



VERMONT

CERTIFICATION STANDARDS FOR ADULT DAY SERVICES IN VERMONT

State of Vermont Agency of Human Services
Department of Disabilities, Aging and Independent Living

280 State Drive, HC2 South
Waterbury, VT 05671-2070

Telephone (802) 241-0294
Fax (802) 241-0385

Revised January 2017

TABLE OF CONTENTS

Section I:	Definitions and Goals	2
Section II:	Certification Process	2
Section III:	Governing Body	5
Section IV:	Quality Management	5
Section V:	Staff	6
Section VI:	Personnel Administration	10
Section VII:	Program Policies	12
Section VIII:	Participant Policies	13
Section IX:	Participant Records	21
Section X:	Adult Day Services	24
Section XI:	Nutrition & Food Services	26
Section XII:	Facility	29
Section XIII:	Variances	33
Appendix:	Recommended Daily Meal Patterns	36

I. Definition & Goals of Adult Day Services

- A. **Definition:** Adult day services are community-based non-residential services designed to assist adults with physical and/or cognitive impairments to remain as active in their communities as possible by maximizing their level of health and independence and ensuring their optimal functioning. Adult day centers provide a safe, supportive environment where participants can receive a range of professional health, social and therapeutic services. Adult day services also provide respite, support and education to family members, caregivers, and legal representatives.
- B. Adult day centers shall meet the following goals:
1. Foster respect, dignity, and a sense of well-being for the individual being served.
 2. Respect individual rights, strengths, values, privacy, and preferences, encouraging individuals to direct and participate in their own plan of care and services to the fullest extent.
 3. Promote the individual's optimal level of independence in a community-based setting.
 4. Maintain and, where possible, enhance the individual's present level of functioning as long as possible, preventing or delaying a more restricted life style.
 5. Foster the development and maintenance of social skills and interaction.
 6. Promote support, respite and education services for family members, caregivers, and legal representatives.
 7. Serve as an integral part of the community service network.

II. Certification Process for Adult Day Centers

- A. **Initial Certification:** In order for an adult day center to become certified to provide services through the Department of Disabilities, Aging and Independent Living ("the Department"), the center shall meet the Vermont Standards for Adult Day Services as outlined in this document. Certification by the Department also fulfills the Centers for Medicare and Medicaid Services (CMS) definition of "state certified" in regards to the eligibility criterion for Medicaid beneficiaries. The certification process is as follows:

1. New adult day centers shall inform the Department of their intent to seek

initial certification.

2. The new adult day center shall submit information to the Department to answer the following questions:
 - a. Is there an unmet need for adult day services in the target area and can the demographics of the target area support the project?
 - b. Do the stakeholders in the target area support the proposed program?
 - c. Is local transportation sufficient to get potential attendees to the proposed program?
 - d. What is the proposed budget including income projections?
 - e. Will the program design and proposed space meet the Adult Day Standards?
 3. Upon satisfactory demonstration of unmet need and that the opening of a new Adult Day program will not adversely affect any existing adult day program, the Department shall consult with the Vermont Association of Adult Day Services and schedule a visit for an initial certification.
 4. The Department shall complete a site certification assessment form after the visit, citing standards as "met" or "unmet".
 - a. The initial certification review report shall be based on information received no more than 10 business days from the date of the site visit. This timeframe may be extended by mutual agreement between the Department and the center.
 - b. If all standards are met, the adult day center shall be certified.
 - c. If any standards are unmet, the application for certification shall be denied. The program may bring the unmet standards into compliance and reapply for certification.
 5. Initial certification of new centers shall not be for more than one year.
- B. Maintaining Certification: An adult day center must continue to comply with the Vermont Standards for Adult Day Services for certification to remain in effect.
1. The Department may perform a scheduled and announced site certification review at previously certified adult day centers no more than once a year, but reserves the right to perform an unannounced site visit at any time to verify that the center is operating in compliance with the Standards for Adult Day Services in Vermont.
 2. The annual review report shall be based on information received no more

than 10 business days from the date of the site visit. This timeframe may be extended by mutual agreement between the Department and the agency.

3. The Department shall complete a site certification assessment report after the visit, citing standards as "met" or "unmet" and submit that report to the center within 20 working days after the end of the review.
4. If any Standard is unmet, within 25 working days the adult day center shall develop and submit to the Department a plan of action, including mutually agreed upon timelines for completion, to comply with all of the Standards for Adult Day Services in Vermont. The Department shall respond to the plan of action within 10 working days.
5. If the plan of action is not accepted in full, the adult day center shall submit a revised plan within 15 working days. The Department shall respond to this revised plan within 10 working days.
6. If the revised plan of action is not accepted in full the Department may take one or more of the following actions:
 - a. Suspend Certification. This includes suspension of the center's ability to bill Vermont Medicaid for services.
 - b. Revoke Certification. This includes revocation of the center's status as a Vermont Medicaid provider.
7. The Department may certify centers for up to three years depending on the outcome of the certification review.
 - a. Centers whose review leads to no corrective action requirements and no other significant deficiencies shall be certified for three years.
 - b. Centers whose review identifies only minor deficiencies shall be certified for two years.
 - c. Centers whose review leads to a requirement for a corrective action plan shall be certified for one year.
8. The decision to suspend or revoke certification may be appealed to the Commissioner. The center shall file for an appeal within 10 working days of a notice of suspension or revocation. The Commissioner shall hear the appeal within 45 days of notice from the center. The Commissioner shall issue her or his decision within 30 days of the hearing. The center's certification shall remain in place during the appeal process. These deadlines may be increased if agreed to by both the Department and the center.
9. In the event that a center closes as a result of suspension or revocation of its certification, the Department will work with the center whenever possible to transition participants to another care setting.

