 214-6716
Fax: (717) 783-0894

The [Pennsylvania Adult Day Services Association](#)

The [National Adult Day Services Association](#)