

STATE HOME PROGRAM RECOGNITION CHECKLIST

Facility Name:

VA Facility of Jurisdiction:

TAB	Documentation Required	Received	Comments
A	Required Information: Recognition Survey (Per diem will only be paid once all standards are met). Medical Director must sign survey or cover letter to State. Staffing – in survey # 10-3567 VA July 2006 (RS)		State to provide Staffing Form 10-3567 VA to provide MC Director's letter and Recognition Survey
B	Legislation – copy of legal and administrative action establishing the State – operated facility (e.g., State Laws)		State to Provide
C	Site Plan of facility and surroundings		State to Provide (copy on 8 ½ x 11 Paper)
D	Legal Title, lease or other document establishing right to occupy facility.		State to Provide
E	1. Organizational charts and the operational plan of the facility. 2. The operational plan should include a 3. financial plan during the first three years of operation, 4. state funds to support the operation of the facility, 5. per diem charges of veterans, 6. monthly rate of admitting patients to the facility, 7. staffing as you fill each care unit and staffing when the facility is 95% full, 8. statement of your plan to either admit or not admit non-veterans, and a 9. listing and description of contracts to support the operation of the facility.		State to Provide
F	Number of staff by category indicating full-time, part time and minority designation		State to Provide Can be done in memo form
G	Number of nursing home patients who are veterans and non veterans, the number of veterans who are minorities and the number of non-veterans who are minorities		State to Provide Cane be done in memo form
H	Annual State Fire Marshall's Report		State to Provide
I	Annual certification from responsible State Agency showing compliance with the Section 504 of the Rehabilitation Act of 1973 (Public Law 93-112) as incorporated in 38 CFR 18.400 series (VA Form 10-0143A)		State to Provide
J	Annual certification for Drug Free Workplace Act of 1988 (VA form 10-0143)		State to Provide
K	Annual certification regarding lobbying in compliance with Public Law 101-121 (VA form 10-0144)		State to Provide
L	Annual Certification of Compliance with Title VI of the Civil Rights Act of 1964 as incorporated in Title 38 CFR 18.1-18.3 (VA form 10-0144A)		State to Provide
M	Management Contract Facility – if the facility is operated by an entity contracting with the State, the State must assign a State employee to monitor the operations of the facility on a full-time onsite basis.		State to Provide (if applicable)
N	Other information: 1. Date of VA Facility of Jurisdiction's Operational Inspection, 2. Date first resident admitted, 3. Date first veteran admitted, 4. Number of Nursing Home beds, 5. Number of Domiciliary beds.		State to Provide Can be done in memo form
O	Miscellaneous		
	Other Information:	Beds	Date
	Date of VA Facility of Jurisdiction's Operational Inspection		
	Date First Resident Admitted		
	Number of Nursing Home Care Beds		
	Number of Domiciliary Beds		