

LICENSING SCORESHEET
Community Homes – CHAPTER 6500 – 3/02/17

App Number: _____ SIN Number: _____ PCID: _____

Date(s) of On-Site Inspection: _____

Name(s) of Inspector(s): _____

Start/Stop Time for Each Date: _____ Total Travel To Home: _____

Name of Legal Entity: _____

Name of Facility: _____ License Capacity: _____ Current Census: _____

Address of Facility: _____ County: _____

Total Bedrooms: _____ Single: _____ Double: _____ Bathrooms: _____ Toilets: _____ Sinks: _____

Person In Charge: _____ Signature & Time: _____

Type of Inspection: Full

Partial

Reason: **Renewal** (annual, full inspection conducted to renew a regular license)

Provisional (follow-up inspection while a facility is operating on a provisional license, including provisional renewal inspection)

Initial (new facility or sale of legal entity)

Interim (any inspection that is not otherwise listed)

Complaint

Incident

Monitoring

Settlement - BHA Docket#: _____

Notice: Unannounced Announced

Waiver(s): Granted Denied **Date(s):** _____ **Regulation(s):** _____

N/A

GENERAL REQUIREMENTS

11 C V NM NA Chapter 20
 14 C V NM NA Max Capacity
 15a C V NM NA Agency Resp. Compliance
 15b C V NM NA Home Resp. Compliance
 16 C V NM NA Occupancy Permit
 17a C V NM NA Self-Assessment
 17b C V NM NA L.I.I. Used
 17c C V NM NA L.I.I. Results
 18 C V NM NA Abuse
 19 C V NM NA Reporting to Childline
 20b C V NM NA Unusual Incidents Policy
 20c C V NM NA UI Oral Notice - 24 Hrs.
 20d C V NM NA UI Report - 72 Hrs.
 20e C V NM NA Final UI Report
 20f C V NM NA UI Report - Ind. Record
 20g C V NM NA UI Reports Kept
 20h C V NM NA Family Notification - UI
 21a C V NM NA Death Report - 24 Hrs.
 21b C V NM NA Investigation of Unusual Death
 21c C V NM NA Death Report - Ind. Rec.
 21d C V NM NA Family Notification - Death
 22 C V NM NA Incident Record

23a C V NM NA PSP Clearance prior
 23b C V NM NA FBI Clearance prior
 23c C V NM NA a and b if 17yrs+ in home
 23d C V NM NA Criminal Clearance – 1 yr
 23e C V NM NA PSP/FBI Clearance Copies
 23f C V NM NA Child Abuse Clearance
 24a C V NM NA Funds and Property
 24b C V NM NA Financial Policy – Ind. Rights
 24c C V NM NA Ind. Funds – Ind. Benefit
 24d1 C V NM NA Financial/Prop. Record
 24d2 C V NM NA Disbursements Records
 24e1 C V NM NA Deposit/Withdrawal Records
 24e2 C V NM NA Funds to Ind. Records
 24e3 C V NM NA Receipt over \$15
 24f C V NM NA Comingling of Ind. Funds
 24g C V NM NA Borrowing Ind. Funds

INDIVIDUAL RIGHTS

31a C V NM NA Ind. Informed
 31b C V NM NA Signed Statement
 31c C V NM NA Exercise Rights
 32 C V NM NA Deprived of Rights
 33a C V NM NA Neglect, Abuse

33b	C	V	NM	NA	Research Projects
33c	C	V	NM	NA	Manage Own Finances
33d	C	V	NM	NA	Program Planning
33e	C	V	NM	NA	Privacy
33f	C	V	NM	NA	Personal Property
33g	C	V	NM	NA	Visitors, Communication
33h	C	V	NM	NA	Telephone Access
33i	C	V	NM	NA	Mail
33j	C	V	NM	NA	Voting
33k	C	V	NM	NA	Religion
33l	C	V	NM	NA	No Excess Meds.
33m	C	V	NM	NA	Required to Work
34a	C	V	NM	NA	Discrimination
34b	C	V	NM	NA	Civil Rights Policies
34b1	C	V	NM	NA	Policies - Nondiscrimination
34b2	C	V	NM	NA	Policies - Accessibility
34b3	C	V	NM	NA	Policies - Complaints
34b4	C	V	NM	NA	Policies - Rights