10. Current certificate of certification shall be publicly displayed at the adult day center.
11. An announcement stating that the annual site certification assessment is available to the public upon request shall be posted next to the current certificate of certification.

III. Governing Body

- A. An adult day center shall have a governing body.
- B. The governing body shall hold the full legal authority and responsibility for the operation of the adult day center.
- C. A governing body membership list shall be kept on file at the center and shall include the names, addresses, and telephone numbers of the governing body members.
- D. The governing body shall be responsible for developing philosophy and mission statements that reflect the needs of the participants and their family members/caregivers/legal representatives as well as the care and services the center is committed to providing.
- E. The governing body shall meet at least quarterly. For centers which are part of larger organizations, the Adult Day program shall be on the agenda of the full organization's board at least quarterly. Agendas and minutes shall be on file at the adult day center to verify times, content, and attendance for each meeting.

IV. Quality Management

Quality Management is a set of integrated tools and practices used by an organization to maximize its effectiveness, efficiency and performance. Quality management efforts strive to answer three questions: 1) how much are we doing, 2) how well are we doing it, and 3) is anyone better off. [Vermont Act 124](#) and the [Vermont Government Accountability Office](#) provides specific guidance regarding outcomes and performance measures according to the Results Based Accountability framework.

- A. A quality management process shall be in place to assess, monitor, and improve the quality of the program and the services provided on an ongoing basis, including compliance with these Standards, other relevant policies and regulations (for example Choices for Care and Day Health and Rehabilitation Services) and the Outcomes for Adult Day Programs established by the Department.

- B. The quality management process shall include regular reviews of the care of individuals served by the center. This review shall assess the overall functioning of the participant, the continued appropriateness of the current care plan, and changes that need to be made to the care plan.
- C. The quality management process shall include regular reviews of the programs offered by the center including the modification or deletion of existing programs or addition of new programs, implemented as a result of consumer direction or choice, or implementation of best practices.
- D. The quality management process shall include a self-assessment of program alignment with the applicable federal HCBS rules.
- E. The quality management process shall include at least an annual process whereby important stakeholders can provide formal feedback to the center. These stakeholders shall include participants, caregivers and community partners and anyone else the center deems appropriate. The format of this process is left to the discretion of the center so as to allow it to utilize the information obtained from the evaluation to improve programs and the operations of the center. Any results from the process shall be made available for public review.
- F. Participants and family members shall be involved in the quality management process.

V. Staff

The following section applies to persons employed full-time or part-time by the adult day center. For each employee that holds more than one job responsibility, they must adhere to the higher standard of qualification.

- A. There shall be a written, dated job description for each staff position that specifies at least:
 - 1. Qualifications for the job.
 - 2. Job responsibilities.
 - 3. Line of supervision.
- B. An adult day center shall employ staff that meet the following qualifications:
 - 1. Administrator: Job responsibilities of an administrator shall include, but not be limited to fiscal management and development, coordination, supervision, and evaluation of services provided by the adult day center. The administrator shall also be responsible for establishing and

maintaining relations between the center and the larger community and assuring that the center complies with the Standards for Adult Day Services in Vermont. Depending on the organizational structure of the adult day center, the same individual may fulfill the administrator and program coordinator positions. In this case, the individual shall have the minimum qualifications for the administrator.

An administrator shall have the following minimum qualifications:

- a. A Master's Degree with one (1) year supervisory experience and preferably with one (1) year fiscal management experience; OR
 - b. A Bachelor's Degree with 3 years' supervisory experience in a social or health service setting and preferably with one (1) year fiscal management experience; OR
 - c. Comparable technical and human service experience, fiscal management experience, and demonstrated competence as a manager, preferably in a health or human service setting.
2. Program Coordinator: Job responsibilities of a program coordinator shall include, but not be limited to organization, implementation, and coordination of the daily operation of the adult day center in accordance with participants' needs and any mandatory requirements under the direction of the administrator.

A program coordinator shall have the following minimum qualifications:

- a. A Bachelor Degree in health or social services or a related field, with one (1) year supervisory experience in a social or health service setting; OR
 - b. Comparable technical and human service training with demonstrated competence and experience as a manager in a health or human service setting.
3. Registered Nurse (RN): The job responsibility of the RN shall include completing health assessments for all participants, contributing to the development of a written plan of service for each participant/caregiver that is based on abilities and needs as identified in the assessment, evaluating and documenting the ongoing services provided for each participant, providing instruction and supervision to all direct care staff regarding each participant's health care needs and nutritional needs and delegating nursing tasks as appropriate, and practices according to the standards for registered nurses as identified in the Vermont Nurse Practices Act.

The RN shall have the following minimum qualifications:

- a. Vermont Registered Nurse (RN) license

- b. A minimum of 1 year applicable experience. It is preferable that the experience is with elders and/or persons with chronic impairments.
4. Social Worker: Job responsibilities of the care manager/social worker shall include participant/caregiver support, contributing to assessments and plans of service, assisting participants/caregivers to access and utilize community resources, discharge planning, and documentation of services provided.

