**Residential Settings**

**Provider Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Capacity/Census:** \_\_\_\_\_/\_\_\_\_\_\_  **Date of Visit:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Provider Type: Intensive, Moderate, ILP ADAP Staff:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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| **Section I: Physical Facilities** | **Checklist** | **If YES, List Evidence to Support****If NO, Explain Why** |
| 1. **Construction and Design**

Buildings shall be built, remodeled, or acquired with consideration of the service and program to be offered and children to be accepted. *Specifically designated areas shall be provided for sleeping, bathing, dining, informal living and* office. *The building shall be accessible to persons with disabilities in accordance with Americans with Disabilities**Act Accessibility Guidelines (ADAAG) or Uniform Federal Accessibility Standards (UFAS).*Prompt:Pay attention to accessibility. |  ☐ Areas designated for sleeping, bathing, dining, living and office.[ ]  Building entry is accessible to persons with disabilities.☐ Hallways are accessible to persons with disabilities.☐ Hallways are clean and free of obstructions.[ ]  Bathrooms are accessible to persons with disabilities.[ ]  Common areas are accessible to persons with disabilities. |    |
| 1. **Fire Inspection (Note inspection dates)**

Prior to being issued an initial or renewal license, six-month permit, or approval, the applicant for the facility shall submit to the Department a written fire inspection report with no violations cited. Subsequent inspections may be requested by the licensee, member of the Board of Directors or by the Department of Human Resources. Copies of such inspection reports shall be submitted to the Department. | Fire extinguisher tag date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_Fire extinguisher location: \_\_\_\_\_\_\_\_\_\_\_\_\_\_Fire extinguisher tag date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_Fire extinguisher location: \_\_\_\_\_\_\_\_\_\_\_\_\_\_Fire extinguisher tag date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_Fire extinguisher location: \_\_\_\_\_\_\_\_\_\_\_\_\_\_ |  |
| 1. **Health Inspection**

Prior to being issued a license, six-month permit, or approval, the applicant for the facility shall submit to the Department a written Health Department inspection report. Subsequent inspections may be requested by the licensee, member of the Board of Directors or by the Department of Human Resources.  | [ ]  Dining area is clean.☐ Dining area is accessible.[ ]  Health inspection rating posted; note rating \_\_\_\_\_\_\_\_\_. **(picture)** |  |
| 1. **Grounds and Furnishings**
 | [ ]  Grounds well-kept with sufficient play space☐ Equipment is safe, functional and available☐ Furnishings meet basic function of the building☐ Furnishings in good condition☐ Furnishings age appropriate & attractive☐ Furnishings are durable |  |
| **Section II: Living Unit**  | **Checklist** | **If YES, List Evidence to Support****If NO, Explain Why** |
| 1. **Living Unit/Dayroom**

Living units shall accommodate groups not to exceed 10 children per living unit, but with a maximum of two living units in a single building. | ☐ Dayroom/common area to relax☐ Working mounted T.V.☐ Ample furniture for activities, games☐ Furniture clean/good condition☐ No graffiti on walls☐ Adequate lighting☐ Light fixtures covered/secure/operable☐ Walls free of holes & damage☐ Windows secure/not damaged☐ Flooring good condition (i.e., no broken/loose tiles)☐ Covered switch plates/secure☐ Doors/fixtures good condition☐ Door fixtures are ligature resistant[ ]  No trash bags |  |
| 1. **Ventilation, Heating, Cooling, Lighting and Telephones**
 | [ ]  Adequate ventilation in all areas of facility[ ]  Screens provided for all windows, unless building is totally air-conditioned[ ]  Adequate heating/cooling in living and sleeping areas[ ]  Telephone provided in every living unit, cottage and administrative building |  |
| 1. **Emergency and first aid supplies for minor cuts and abrasions, first aid supplies shall be available in each building.**
2. **Safety Plan**