STAFFING

42a	C	V	NM	NA	CEO
42b	C	V	NM	NA	CEO - Responsibilities
42b1	C	V	NM	NA	CEO - Policies
42b2	C	V	NM	NA	CEO - Admission/Discharge
42b3	C	V	NM	NA	CEO - Safety of Ind.
42b4	C	V	NM	NA	CEO - Regs. Compliance
42c	C	V	NM	NA	CEO - Qualifications
43a	C	V	NM	NA	Family Living Spec (FLS)
43b	C	V	NM	NA	FLS – 8 Homes
43c	C	V	NM	NA	FLS – 16 Inds.
43d	C	V	NM	NA	FLS - Program
43d1	C	V	NM	NA	FLS - Assessments
43d2	C	V	NM	NA	FLS – Provide Assessments
43d3	C	V	NM	NA	FLS – Participate in ISPs/Reviews
43d4	C	V	NM	NA	FLS – Attend ISP
43d5	C	V	NM	NA	FLS – Plan Lead
43d6	C	V	NM	NA	FLS – ISP Review for Accuracy
43d7	C	V	NM	NA	FLS – Content Discrepancy
43d8	C	V	NM	NA	FLS – ISP Implementation
43d9	C	V	NM	NA	FLS – ISP Services
43d10	C	V	NM	NA	FLS – Monthly Review
43d11	C	V	NM	NA	FLS – Report Need Changes
43d12	C	V	NM	NA	FLS – Review ISP with Ind.
43d13	C	V	NM	NA	FLS – Document Review of ISP
43d14	C	V	NM	NA	FLS – ISP Review to SC/Team
43d15	C	V	NM	NA	FLS – Declination Option to Team
43d16	C	V	NM	NA	FLS – Recommend ISP Revision
43d17	C	V	NM	NA	FLS – Coordinate Services
43d18	C	V	NM	NA	FLS – Coordinate Fam. Support
43d19	C	V	NM	NA	FLS – Train Health & Safety Need
43d20	C	V	NM	NA	FLS – Develop Provider Services
43e	C	V	NM	NA	Qualifications

SUPERVISION

44a	C	V	NM	NA	Supervision
44b	C	V	NM	NA	Unsupervised
44c	C	V	NM	NA	FLS Accessible
44d	C	V	NM	NA	Supervision Per ISP

44e	C	V	NM	NA	Staff Qualifications & Ratios
44f	C	V	NM	NA	Ind. Unsupervised
45a	C	V	NM	NA	Pre Service 24 Hrs. An. Training
45b	C	V	NM	NA	Prior & An. First Aid/Heimlich
45c	C	V	NM	NA	Prior & An. CPR
46a	C	V	NM	NA	24 Hr. An. Training for FLP
46b	C	V	NM	NA	24 Hr. An. Training for FLS
47	C	V	NM	NA	Training Records