The care manager/social worker shall have the following minimum qualifications:

- a. An MSW and at least one year of professional work experience OR
 - b. A BSW and 2 years of experience OR
 - c. A current Vermont Registered Nurse (RN) license and 1 year of experience OR
 - d. 2 years of experience in a human service field.
5. Activities Coordinator: Job responsibilities of the staff member(s) providing activities coordination shall include but are not limited to developing and implementing therapeutic activities for both individuals and groups, contributing to assessments and plans of service, and documentation of services provided.

The activities coordinator shall have the following minimum qualifications:

- a. Activity Consultant Certified (ACC) or
 - b. Activity Director Certified (ADC) by the National Certification Council of Activities Professionals (NCCAP) OR
 - c. Have a Bachelor Degree in a related field and one year of experience in developing and conducting activities for the population to be served at the center OR
 - d. comparable technical and human service training with demonstrated competence and experience in developing and conducting activities for the population to be served at the center.
6. Direct Care Worker: The job responsibilities of a personal care attendant shall include assisting with and supervision of Activities of Daily Living (ADLs) in a safe and hygienic manner; with recognition of participants' dignity and right to privacy; and in a manner that encourages the maximum level of independence. (ADLs include bathing, dressing, eating, toileting, transferring, and mobility.)

The adult day center shall set minimum qualifications for direct care workers.

C. Staff Presence

1. Definitions of staff

- b. Administrative staff are those staff who are not actively involved with the participants, are not immediately available to meet participants' needs, but who do provide resources and support to direct service staff, and who may or may not work on site.
- c. Direct service staff are those staff who work on site, are actively involved with the participants, and are immediately available to meet participants' needs.
- d. Dual-role staff are those staff who provide direct services to participants as well as provide resources and support to direct service staff.

2. Staff-participant ratio

- a. During hours of operation, there shall be a sufficient number of responsible persons to safely meet the needs of those participants present, including one full or part-time staff member. The direct services staff-participant ratio shall be a minimum of one to seven.
- b. As the number of participants with functional or cognitive impairments increases or the severity of the impairment increases, the direct services staff-participant ratio shall be adjusted accordingly to meet the needs of the participants.
- c. Paid program consultants and contractors, persons working under agency contract, and volunteers may be included in the direct staff-participant ratio only when they are performing the direct service job tasks and responsibilities defined in a job description and meet the qualifications necessary to fill that position.

3. On-site oversight: A qualified staff member shall be designated to oversee operations of the center in the absence of the person responsible for administration/program coordination.

D. Adult day staff dedication in a shared space

- 1. Any adult day center that shares a building or space with another type of program or service (e.g., senior center) shall have dedicated staff with hours that are committed to the adult day center only.
- 2. Documentation shall be kept to verify which staff are committed to the adult day center and how many hours they work in the adult day center on a daily basis.

E. Paid Program Consultants or Contractors

The adult day center shall assure that all paid consultant or contractors providing direct participant services have been screened by the center for appropriate qualifications and in accordance with the Department's Background Check Policy.

1. Designated center staff shall oversee the services provided to participants in the course of their work with the center.
2. Centers are encouraged to maintain a written contract or letter of agreement on: file at the center for each paid contractor or consultant.

F. Agency Contracts

The adult day center shall maintain a written contract on file at the center with each agency in which at least the following components are included:

1. Responsibilities and/or services to be provided.
2. A statement indicating the estimated time commitment (hours/week, duration) as applicable.
3. Assurance that the agency shall provide persons with the appropriate qualifications or licensure to provide the services outlined in the written contract.
4. Designation of the responsibility for the following to either the agency or the adult day center including compliance with all required Agency of Human Services policies and completion of background checks in accordance with Departmental policy.

VI. Personnel Administration

- A. Written personnel policies shall be adopted and shall be on file at the adult day center.
- B. Documentation shall be on file at the center showing that all staff currently meets the minimum qualifications needed to qualify for their jobs.
- C. An adult day center shall comply with the mandated reporting of abuse, neglect, and exploitation pursuant to Vermont State Law.
- D. The center shall adhere to the Department's Background Check Policy for all individuals who provide direct care to participants. This includes but is not limited

to:

1. Persons employed full-time or part-time by the adult day center.
2. Paid consultants or contractors who provide direct services to participants.
3. Persons working under agency contract who provide direct services to participants.
4. Volunteers who provide unsupervised direct participant services.

E. Orientation Policy

1. An orientation policy shall be developed and implemented for the following:
 - a. Persons employed full-time or part-time by the adult day center.
 - b. Paid consultants or contractors who provide direct services to participants.
 - c. Persons working under agency contract who provide direct services to participants.
 - d. Volunteers who provide unsupervised direct participant services.
2. Documentation of orientation training provided to the individuals listed above shall be on file at the adult day center.

F. Training Policy

1. A training policy shall be developed and implemented for all persons employed full-time or part-time by the adult day center. Staff shall possess skills, education, and experience to serve the population in a manner consistent with the philosophy of the adult day center.
2. Amount of staff training
 - a. For each direct service staff; a center shall assure a minimum of 12 hours of training per year that will build his/her capacity to provide quality adult day services.
 - b. For administrative staff; a center shall provide training as necessary.
 - c. For each dual-role staff; a center shall assure a minimum of

12 hours of training per year and additional administrative training as necessary.

