

**New Jersey Department of Health
Division of Health Facility Survey and Field Operations**

**AFFIDAVIT OF COMPLIANCE
WITH NEW JERSEY LICENSURE STANDARDS FOR
ADULT DAY HEALTH CARE FACILITIES**

I, _____, Administrator of
_____, hereby state

that to the best of my personal knowledge and understanding, the facility is in substantial compliance with the mandatory standards enumerated in this statement except as follows:

Describe exceptions to compliance:

I acknowledge that I must provide prompt notification to the Director, Division of Health Facility Survey and Field Operations, at the address below, should I become aware of any substantial changes in compliance:

Director, Division of Health Facility Survey and Field Operations
New Jersey Department of Health
PO Box 367
Trenton, NJ 08625-0367

I understand that a willfully false statement could result in enforcement penalties.

Signature of Administrator	Date
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**New Jersey Department of Health
Division of Health Facility Survey and Field Operations**

**ADULT DAY HEALTH CARE FACILITIES
MANDATORY STANDARDS COVERED BY THIS AFFIDAVIT
(ALL REFERENCES ARE TO N.J.A.C. 8:43F)**

3.2	7.5	15.3
3.3(d) 1-8	8.1	15.4
3.4(a)	8.3	16.1
3.5	8.4	16.2
3.6	9.1	16.2(c)
3.10	9.2	16.2(d)
3.11	9.3	16.2(f)
3.12	9.4	16.2(j) 1-8
3.13	10.2	16.3
4.1	10.4	16.4
4.2	10.5	16.5
5.1(c)	11.1	16.6
6.1	12.1	17.1
6.2	12.2	17.2
6.3	13.2	18.1
7.2	13.3	18.2
7.3	14.17	
7.4	15.1	

Signature of Administrator	Date
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Division of Health Facility Survey and Field Operations**

**ADDENDUM TO AFFIDAVIT OF COMPLIANCE
FOR ADULT DAY HEALTH CARE FACILITIES**

This addendum lists the topics of all New Jersey Adult Day Health Care Facilities licensure standards referenced in the administrator's affidavit of compliance. This addendum may be helpful to the administrator in determining compliance.

- 3.2 Qualifications of Administrator
- 3.3(d) 1-8
 - Policy and Procedure Manual
 - Program Philosophy
 - Organizational Chart
 - Description of Referral Mechanisms
 - Description of Quality Improvement Programs
 - Specification of Hours of Operation
 - Procedures for Maintenance of Personnel Records
 - Policies for Staff Physical Examinations
 - Procedures for Reporting Abuse
- 3.4(a) Notification to Department of Reportable Events
- 3.5 Description of Fees for Services and Financial Records
- 3.6
 - Participant Care Policies
 - Staffing Based on Acuity Levels
 - Referrals to Other Health Care Providers
 - Emergency Care and Notification of Participant's Relative
 - Health Education
 - Advance Directives
 - Smoking Policy
 - Discharge, Transfer and Readmission
 - Care and Control of Facility Pets
 - Exclusion of Participant due to Communicable Disease
- 3.10 Interpretation Services
- 3.11 Notification of Family and Documentation in Record
- 3.12 Follow-up on Participant Absence
- 3.13 General Records Policies
- 4.1 Policies and Procedures on Participant Rights and Staffing Training on Rights
- 4.2 Delineation of Participant's Rights
- 5.1(c) Participant's Inappropriate Behavior
- 6.1 General Services Provided
- 6.2 Description of Staffing Capabilities
- 6.3 Personnel Policies, Job Descriptions
- 7.2 Qualifications of Director of Nursing
- 7.3 Responsibilities of Director of Nursing Services

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**ADDENDUM TO AFFIDAVIT OF COMPLIANCE
FOR ADULT DAY HEALTH CARE FACILITIES
(Continued)**

- 7.4 Description of Nursing Services
- 7.5 Responsibilities of Licensed Nursing Personnel
- 8.1 Description of Medical Services
- 8.3 Medical Consultant's Responsibilities
- 8.4 Responsibilities of Physicians, Advanced Practice Nurses and Physician Assistants
- 9.1 Description of Pharmacy Services
- 9.2 Medication Administration Policies/Procedures
- 9.3 Description of Pharmacy Reporting Policies/Procedures
- 9.4 Description of Pharmacy Control Policies/Procedures
- 10.2 Qualifications of Food Services Supervisors
- 10.4 Administrator's Responsibilities for Dietary Services
- 10.5 General Requirements for Dietary Services
- 11.1 Description of Rehabilitative Services
- 12.1 Qualification of Social Worker
- 12.2 Description of Social Work Services
- 13.2 Qualification of Activities Director
- 13.3 Description of Activities Services
- 14.17 Written Emergency Plans, Policies, Procedures
Staff Training in Emergency Procedures
- 15.1 Policies for Maintenance of Medical Records
- 15.3 Contents of Medical Records
- 15.4 Medical Records Policies and Procedures
- 16.1 Administrator's Responsibilities to Infection Control
- 16.2 Description of Infection Control Policies/Procedures
- 16.2(c) Policies/Procedures Regarding Flu Vaccination
- 16.2(d) Policies/Procedures Regarding Pneumococcal Vaccination
- 16.2(f) Policies/Procedures Regarding Employee Mantoux Testing
- 16.2(j) 1-8 Comprehensive Infection Control Policies
- 16.3 Description of Employee Health and Examination Procedures
- 16.4 Description of Regulated Medical Waste Policies
- 16.5 Written Housekeeping, Sanitation and Safety Policies
- 16.6 Written Housekeeping, Work Plans and Staff Training
- 17.1 Description of Transportation Services
- 17.2 Written Plan for Security and Accountability during Transport
- 18.1 Description of Quality Improvement Program
- 18.2 Use of Restraints