PHYSICAL SITE

61a	C	V	NM	NA	Special Accommodations
61b	C	V	NM	NA	Adaptive Equip.
62a	C	V	NM	NA	Poisons Locked
62b	C	V	NM	NA	Documentation
62c	C	V	NM	NA	Poisons Original Containers
62d	C	V	NM	NA	Poisons Separate from Food
63a	C	V	NM	NA	Heat Sources
63b	C	V	NM	NA	Documentation
64a	C	V	NM	NA	Clean and Sanitary
64b	C	V	NM	NA	Insects/Rodents
64c	C	V	NM	NA	Trash Removal
65	C	V	NM	NA	Ventilation
66	C	V	NM	NA	Lighting
67	C	V	NM	NA	Surfaces – Hazard Free
68a	C	V	NM	NA	Running Water
68b	C	V	NM	NA	Hot Water - 120°
68c	C	V	NM	NA	Documentation
69a	C	V	NM	NA	62° Non-Sleeping
69b	C	V	NM	NA	55° Sleeping
69c	C	V	NM	NA	85° Mechanical Vent
69d	C	V	NM	NA	Different Indoor Temp.
70	C	V	NM	NA	Telephone
71	C	V	NM	NA	Emergency Numbers
72a	C	V	NM	NA	Windows/Doors Screened
72b	C	V	NM	NA	Screens – Good Repair
73	C	V	NM	NA	Handrails
74	C	V	NM	NA	Nonskid Surfaces
75a	C	V	NM	NA	Landings
75b	C	V	NM	NA	Landing Width
76	C	V	NM	NA	Furniture Safe, Clean, Sturdy
77	C	V	NM	NA	First Aid Materials
78a	C	V	NM	NA	Outside Walkway
78b	C	V	NM	NA	Outside Conditions
79a	C	V	NM	NA	Bedrooms in Basement
79b	C	V	NM	NA	50 Sq. Ft./60 Sq. Ft.
79c	C	V	NM	NA	Window in Bedrooms
79d	C	V	NM	NA	Curtains/Shades
79e	C	V	NM	NA	Doors for Privacy
79f1	C	V	NM	NA	Bed
79f2	C	V	NM	NA	Mattress/Foundation
79f3	C	V	NM	NA	Pillows, Linens
79f4	C	V	NM	NA	Chest of Drawers
79f5	C	V	NM	NA	Closet Space
79g	C	V	NM	NA	Cribs with Domes
79h	C	V	NM	NA	Share Bedroom w/ Other Gender
80a	C	V	NM	NA	Toilets/Tubs/Shower
80b	C	V	NM	NA	Privacy in Bathroom
80c	C	V	NM	NA	Bathroom Items
80d	C	V	NM	NA	Towel, Washcloth, Toothbrush

81a	C	V	NM	NA	Kitchen Area/Contents
81b	C	V	NM	NA	Utensils Washed
82	C	V	NM	NA	Laundry Clean
83a	C	V	NM	NA	In-Ground Pool
83b	C	V	NM	NA	Above Ground Pool
83c	C	V	NM	NA	Swimming Pool Locked
84	C	V	NM	NA	Firearms and Ammunition

FIRE SAFETY

101	C	V	NM	NA	Unobstructed Egress
102	C	V	NM	NA	Combustible Supplies
103	C	V	NM	NA	Furnace Cleaned
104	C	V	NM	NA	Portable Space Heaters
105a	C	V	NM	NA	Wood/Coal Stoves Inspected
105b	C	V	NM	NA	Wood/Coal Stoves Cleaned
106a	C	V	NM	NA	Fireplace Guards
106b	C	V	NM	NA	Fireplaces Cleaned
107a	C	V	NM	NA	Smoke Detector per Floor
107b	C	V	NM	NA	Common Areas
107c	C	V	NM	NA	UL or L&I Approved
107d	C	V	NM	NA	Detectors Checked
108a	C	V	NM	NA	2A Ext. Per Floor
108b	C	V	NM	NA	2A-10BC Ext. in Kitchen
108c	C	V	NM	NA	Extinguisher UL/FMS Approved
108d	C	V	NM	NA	Fire Ext. Accessible
109a	C	V	NM	NA	Fire Drill – 3 Months
109b	C	V	NM	NA	Fire Drill – 6 Months
109c	C	V	NM	NA	Documentation of Ability to Exit
109d	C	V	NM	NA	Fire Drill Record
109e	C	V	NM	NA	Fire Drill – Sleeping Hours
109f	C	V	NM	NA	Alternate Exit Routes
109g	C	V	NM	NA	Fire Drills – Days/Times
109h	C	V	NM	NA	Meeting Place
109i	C	V	NM	NA	Detector Set Off
110a	C	V	NM	NA	Fire Safety Training
110b	C	V	NM	NA	Training Plan Content
110c	C	V	NM	NA	Training Completed
110d	C	V	NM	NA	Record of Training