3. Documentation of staff training shall be kept on file at the adult day center to verify the topic, the number of hours, and the attendance.

VII. Program Policies

An adult day center shall comply with all applicable State and Federal laws and regulations, including all applicable Vermont State Agency of Human Services policies. In addition, an adult day center shall develop, implement, and have the following policies on file at the center reflecting current practice. If the adult day center is part of a larger organization, adult day specific policies shall be in place. These policies shall be made available to the public upon request.

- A. Smoking Policy: Smoking by staff and participants shall not be allowed in any buildings where participants might go. The center shall establish a smoking policy for staff and participants that is in accordance with Vermont state law. This policy shall take into account the safety of both the participant who smokes and those who do not as well as agency staff and be posted in a public place in the adult day center.
- B. Infection Control Policy: An infection control policy that outlines how the center will provide a safe, sanitary, and comfortable environment and to help prevent the development and transmission of disease and infection, including blood borne pathogens and using universal precautions.
- C. Emergency Evacuation Plan: An emergency evacuation plan shall be posted in a public place in the adult day center
- D. Conflict of Interest Policy: Conflict of interest is a situation in which someone in a position of trust has competing professional or personal interests. Such competing interests can make it difficult to fulfill his or her duties impartially or effectively. A conflict of interest exists even if no unethical or improper act results from it. A conflict of interest can create an appearance of impropriety that can undermine confidence in the person, profession or system. The policy shall include how participants or their representatives may report a concern regarding conflict of interest.
- E. Records Retention Policy.
- F. Confidentiality Policy: A policy regarding the confidentiality of participant records and protected health information.
- G. Visitor policy. A policy that complies with a participant's right to have visitors at any time and describes the process for potential modifications to said participant's rights.

VIII. Participant Policies

An adult day center shall comply with all applicable State and Federal laws and regulations, including all applicable Vermont State Agency of Human Services policies. In addition, an adult day center shall develop, implement, and have the following policies on file at the center reflecting current practice. The policies in this section and any subsequent revisions made to them shall be submitted to and approved by the Department. Upon enrollment, every participant and/or his/her family member/caregiver/legal representative shall be informed of and provided a copy of all of the policies in this section in a format and language they can understand. A signed acknowledgement of the receipt of these policies shall be on file in each participant's file at the adult day center. These policies shall be made available to the public upon request.

- A. Non-discrimination Policy: A non-discrimination policy shall state that no individual shall be excluded from participation in or be denied the benefits of the adult day center by reason of age, disability, race, gender, sexual orientation, religion, or national origin.
- B. Participant Rights Policy: A participant's rights policy shall include, but not be limited to, the rights outlined in this section. A participant bill of rights shall be posted conspicuously in a public place in the adult day center.
1. The right to be treated as an adult, with respect and dignity.
 2. The right to direct their person-centered plan to the maximum extent possible and to choose who may be included in that process.
 3. The right to participate in a program of services and activities that promotes positive attitudes about one's usefulness and capabilities.
 4. The right to participate in a program of services designed to encourage learning, growth and awareness of constructive ways to develop one's interests and talents.
 5. The right to be encouraged and supported in maintaining one's independence to the extent that conditions and personal circumstances permit, and to be involved in a program of services designed to promote personal independence.
 6. The right to be cared for in an atmosphere of sincere interest and concern in which needed support and services are provided in accordance with the individual plan of service.
 7. The right to privacy and confidentiality.

8. The right to have visitors at any time.
9. The right to be free from chemical restraints and unnecessary mechanical restraints.
10. The right to self-determination to the maximum extent possible through informed consent.
 - a. Self-determination is defined as a participant's right to choose the lifestyle, residence, medical care, and support services which best meet his/her individual needs and wishes.
 - b. Informed consent is defined as a process by which a participant or a participant's legal representative makes choices or decisions; including the right to accept or refuse services.
 - i. An adult day center shall support the participant or the legal representative in making choices or decisions by providing information about the possible options, and the potential consequences of these options.
 - ii. If the Adult Day is taking direction from a legal representative, there must be a copy of the legal documentation in the individual's file, (e.g. Guardianship or Power of Attorney documents).
 - iii. To participate in this process, the participant and (or the participant's legal representative must understand the potential consequences of the decision, free from any coercion, and fully informed about the options and their potential consequences.
 - iv. When a participant is capable of making informed choices, an adult day center shall support his/her right to be involved in decisions about the types and volumes of services he/she will receive.

C. Enrollment Policy: An enrollment policy shall include the following:

1. Participant eligibility criteria.
2. Prioritization Policy
 - a. The prioritization policy shall describe how a center will prioritize requests for hours of service from new enrollees and/or to enrolled participants who have requested additional hours.
 - b. Adult day centers shall make every reasonable effort to serve first those applicants most at risk of institutionalization, while balancing the needs of other participants and the ability of the center to meet the applicant's needs.

