

**Program Name:** \_\_\_\_\_

**Visit Date:** \_\_\_\_\_

***PHYSICAL FACILITY AND TRANSPORTATION 3.07(12), 3.08***

**3.07(12) Transportation:** \_\_\_\_ Routine & emergency provided; \_\_\_\_ supervision provided; \_\_\_\_ vehicles safe, insured, inspected; \_\_\_\_ first aid kits; \_\_\_\_ safety belts/car seats; \_\_\_\_ driver knows difficulties and pick-up person.

**comments:**

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**3.08(1) Required Inspections:** (see submissions checklist)

**comments:**

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**(2) Safety Program** implemented as required: \_\_\_\_ Plans and procedures posted and evaluated; quarterly training provided; \_\_\_\_ Fire drills conducted and documented as required; \_\_\_\_ Ongoing assessment of emergency/safety procedures.

**comments:**

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**(3) Toxic Substances:** \_\_\_\_ Not accessible to residents; \_\_\_\_ not stored with medication; \_\_\_\_ appropriate storage / labeled as to content and antidote; \_\_\_\_ poison control number posted by phones

**comments:**

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**(4) Paint:** No lead paint

**comments:**

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**(5) Buildings & Grounds:** \_\_\_\_Sanitary, comfortable, safe; \_\_\_\_no bugs, rodents; \_\_\_\_elevated areas protected; \_\_\_\_exits clear; \_\_\_\_recreation areas, equipment safe; \_\_\_\_power tools locked; \_\_\_\_swim areas tested, secured; \_\_\_\_well water tested; \_\_\_\_smoke detectors as required; \_\_\_\_fire extinguishers as required; \_\_\_\_first-aid kits as required; \_\_\_\_child-proofing as appropriate.  
**comments:**

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**(6) Architectural Barriers:** Facility is accessible to all residents.  
**comments:**

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**(7) Living Units:** \_\_\_\_Safe, clean, good repair; \_\_\_\_no fire hazards; \_\_\_\_hallways illuminated at night; \_\_\_\_operable windows & screens; \_\_\_\_light fixtures covered; \_\_\_\_adequate space; \_\_\_\_individual furniture & storage; \_\_\_\_comfortable bed; \_\_\_\_linens washed weekly.  
**comments:**

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**(8) Bathing & Toilet Facilities:** \_\_\_\_Good repair & clean; \_\_\_\_private; \_\_\_\_accessible; \_\_\_\_1:6; hot & cold H<sub>2</sub>O; \_\_\_\_mirrors; \_\_\_\_non-slip surfaces; \_\_\_\_store toiletries, towels, cloths.  
**comments:**

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**(9) Kitchens & Dining Facilities:** \_\_\_\_All necessary equipment safe & maintained; \_\_\_\_sufficient size; \_\_\_\_clean, well-lit, ventilated, attractively furnished; \_\_\_\_appropriate furniture, utensils, dishes; no disposables.  
**Comments:**

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