INDIVIDUAL HEALTH

121a	C	V	NM	NA	Ind. Physical
121b	C	V	NM	NA	Physician Sign/Date
121c1	C	V	NM	NA	Medical History
121c2	C	V	NM	NA	General Physical
121c3	C	V	NM	NA	Immunizations Adults
121c4	C	V	NM	NA	Vision/Hearing Screen Adults
121c5	C	V	NM	NA	Immun. Screening Child.
121c6	C	V	NM	NA	TB Testing
121c7	C	V	NM	NA	Gyn. Exam
121c8	C	V	NM	NA	Mammogram
121c9	C	V	NM	NA	Prostate Exam
121c10	C	V	NM	NA	Communicable Disease
121c11	C	V	NM	NA	Health Maintenance
121c12	C	V	NM	NA	Physical Limits
121c13	C	V	NM	NA	Allergies, Cont. Meds
121c14	C	V	NM	NA	Emergency Information
121c15	C	V	NM	NA	Diet Instructions
121d	C	V	NM	NA	RN/LPN Test

122a	C	V	NM	NA	Dental Exam
122b	C	V	NM	NA	Dental if Meds.
122c	C	V	NM	NA	Dental Exam Records
122d	C	V	NM	NA	Teeth Cleaning
122e	C	V	NM	NA	Follow Up Dental Work
123a	C	V	NM	NA	Refusal of Treatment
123b	C	V	NM	NA	Consent if Serious Condition
124	C	V	NM	NA	Health Services

FAMILY HEALTH

125a	C	V	NM	NA	Staff Physicals
125b	C	V	NM	NA	Physician Sign/Date
125c1	C	V	NM	NA	General Physical
125c2	C	V	NM	NA	TB Testing
125c3	C	V	NM	NA	Communicable Disease
125c4	C	V	NM	NA	Medical Problems
126a	C	V	NM	NA	Specific Precautions
126b	C	V	NM	NA	Precautions Followed

MEDICATIONS

131a	C	V	NM	NA	Original Containers
131b	C	V	NM	NA	Meds. Locked
131c	C	V	NM	NA	Refrigerated Meds. Locked
131d	C	V	NM	NA	Storage Containers
131e	C	V	NM	NA	Disposal of Meds.
132a	C	V	NM	NA	Meds. Labels
132b	C	V	NM	NA	Nonpres. – Original Labels
132A	C	V	NM	NA	Labeling - Statement of Policy
133a	C	V	NM	NA	Use of Meds
133b	C	V	NM	NA	Protocol Diag. Psych. Illness
133c	C	V	NM	NA	3 Month review of Psych Meds
133A	C	V	NM	NA	Use of Meds - Statement of Policy
134a	C	V	NM	NA	Medication Logs
134b	C	V	NM	NA	Logged Immediately
134c	C	V	NM	NA	Meds. Records for SA
134A	C	V	NM	NA	Med Log - Statement of Policy
135	C	V	NM	NA	Doc. Of Med Errors
136	C	V	NM	NA	Adv. Reaction – Notific./ Record
136A	C	V	NM	NA	Adv. React. - Statement of Policy
137a	C	V	NM	NA	Meds. Admin per Instructions
137b	C	V	NM	NA	Insulin Pre-Measured
138a	C	V	NM	NA	Training by Phys.
138b	C	V	NM	NA	Insulin Training
138c	C	V	NM	NA	Documentation of Training

NUTRITION

141	C	V	NM	NA	Food Protected
142	C	V	NM	NA	3 Meals Per Day
143	C	V	NM	NA	Quantity of Food
144	C	V	NM	NA	4 Food Groups

ASSESSMENT

151a	C	V	NM	NA	Initial/An. Assessment
151b	C	V	NM	NA	Service Revision Assess.
151c	C	V	NM	NA	Basis of Assessment
151d	C	V	NM	NA	FLS Sign Date
151e1	C	V	NM	NA	Strengths/Needs/Pref.