**The facility shall develop a fire evacuation plan and a plan that will be implemented in the threat of a natural disaster (such as a tornado warning). Routine drills to practice the plans will be conducted. Each child shall be advised of the plan upon entering care.** | [ ]  First aid kit Locations: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ [ ]  Shears Locations: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  [ ]  AED/OxygenLocations: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ [ ]  Safety/evacuation plan posted |  |
| 1. **Seclusion Room**
 | [ ]  Doors not damaged/operable[ ]  Doorknobs operable & non-locking from inside[ ]  Door fixtures ligature resistant, (i.e., collapsible fixtures, continuous concealed hinges)[ ]  Door with viewing window (clear, can view person inside room)[ ]  Switch plates/outlet covers secured[ ]  Flooring clean, intact, (i.e., no broken tiles)[ ]  Ceiling vent clean & ligature resistant[ ]  Light fixture secure, operable and covered[ ]  Walls free of holes/damage[ ]  Mounted camera & operable[ ]  Air conditioner secure, no loose screws[ ]  Furniture in room/mattress |  |
| 1. **Laundry Room**
 | [ ]  Doors not damaged/operable[ ]  Doorknobs operable & non-locking from inside[ ]  Door fixtures ligature resistant, (i.e., collapsible fixtures, continuous concealed hinges)[ ]  Laundry supplies locked (locked door or cabinet) |  |
| 1. **Other Concerns**
 |  |  |
| **Section III: Non-Residential**  | **Checklist** | **If YES, List Evidence to Support****If NO, Explain Why** |
| 1. **Rights of Children/Youth in Residential Care**

Children in residential care, have the same basic rights as all foster children including the right to privacy, humane treatment, adequate shelter, clothing, nutrition, essential personal care items, access to religious worship services of their choice, access to counsel and the courts, access to family members, freedom from excessive medication, freedom from unnecessary seclusion and restraint, and the right to advocacy services (See Appendix for list of advocacy services). It is important that these rights be explained to each child and family members in a manner consistent with the child’s level of understanding**. A child has the right at the ISP or at any other time to advise a worker whether they believe they have been denied the ability to participate in a normalizing activity.** |  [ ]  Resident rights posted in facility [ ]  ADAP’s contact information posted [ ]  Internal advocateName \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Contact Info: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  |   |
| 1. **Cameras**
* Verify type of camera operating system (i.e., continual feed or motion sensor).
* Verify camera use (i.e., continual observation, incident review, instruction/training, investigation).
* Verify video data retention and length of time.
 | [ ]  Cameras located in common areas **(list locations)**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Number of cameras: \_\_\_\_\_\_\_\_\_\_ [ ]  Cameras operable  |  |
| 1. **Staffing Requirements**

Child Care Staff (direct care/youth worker)1. Provide direct care and supervision of children.
2. Every child care staff worker who directly supervises children shall be off at least 24 consecutive hours per week for which they are not working in a child care worker capacity.
3. When two relief staff are unavailable, one child care staff worker shall be permitted to provide relief for the two regular child care staff, as long as staff to child ratio is maintained.
4. Physical care ratio: 1:8 AM and 1:10 (10 PM – 7 AM)

Medical Care: Access to licensed practicing physician or clinic; frequencyDental Care: Access to licensed practicing dentist; frequency | Number of direct care staff **day**: \_\_\_\_\_\_\_Number of direct care staff **night**: \_\_\_\_\_\_\_\_\_Staff to child ratio day: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Staff to child ration night: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Staff Vacancies: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Medical Care:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Dental Care:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |  |
| 1. **Resident Related**
2. Resident On-Campus Work Assignments:

Shall be considered as part of the participatory responsibility of living together, or as a means of earning monthly. Children shall not be considered as substitutes for employed adult staff, nor shall they be employed as a means of avoiding the hiring of adult staff. Work assignments shall be made in accordance with age and ability of the child.1. Visiting Practices

Families shall be afforded privacy with their children during visitation on the facility campus, unless specific, definable and documented reasons to the contrary have been established through the Care/Treatment Plan and/or ISP.1. Allowances (POLICY/PRACTICE)

Child care facility shall ensure that each child receives an allowance, spending money, or has the opportunity to earn money.1. Grievance Process **(GET COPY)**

Each facility shall develop specific grievance policies and procedures for implementation.Copies of each shall be provided to each child; b. Grievance procedures shall be activated upon the request of the child or the child’s family and continue until a resolution is obtained. Grievance results and procedures taken shall be documented in the child’s file and reported to the legal guardian and/or agency having primary planning responsibility.1. Personal Hygiene

Individual items such as towels, washcloths, toothbrushes and other toiletries shall be provided. One child’s personal items should not be allowed to touch that of another child’s. Children should be discouraged from sharing personal items.1. Nutrition **(GET COPY)**

