

HCS PROVIDER SCREENING CHECKLIST

The following questions were developed by a committee of professionals, providers, and consumer advocates, to assist families with selecting an HCS provider.

PROVIDER NAME: _____
ADDRESS: _____
PHONE NUMBER: _____

1. What is your organization's Mission Statement or Philosophy?

2. Why did you or your organization decide to serve individuals with Mental Retardation / Developmental Disabilities?

3. How long have you and/or your organization been serving persons with Mental Retardation / Developmental Disabilities?

4. How many consumers does your HCS Program serve, at the present time, and what is your capacity?

5. Do you have a reference list of families that I could talk to, regarding the services your organization has provided to their family member?
 Yes No
6. What type and/or length of experience does your staff members have serving individuals with mental retardation; special problems, i.e., MH, PDD, or Autism? Could you provide records of training your staff has received, specific to various disabilities and/or conditions?

7. Tell me about the level of training, experience, and credentialing, for staff providing services to consumers.

8. Describe ways in which you involve the consumer/guardian/family into the development of the consumer's program. How do you incorporate the families wants, for their family member, when they are different from what the agency wants?

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9. Does your agency have more experienced and professional staff who model for new staff or provide mentoring?
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10. What procedures will staff implement in a crisis situation? Does your agency train staff in PMAB or Non-Violent Crisis Intervention? Explain.
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11. How does your agency develop Behavioral Support Plans? Are plans approved by a Behavior Therapy Committee, Human Rights Committee or by a psychiatrist? If plans are reviewed by a Human Rights Committee, is the Human Rights Committee made up of outside members, professionals, parents and consumers?
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12. What are your policies, regarding visitors?
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13. What are your policies, regarding privacy?
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14. What type of leisure / recreational activities will be available? Does my family member choose their daily routine?
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15. What type of transportation does your company provide?
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16. How many vehicles do you have? Is there a vehicle for each home?
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17. How do you accommodate non-ambulatory individuals?
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18. Do you have staff who speak other languages? If not, will you have an interpreter available?
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19. How do you accommodate non-verbal individuals? Are staff trained in sign language, use of picture schedules, picture books, augmentative communication devices, such as The Canon, The Touch Talker or The Liberator?
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20. What provision will your company make for my family member to attend the religious services of their choice?

21. What are your staff to consumer ratios?

22. What are your emergency back-up procedures, when there is crisis or the home is short staffed?

23. Are the staff available to support my family member in additional activities in the community? (i.e. Girl Scouts, religious activities, sports teams, etc.)

24. How and where will my family member be cared for when he or she is ill?

25. Do you have medical staff on site or on call, for medical issues? Are medical staff willing to practice/rehearse with my family member what to expect, when going to the doctor or hospital?

26. What choices will my family member have concerning day programming, vocational training, supported employment, etc.?

27. Describe how staff train consumers in daily living skills. Please share with me documentation or how this is reflected.

28. What geographical locations do you serve?

29. Will my home be located in close proximity to my school / day program / place of employment?

30. How does your agency build community awareness about persons with disabilities moving into their neighborhood? How does your agency resolve concerns?

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31. Describe your complaint process?

32. Do you lease or own your residential homes? Do you have short term or long term leases?

33. What screenings do you require, when staff are hired (drug screen, criminal background check, abuse/neglect)?

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