151e2	C	V	NM	NA	Likes/Dislikes/Interests
151e3i	C	V	NM	NA	Functional Skills
151e3ii	C	V	NM	NA	Communication
151e3iii	C	V	NM	NA	Personal Adjustment
151e3iv	C	V	NM	NA	Personal Needs
151e4	C	V	NM	NA	Supervision Needs
151e5	C	V	NM	NA	Self Admin. Of Meds.
151e6	C	V	NM	NA	Poisons
151e7	C	V	NM	NA	Heat Sources
151e8	C	V	NM	NA	Self-Evaluate
151e9	C	V	NM	NA	Doc. of Disability
151e10	C	V	NM	NA	Lifetime Med History
151e11	C	V	NM	NA	Psych. Eval.
151e12	C	V	NM	NA	Recommendations
151e13i	C	V	NM	NA	Progress - Health
151e13ii	C	V	NM	NA	Motor/Communication
151e13iii	C	V	NM	NA	Daily Living
151e13iv	C	V	NM	NA	Personal Adjustment
151e13v	C	V	NM	NA	Socialization
151e13vi	C	V	NM	NA	Recreation
151e13vii	C	V	NM	NA	Financial Independence
151e13viii	C	V	NM	NA	Manage Pers. Property
151e13ix	C	V	NM	NA	Community Integration
151e14	C	V	NM	NA	Water/Swim Safety
151f	C	V	NM	NA	Assessment to SC

ISP DEVELOPMENT

152a	C	V	NM	NA	One Plan
152b	C	V	NM	NA	P.S. Plan Lead
152c	C	V	NM	NA	Lead Dev. & Imp. Plan
152d1	C	V	NM	NA	Plan Lead Develop Initial Plan
152d2	C	V	NM	NA	Developed w/in 90 days
152d3	C	V	NM	NA	HCSIS form
152d4	C	V	NM	NA	Invitation to PT w/in 30 days
152d5	C	V	NM	NA	Copies

ISP CONTENT

1531	C	V	NM	NA	Services & Outcomes
1532	C	V	NM	NA	Increase Commun. Involv.
1533	C	V	NM	NA	Current Status & Eval. Method
1534	C	V	NM	NA	Protocol for Unsup. Time
1535	C	V	NM	NA	Protocol for Psych Symptoms
153 6 i	C	V	NM	NA	Assess. cause/ant. of Behav.
153 6 ii	C	V	NM	NA	Protocol to assess
153 6 iii	C	V	NM	NA	Method/Timeline to Elim. Pro.
153 6 iv	C	V	NM	NA	Protocol to Avoid Restraint
153 7 i	C	V	NM	NA	Potential - Residential Indep.
153 7 ii	C	V	NM	NA	Potential - Comm. Involvement
153 7 iii	C	V	NM	NA	Potential - Voc. Programming
153 7 iv	C	V	NM	NA	Potential - Competitive Employ.

ISP PARTICIPATION

154a	C	V	NM	NA	Plan Team Participation
154a1i	C	V	NM	NA	Individual
154a1ii	C	V	NM	NA	Specialist/FLS
154a1iii	C	V	NM	NA	Direct Service Worker
154a1iv	C	V	NM	NA	Others Ind. Chooses
154a2i	C	V	NM	NA	Medical Professionals
154a2ii	C	V	NM	NA	Additional DSW

154a2iii	C	V	NM	NA	Ind. Parent/Guard./Adv.
154b	C	V	NM	NA	Min. 3 Team Members
154c	C	V	NM	NA	Sign/Date