At least 3 nutritious meals daily, including: meats, or meat substitutes, vegetables, milk, fruit, cereal, bread, and dessert; each with a different menu. Menus written in advance and kept on file for 1 year and available for review. Between meal and nighttime snacks shall be available, except when restricted for dietary reasons. Special dietary needs are identified, professional consult shall be requested and modifications made as needed.1. Clothing

Shall be stylish, properly fit, clean and of good quality and appearance. Should not be different from clothing worn by children in the community. Children should have a part in selecting clothing. Shoes are provided as needed. Used canvas sneakers, if in good condition and sanitized, may be used. Each child shall have his/her own clothing and place for storing it. | [ ]  Residents assigned choresDescribe: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ [ ]  Residents paid to workDescribe: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ [ ]  Visitation room/practices Describe: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_[ ]  Allowance practices Describe: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_[ ]  Secure grievance boxes; locations\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_[ ]  Grievance form; locations\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_[ ]  Hygiene boxes stored/lockedLocations: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_[ ]  Toiletries of choice[ ]  Three meals provided daily[ ]  Registered dietician: contract or employee[ ]  Snacks provided[ ]  Residents wear own clothes[ ]  Storage for clothing[ ]  Procedure to request clothes/voucher |  |
| 1. **Other Concerns**
 |  |  |
| **Section IV. Bedroom/Bath****Name:**  | **Checklist** | **Description** |
| **I. Bedroom**1. Entry/doors | [ ]  Doors not damaged/operable[ ]  Doorknobs operable & non-locking from inside[ ]  Door fixtures ligature resistant, (i.e., collapsible fixtures, continuous concealed hinges)[ ]  Switch plates/outlet covers secured |  |
| 2. Flooring | [ ]  Flooring clean[ ]  Flooring secure/not loose[ ]  Flooring intact, (i.e., no broken tiles) |  |
| 3. Windows | [ ]  Windows secure[ ]  No loose screws |  |
| 4. Lighting | [ ]  Adequate lighting[ ]  Switch plates/outlet covers secure[ ]  Light fixtures covered/secure (i.e., no exposed lightbulbs) |  |
| 5. Beds/Bedding | [ ]  Bed frame in good condition[ ]  Mattress in good condition[ ]  Bedding personalized[ ]  No loose screws noted[ ]  Bed mounted to floor |  |
| 6. Furnishings | [ ]  Dresser provided with rounded edges[ ]  Desk provided with rounded edges[ ]  Chair provided (suicide resistant/armless)  |  |
| 7. Personal possessions | [ ]  Personal possessions (i.e., pictures, stuffed animals, books)[ ]  Clothing and shoes |  |
| 8. Walls | [ ]  Walls free of holes and damage[ ]  No graffiti |  |
| **II. Bathroom**1. Entry/doors | [ ]  Doors not damaged/operable[ ]  Doorknobs operable & non-locking from inside[ ]  Door fixtures ligature resistant, (i.e., collapsible fixtures, continuous concealed hinge)[ ]  Switch plates/outlet covers secured |  |
| 2. Flooring | [ ]  Flooring clean[ ]  Flooring secure/not loose[ ]  Flooring intact (i.e., no broken tiles) |  |
| 3. Lighting | ☐ Adequate lighting☐ Switch plates/outlet covers secure☐ Light fixtures covered/secure (i.e., no exposed lightbulbs) |  |
| 4. Fixtures (note any damage) | [ ]  Toilet flush mounted[ ]  Toilet operable[ ]  Sink secure/undamaged[ ]  Sink operable[ ]  Fixtures are ligature resistant, (i.e., recessed toilet paper holder, sink faucet flush, collapsible towel hooks)[ ]  Exhaust grille is ligature resistant, (i.e., smaller round openings, no mounting hardware)[ ]  Shower/tub clean[ ]  Shower tiles secure/not damaged[ ]  Shower/tub drain is operable & secure[ ]  Shower rod & curtain (non-weight bearing & tear away)[ ]  Shower faucet is ligature resistant, (i.e. flush to wall)[ ]  Grab bars ligature resistant, (i.e., covered)[ ]  Soap dispense ligature resistant (i.e., rounded, smooth edge) |  |
| 5. Mirror | [ ]  Stainless ligature resistant mirror |  |
| 6. Walls | [ ]  Walls free of holes and damage[ ]  No graffiti |  |
| 7. Other Concerns (note any odors) |  |  |

**Recommendations regarding remediation of any setting not meeting the criteria above:**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

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**ADAP Staff Signature Date**