Prevention Plan Requirements

1) Providers must demonstrate that service recipients, families/guardians, staff members and board of directors/advisory committees have been involved in the development of the Plan;

2) The Plan must include a listing of the provider's planned self-assessments, the frequency with which they will be conducted and the risks/issues that will be evaluated with each assessment;

3) The Plan must identify provider staff responsible for ensuring that planned assessments are completed, for reporting significant findings to the provider management staff and for ensuring that appropriate corrective/preventive actions are identified and implemented; and

4) The Plan must include a procedure for documentation and maintenance of accessible files for self-assessments, including assessment findings and recommendations and evidence that appropriate action was taken regarding recommendations.

Date: _____

1. Inside Environmental Safety		
Existing Items	Needed Items	Notes

Date: _____

2. Temperature Safety: Water, Refrigerators, Freezers		
Existing Items	Needed Items	Notes

Date: _____

3. Outside Environmental Safety		
Existing Items	Existing Items	Existing Items

Date: _____

4. Work and Day Service Site Safety		
Existing Items	Needed Items	Notes

Date: _____

5. Fall Hazards		
Existing Items	Needed Items	Notes

Date: _____

6. Vehicle and Transportation Safety		
Existing Items	Needed Items	Notes

Date: _____

_____

7. Medication Safety		
Existing Items	Needed Items	Notes

Date: _____

8. Meals and Food Storage Safety		
Existing Items	Needed Items	Notes

Date: _____

9. Durable Medical Equipment Safety		
Existing Items	Needed Items	Notes

Date: _____

10. Wheelchair Safety		
Existing Items	Needed Items	Notes

Date: _____

11. Safety on Community Outings		
Existing Items	Needed Items	Notes

Date: _____

12. Emergency Management (e.g., natural disasters and fire)		
Existing Items	Needed Items	Notes

Date: _____

13. Theft Prevention (Property & Funds)		
Existing Items	Needed Items	Notes

Date: _____