ISP IMPLEMENTATION

155a	C	V	NM	NA	Implementation by Start
155b	C	V	NM	NA	Implemented as Written

ISP REVIEW & REVISION

156a	C	V	NM	NA	Quarterly Review
156b	C	V	NM	NA	FLS/Ind. Sign/Date
156c1	C	V	NM	NA	Monthly Review
156c2	C	V	NM	NA	Entire ISP Review as app.
156c3	C	V	NM	NA	Document Change in need
156c4i	C	V	NM	NA	Deletion per Accomplishment
156c4ii	C	V	NM	NA	Add an Outcome/Service
156c4iii	C	V	NM	NA	Modify an Outcome/Serv.
156c5	C	V	NM	NA	Revise Assessment
156d	C	V	NM	NA	Quarterly Rev. to SC/Team
156e	C	V	NM	NA	Notification to Decline Rev.
156f	C	V	NM	NA	30Day Invite to Revis. Mtg
156g	C	V	NM	NA	Change Effective by Start
157	C	V	NM	NA	5 Copies to team

PROVIDER SERVICES

158a	C	V	NM	NA	Home Provide Services
158b	C	V	NM	NA	Home Provide Comm. Life
158c	C	V	NM	NA	Services as Specified
158d	C	V	NM	NA	Age Appropriate

DAY SERVICES

159a	C	V	NM	NA	Day Services Provided
159b1	C	V	NM	NA	Physician Serv. at Home
159b2	C	V	NM	NA	Team Approved

RECREATIONAL & SOCIAL ACTIVITES

160a1	C	V	NM	NA	FLH
160a2	C	V	NM	NA	Away From FLH
160b	C	V	NM	NA	Time Away from Home
160c	C	V	NM	NA	Doc. Of Rec/Soc. Activities

RESTRICTIVE PROCEDURES

162	C	V	NM	NA	Policy
163a	C	V	NM	NA	Retribution, Convenience
163b1	C	V	NM	NA	Anticipate/De-Escalate
163b2	C	V	NM	NA	Less Restrictive Techniques
164a	C	V	NM	NA	Review Committee
164b	C	V	NM	NA	Committee Composition
164c	C	V	NM	NA	Time Frame for Review
164d	C	V	NM	NA	Record of Meetings
165a	C	V	NM	NA	Plan Prior to use of RP
165b	C	V	NM	NA	Development of RPP
165c	C	V	NM	NA	Revision of RPP
165d	C	V	NM	NA	Approval of RPP
165e1	C	V	NM	NA	RPP - Specific Behaviors
165e2	C	V	NM	NA	RPP - Outcome
165e3	C	V	NM	NA	RPP - Methods to Modify
165e4	C	V	NM	NA	RPP - Types of RP