- c. The prioritization policy may not discriminate based on age, disability, race, gender, sexual orientation, religion, or national origin. (See non-discrimination policy in section A above.)
 - d. Maintain a waiting list as appropriate, including the date of placement on the waiting list and anticipated source of reimbursement.
3. Procedure for enrolling a new participant.
- D. Advance Directives Policy: An advance directive policy shall state that, upon admission, an adult day center will explain the participant's right under state law to formulate, or not to formulate, an advance directive.
- E. Medical Emergency Policy: A medical emergency policy shall be posted in a prominent place which is readily visible to staff. The medical emergency policy shall include:
- 1. The requirement to call 911 in case of a medical emergency for all individuals who do not have a Do Not Resuscitate (DNR) document on file with the Center
 - 2. The requirement for the center to have a portable basic emergency information sheet and release of information for the hospital and ambulance on file for each participant that includes a physician's DNR order or Clinician's Orders for Life Sustaining Treatment (COLST) form, as appropriate.
 - 3. The requirement that the portable basic emergency information sheet should contain an identifying photo, a release of information for the hospital and ambulance shall accompany each participant when s/he leaves the center for any reason, including but not limited to a trip to the hospital or any center-sponsored event.
- F. Medication Management Policy: An adult day center shall have the capacity to administer medications to their participants. A medication management policy shall describe a center's medication management practices with due regard for state requirements including the Vermont State Nurse Practice Act. At a minimum, the policy shall cover the following:
- 1. Staff shall only assist with or administer prescription medication or over-the-counter pain medication for which there is a physician's written order. For the first day a participant is at the center, staff may administer medication on the basis of a documented verbal order from the prescribing provider given to a qualified nursing staff member of the center. The center staff may not continue

to administer medication based on a verbal order without a written order for longer than one calendar week.

2. An adult day center shall provide medication management under the supervision of a registered nurse or a licensed practical nurse under the direction of a registered nurse.
3. An adult day center shall ensure that a participant's medications are reviewed by a registered nurse upon enrollment, every six months, or more frequently as significant changes occur to ensure that all participant medications have either a supporting diagnosis or health problem.
4. All medicines shall be labeled in accordance with currently accepted professional standards of practice.
5. A participant may self-administer medication; however, the medication must be stored by the adult day center.
6. All prescription and over the counter pain medications that participants bring to the program are:
 - a. Stored in an area specifically designated for medications.
 - b. Stored in a secure area
 - c. Stored in an area separate from the program's activity areas.
 - d. Stored in an area that has appropriate temperature control.
7. An adult day center shall have written procedures for disposing of outdated or unused medication, including designation of a person or persons with responsibility for disposal.
8. If a participant requires medication administration, unlicensed staff may administer medications under the following conditions:
 - a. There is a physician's written order on file.
 - b. A registered nurse has conducted a nursing assessment.
 - c. A registered nurse or a licensed practical nurse under the direction of a registered nurse has properly documented the delegation of administration of specific medications to designated staff for designated participants.
 - d. A registered nurse or a licensed practical nurse under the direction of a registered nurse retains responsibility for the

proper administration of medications, including:

- i. Teaching designated staff proper techniques for medication administration and documentation and providing appropriate information about the participant's condition, relevant medications, and potential side effects.
 - ii. Establishing a process for routine communication with designated staff about the participant's condition and the effect of medications, as well as changes in medications.
 - iii. Assessing the participant's response to the medication and communicating with the medical personnel responsible for prescribing the medication as appropriate.
 - iv. Monitoring and evaluating the designated staff performance in carrying out the nurse's instructions.
9. An adult day center shall establish procedures for documentation of medication. At a minimum, this shall include:
- a. Documentation of the medication administration task that has been delegated and the training provided by a registered nurse or an LPN working under the direction of a Registered Nurse to an unlicensed staff member for a particular participant, including the signatures of The LPN, and/or the Registered Nurse and the unlicensed staff member to whom the task has been delegated.
 - b. Documentation of all medications administered, signature of the individual administering the medication, and (if applicable) interventions taken to prevent adverse outcomes.
 - c. Documentation of all instances of refusal of medications.
 - d. Documentation of all incidents of medication errors and interventions taken to prevent adverse outcomes.

G. Restraint Policy: A restraint policy shall acknowledge the participant's right to be free from restraints and define the rare circumstances in which an adult day center would use mechanical or chemical restraints. The policy shall include regular review of any restraints and the right of the individual to appeal their use via the center's grievance procedures. The policy also shall be in compliance with Vermont's adult abuse statute, citation 33V.S.A. section 6911 in accordance with Vermont State Law.

1. When any restraints are used, the center shall document

- a. The reason(s) for their use.
 - b. The fact that the participant is monitored on a regular basis to assure
 - i. The participant is safe in the restraints and
 - ii. The restraint is still necessary.
2. If a chemical restraint is used as a PRN to address behavioral issues, the center must also include in the participant's record a plan developed in advance describing the circumstances that will lead to the administration of the medication.

H. Critical Incident Policy: A critical incident policy shall include, but is not limited to:

- 1. Identification of critical incidents, including, but not limited to:
 - a. Events that adversely affect a participant's physical or emotional well-being.
 - b. Alleged cases of abuse, neglect, or exploitation.
- 2. Prompt reporting of such incidents to:
 - a. An identified person(s) within the adult day center
 - b. Family member/caregiver/legal representative as appropriate.
 - c. Adult Protective Services or the Department of Children and Families as appropriate.
- 3. Recording the essential facts of the incident, including the results of the incident and any actions which might have prevented the incident.
- 4. Establishing an action plan that includes the adult day center's immediate effort to address the incident and the long-term effort to reduce risk in the future.
- 5. Reporting of critical incidents to the Department in a timely and thorough manner as may be prescribed by the Department as defined by the Department critical incident policy. This will include notification to the Department.

I. Emergency Closing Policy: An emergency closing policy shall outline how the adult day center will announce and/or contact participants when the center closes due to bad weather, emergency situations, etc.

J. Grievance Policy: A grievance policy for resolving participants' concerns or complaints, including conflict of interest, shall adhere to procedures appropriate to the consumer's funding source* and include, but not be limited to:

1. Process and time frames for each step of the grievance process, including a final appeal to the Board of Directors.
2. Responses to participants' grievances shall be made in writing.
3. A written record shall be kept on each grievance.

*Note that Choice for Care, Day Health and Rehabilitation Services and the Veterans Administration may have different grievance policies.

K. Involuntary Discharge Policy: Involuntary discharge of a participant is the cessation of adult day services when the participant or the participant's family member/caregiver/legal representative has not requested or consented in advance to the cessation. An involuntary discharge policy shall include, but not be limited to:

1. An involuntary discharge may occur only when:
 - a. The participant's care needs exceed those which an adult day center is certified to provide; or
 - b. An adult day center is unable to meet the participant's assessed needs; or
 - c. The participant presents a threat to self or to other participants or staff; or
 - d. The participant has failed to pay for services in accordance with his/her signed billing agreement.
 - e. The participant has not paid his or her patient share obligation to the center when it is owed to the center.
2. In the case of an involuntary discharge, an adult day center shall notify the participant and/or a family member/caregiver/legal representative and the Department of the specific reasons for the discharge in writing at least thirty (30) days prior to the discharge;
 - a. Include a statement that the participant may appeal a center's decision to the Department within fifteen (15) days of written notification;
 - b. Include a statement in the written notice that the participant may continue to attend the adult day center during the appeal; and

- c. Include a copy of the center's grievance policy in a format they can understand.
 - d. Include the name, address, and phone number of the Vermont Senior Citizens Law Project or Vermont Protection and Advocacy or the Disability Law Project, as appropriate to the participant being involuntarily discharged.
 3. An immediate involuntary discharge with less than a thirty (30) day written notice may occur only when:
 - a. The participant's physician documents that the involuntary discharge is an emergency measure necessary for the health and safety of the participant or other participants; or
 - b. A natural disaster or emergency necessitates the evacuation of participants from the center; or
 - c. The participant presents an immediate threat to the health or safety of self or others.
 4. In any case of immediate involuntary discharge, the adult day center shall:
 - a. Notify the Department on the same or next business day.
 - b. Notify the participant and/or a family member/caregiver/legal representative of the specific reasons for the discharge in writing on the same or next business day.
 - i. Include a statement that the participant may appeal a center's decision to the Department of Disabilities, Aging and Independent Living within fifteen (15) days of written notification; and
 - ii. Include a copy of the center's grievance policy in a format they can understand.
 - iii. Include the name, address, and phone number of the Vermont Senior Citizens Law Project or Vermont Protection and Advocacy or the Disability Law Project, as appropriate to the participant being involuntarily discharged.

IX. Participant Records

- A. Upon written or oral request, a complete copy of the contents of a participant's file, including archived material, shall be made available for review to the participant and/or the person(s) designated by the participant or his/her legal representative. Current records shall be made available within three (3) working days. Archived materials shall be made available within 10 working days.
- B. Complete participant files shall be made available to Department staff upon written or oral request. This shall include archived materials, if requested.
- C. All contents of a participant's file shall be typed or legibly handwritten in ink, dated, with the name of the recording person with his/her title indicated. Electronic signatures by staff are acceptable for all documentation as long they clearly indicate who created the document and when it was created.
- D. The adult day center shall maintain records for each participant that include, but are not limited to, the following:
 - 1. Intake: An intake form shall be completed with the participant and/or a family member/caregiver/legal representative prior to the participant attending the center. The intake form shall include enough information about the participant to ensure that the program can safely and appropriately meet his/her needs while at the adult day center. The intake form may be the center's form or the form designated by the Department.
 - 2. Medical information:
 - a. If a participant has a physician or a primary care provider, the center shall submit a written request asking for a report reflecting the current health status of the participant within thirty (30) days of the start of adult day services and shall include, but not be limited to, the following:
 - i. Findings or diagnosis, including communicable diseases.
 - ii. Dietary needs.
 - iii. Physician orders for treatments.
 - iv. Medications.
 - v. Allergies.
 - vi. Immunization record; if available record to include tetanus and flu shot information.

- vii. Discharge summary, if the individual has been hospitalized within the last three (3) months, if available.
 - b. The written request for a follow-up report shall be resubmitted to the physician or primary care provider within thirty (30) days of the anniversary of the initial report, and more frequently as significant changes occur.
- 3. Signed receipt of policies: A signed acknowledgement of receipt of the policies outlined in Section X.
- 4. Assessment: The assessment form designated by the Department shall be completed for each participant at reasonable times and locations of convenience to the individual. Additional assessment data may be collected as appropriate to gain a thorough understanding of the participant.
 - a. Initial assessments shall be completed within the first thirty (30) sessions of participation at the adult day center or within ninety (90) days of enrollment, whichever occurs first.
 - b. Reassessments shall be completed within thirty (30) days of the anniversary of the initial assessment, and whenever significant changes occur.
 - c. The health section of the assessment may only be completed by a registered nurse (RN) or a licensed practical nurse (LPN). The health section must be signed by the RN who completed it. If an LPN completed the health section, a RN must review and sign it.
- 5. Plan of Service: The process for developing the adult day plan of service is an inclusive, person-centered process that enables the adult day center to serve the participant to the best of its ability. The initial plan of service shall be written within ninety (90) days of the beginning of adult day services and shall include:
 - a. Focus Areas: The focus areas are those areas of the assessment in which issues have been identified that need to be addressed with written goals.
 - b. Goals: Goals describe the participant-centered outcome(s) that will be achieved because service is provided. Whenever possible, goals shall be stated in measurable terms.
 - c. Actions: Actions describe the activities the staff or others (including the participant) will carry out to assist the participant and/or family

member/caregiver to achieve the goals.