165e5	C	V	NM	NA	RPP – Target Date
165e6	C	V	NM	NA	RPP – Time Limits
165e7	C	V	NM	NA	RPP – Physical Problems
165e8	C	V	NM	NA	RPP – Person Responsible
165f	C	V	NM	NA	RPP - Implementation
165g	C	V	NM	NA	RPP – Copies in Ind. Record
166a	C	V	NM	NA	Positive App Training
166b	C	V	NM	NA	Specific RP Training
166c	C	V	NM	NA	Exp. Use of RP
166d	C	V	NM	NA	Doc. Of Training
167	C	V	NM	NA	Seclusion
168	C	V	NM	NA	Averse Conditioning
169b	C	V	NM	NA	Chemical Restraint
169c1	C	V	NM	NA	Phys. Examine, Order
169c2	C	V	NM	NA	Re-Admin. - Physical
169d1	C	V	NM	NA	Vital Signs
169d2	C	V	NM	NA	Physical Needs - CR
169d3	C	V	NM	NA	PRN
169i	C	V	NM	NA	Training for Ind.
169j	C	V	NM	NA	Documentation - CR
170b	C	V	NM	NA	Mechanical Restraint
170c1	C	V	NM	NA	Exceed 2 Hours
170c2	C	V	NM	NA	Physician Notified
170c3	C	V	NM	NA	Checked – 15mins
170c4	C	V	NM	NA	Physical Needs - MR
170c5	C	V	NM	NA	Removal – 2 Hrs.
170c6	C	V	NM	NA	Training for Ind.
170c7	C	V	NM	NA	Documentation - MR
171a	C	V	NM	NA	Funds, Property
171b	C	V	NM	NA	Payment for Damages
172b	C	V	NM	NA	Manual Restraints - Injury
172c	C	V	NM	NA	Manual Restraints – Least Resis.
172d	C	V	NM	NA	30 Min./2 Hrs.
173b	C	V	NM	NA	Exclusion - Injury
173c	C	V	NM	NA	Exclusion – Least Resist.
173d	C	V	NM	NA	60 Min./2 Hrs.
173e	C	V	NM	NA	4x/24 Hrs.
173f	C	V	NM	NA	Continual Monitoring
173g	C	V	NM	NA	Exclusion 0 40 Sq. Ft.
174	C	V	NM	NA	Emergency Use of Exl/MR
175	C	V	NM	NA	RP Record
176	C	V	NM	NA	Notice to Day Service

182c4	C	V	NM	NA	Dental Exam
182c5	C	V	NM	NA	Assessment
182c6i	C	V	NM	NA	Copies Inv. Int. Meeting
182c6ii	C	V	NM	NA	Copies Inv. An. Meeting
182c6iii	C	V	NM	NA	Copies Inv. Revis. Meeting
182c7i	C	V	NM	NA	Sign Sheet Initial ISP
182c7ii	C	V	NM	NA	Sign Sheet Annual Update
182c7iii	C	V	NM	NA	Access to Records
182c8	C	V	NM	NA	Copy of Current ISP
182c9i	C	V	NM	NA	ISP Revision Sign Sheet
182c9ii	C	V	NM	NA	Recomm. To Revise ISP
182c9iii	C	V	NM	NA	ISP Revision
182c9iv	C	V	NM	NA	Notice Member Decline
182c9v	C	V	NM	NA	Request Not to Receive
182c10	C	V	NM	NA	Content Discrepancy
182c11	C	V	NM	NA	Restrictive Proced. Proto.
182c12	C	V	NM	NA	Copy of Psych. Eval.
182c13	C	V	NM	NA	Recreational & Social Acts
182c14	C	V	NM	NA	Copies of Phys. Exams
183	C	V	NM	NA	Current Info.
184a	C	V	NM	NA	Record Info – 4 yrs.
184b	C	V	NM	NA	Ind. Records – 4 Yrs.
185	C	V	NM	NA	Exit Sign Letters
186	C	V	NM	NA	Exit Sign Letters

EMERGENCY PLACEMENT

191b1	C	V	NM	NA	Assessment 31 Days
191b2	C	V	NM	NA	Physical Exam

INDIVIDUAL RECORDS

181a	C	V	NM	NA	Emergency Info
181b1	C	V	NM	NA	Name, Address, Phone
181b2	C	V	NM	NA	Source of Health Care
181b3	C	V	NM	NA	Consent
181b4	C	V	NM	NA	Physical Exam
182a	C	V	NM	NA	Separate Ind. Record
182b	C	V	NM	NA	Entries
182c1i	C	V	NM	NA	Name, Sex, DOB, SSN
182c1ii	C	V	NM	NA	Race/ht/wt/hair/eye/mark
182c1iii	C	V	NM	NA	Language
182c1iv	C	V	NM	NA	Religious Affiliation
182c1v	C	V	NM	NA	Next of Kin
182c1vi	C	V	NM	NA	Current Dated Photo
182c2	C	V	NM	NA	Unusual Incident Reports
182c3	C	V	NM	NA	Physical Exam