6. Six-month Review Verification: Documentation that a review of each participant's assessment, plan of service, and progress notes has occurred at least once every six months.
7. Modifications: Modifications are any person-specific exceptions to the required person-centered planning process and participant rights. (see section X.B.) Modifications must:
 - a. Identify a specific and individualized assessed need for modification
 - b. Document the positive interventions and supports used prior to any modifications to the person-centered service plan
 - c. Document less intrusive methods of meeting the need that have been tried but did not work
 - d. Include a clear description of the condition that is directly proportionate to the specific assessed need
 - e. Include a regular collection and review of data to measure the ongoing effectiveness of the modification
 - f. Include established time limits for periodic reviews to determine if the modification is still necessary or can be terminated
 - g. Include informed consent of the individual
 - h. Include an assurance that interventions and supports will cause no harm to the individual
8. Monthly Progress Notes: At a minimum, a monthly progress note shall be maintained and shall:
 - a. reflect a review of the entire adult day Plan of Service
 - b. contain narrative notes reflecting any relevant information such as progress, changes in goals or discontinuances of goals, and
 - c. document the ongoing effectiveness of any modifications to the person-centered plan.
9. End of Service: As appropriate, an adult day center shall arrange for the

participant to receive services from other organizations, whether a voluntary or involuntary discharge at the end of service. The adult day center shall consult with and obtain permission from the participant and/or the family member/caregiver/legal representative before making appropriate community service referral(s). The adult day center shall document any end of service plans made for the participant.

10. Permission to Release Information: Completed permission for release of information using the form authorized by the Department.
 - a. The permission for release of information shall be signed and dated by the participant or his/her family member/caregiver/legal representative within thirty (30) days of the start of adult day services, (or sooner if needed) on the same schedule as the assessment.
 - b. The permission for release of information shall be signed and dated annually, within thirty (30) days of the anniversary of the initial review, on the same schedule as the assessment.
11. Attendance: Accurate and complete documentation of daily attend
 - a. Daily attendance records shall document:
 - i. The date of attendance
 - ii. The accurate time in and time out for each participant. The time in and time out may be rounded up or down to the nearest quarter hour.
 - iii. Daily attendance does not include time spent during transportation to or from the center.
 - b. Billing records shall reflect attendance as shown by the dates and units of attendance on the daily attendance records and shall comply with the attendance limits approved by the funding source.
12. Funding Sources: All documentation as required by all applicable funding sources.
13. Variances: Any variance requests made to the Department, including the Department's response.
14. Correspondence: Correspondence with family members, caregivers, legal representatives, or other community agencies/primary care providers.
15. Incident Reports: Incident reports as indicated by the center's and the Department's policies.
16. Termination Notices. Notices and documentation related to termination of services.

X. Adult Day Services

Based on an established method for assessing the needs, competencies, abilities and interests of participants, a number of therapeutic activities and services shall be provided.

- a. Health Coordination & Chronic Disease Management: A service provided to each participant and monitored by the staff RN and includes:
 - i. A written health assessment
 - ii. Development of a written plan of service for each participant that is based on abilities and needs as identified in the assessment, evaluating and documenting the ongoing services provided for each participant,
 - iii. Health monitoring
 - iv. Health education
 - v. Instruction and supervision to all direct care staff regarding each participant's health care needs and nutritional needs,
 - vi. Delegating nursing tasks as appropriate, and practices according to the standards for registered nurses as identified in the Vermont Nurse Practices Act.
 - vii. Provision of health oversight and activities that help participants and families to understand chronic diseases and health conditions. This involves encouraging participation in activities and interventions to achieve an ongoing, reasonable quality of life.
 - viii. Depending on the level of need, health education and counseling shall be provided or arranged for at different levels of intensity for participants and/or their family members/caregivers/legal representatives.

- b. Direct Care: Assistance with and supervision of activities of daily living (ADL), supervised by an RN and/or LPN. Direct care is provided in a safe and hygienic manner; with recognition of participants' dignity and right to privacy; and in a manner that encourages the maximum level of independence. ADLs include bathing, dressing, eating, toileting, transferring, and mobility.

- c. Social Work Services: Support provided by a qualified professional to participants and their family/caregivers/legal representatives including:
 1. assisted in learning about and accessing community resources for financial, social, personal, recreational, advocacy, educational, health, caregiver support, and other services,
 2. discharge planning, and
 3. documentation of services provided.

- d. Therapeutic Activities: Services coordinated and supervised by a qualified professional, including developing and implementing therapeutic activities for both individuals and groups, contributing to assessments and plans of service, and documentation of services provided intended to, remediate or prevent functional impairments, enhance

function, reduce individual risk factors, and optimize overall health, fitness & well-being.

Activities shall be provided in the following manner:

1. Program activities shall be available to all program participants,
 2. A structured program plan of activities shall be available and posted daily to assist with orientation.
 3. Participants shall be encouraged to take part in activities, but may choose not to do so or may choose another activity.
 4. Participants shall be allowed time for rest and relaxation and to attend to personal and health care needs.
 5. Activity programming shall be available during all hours of operation.
 6. Programming shall take into consideration individual differences in age, health status, sensory deficits, life-style, ethnicity, religious affiliation, values, experiences, needs, interests, abilities, and skills by providing opportunities for a variety of types and levels of involvement.
 7. Programing shall provide a balance of purposeful activities to meet the participants' interrelated needs and interests (social, intellectual, cultural, economic, emotional, physical, and spiritual).
 8. Programming shall be designed to promote personal growth and enhance the self-image and/or to improve or maintain the functioning level of the participants to the extent possible within the setting.
 9. The environment shall be conducive to facilitating activities and participants shall be assisted in maintaining maximum mobility and independence.
- e. Nutrition & Food Services: At least one meal must be offered per day. Each meal must meet at least one third of the Recommended Daily Allowance (RDA) established by the Food and Nutrition Board of the National Research Council of the National Academy of Sciences and comply with the Dietary Guidelines of America and safe food handling and storage standards. See detailed standards in section XII.
- f. Transportation: When feasible, the center shall provide, formally arrange or contract for transportation to enable participants to attend the center.

XI. Nutrition and Food Services

An adult day center shall plan menus and prepare food according to the nutrition and food service standards outlined below.

- a. Monthly Menus
 - i. When meal preparation occurs on-site, monthly menus shall be planned, written and posted at least one (1) week prior to the first of the month, or sooner as necessary in order to have the food supplies ordered and available

to produce the menu as written.

- ii. Menus shall be reviewed by a Dietician unless the center is enrolled in the Child and Adult Care Food Program which emanates from the Department of Education, or has Veterans Administration certification or receives meals from the Meals on Wheels program.
3. When meals are catered, the monthly menu shall be planned, written and posted at least one (1) week prior to the first of the month.
4. The current monthly menu shall be posted in a place accessible and visible to all participants and other interested parties.
5. The center shall follow the written, posted menus. If a substitution must be made, the substitution shall be recorded on the primary menu on file or a menu substitution sheet.
6. The center shall keep menus, including any substitutions, for the previous 12 months on file and have them available for review by any authorized state official.

b. Nutritional Standards

- i. Each meal served must provide at least one-third of the Recommended Dietary Allowances (RDA) as established by the Food and Nutrition Board of the National Research Council of the National Academy of Sciences **and** comply with the Dietary Guidelines for Americans.
- ii. Special diets shall be accommodated.
- iii. Sufficient food supplies: A plan for emergency food service shall include three days of non-perishable supplies shall be on hand.

C. Suggested Meal Plan

The guide included in Appendix A provides the basis for meal planning. Meals planned according to this guide will help ensure that menus meet the standards as outlined in Section XII. A & B. In cases of a participants advanced age and very light activity, centers may consider individual needs with respect to portion size and frequency of eating but shall not compromise overall nutrient intake. In addition to the suggested food servings, fluids shall be encouraged throughout the day.

D. Food Service

1. Each center shall provide participants with nutritionally balanced, attractive

and satisfying meals in accordance with these standards. Meals shall be served at the appropriate temperature and at normal meal hours. Texture modifications will be accommodated as needed.

2. Nourishing snacks shall be available to participants between meals.
3. Participants shall be allowed an adequate amount of time to eat each meal at an unhurried pace.
4. Participants shall be encouraged to feed themselves, using adaptive equipment (utensil, dishes) where appropriate.
5. Participants shall be provided with assistance in eating, as needed, by properly trained staff.
6. Participants shall be offered an alternative to the planned meal upon request. The adult day center shall determine what can be reasonably accommodated.

E. Safe Food Handling

1. Each center shall procure food from sources that comply with all laws relating to food and food labeling. Food shall be safe for human consumption, free of spoilage, filth or other contamination. All milk products served and used in food preparation shall be pasteurized. Cans that are outdated or have dents, swelling or leaks shall be rejected and kept separate until returned to the supplier.
2. All perishable food and drink shall be labeled, dated and held at proper temperatures:
 - a. At or below 40 degrees Fahrenheit.
 - b. At or above 140 degrees Fahrenheit when served or heated prior to service.
3. All work surfaces shall be cleaned and sanitized after each use. Equipment and utensils shall be cleaned and sanitized after each use and stored properly.
4. The center shall ensure that food handling and storage techniques are consistent with safe food handling practices.

F. Food Storage and Equipment

1. All food and drink shall be stored so as to protect it from dust, insects, rodents, overhead leakage, unnecessary handling and all other sources of

contamination.

2. Areas of the center's building used for storage of food, drink, equipment or utensils shall be constructed to be easily cleaned and shall be kept clean.
3. All food service equipment shall be kept clean and maintained according to manufacturer's guidelines.
4. All equipment, utensils and dinnerware shall be in good repair. Cracked or badly chipped dishes and glassware shall not be used.
5. Single service items, such as paper cups, plates and straws, shall be used only once. They shall be purchased and stored in sanitary packages or containers in a clean dry place and handled in a sanitary manner.
6. Access to the kitchen shall be limited to individuals involved with the food service. Exceptions may be granted at the discretion of the food service manager.
7. Doors, windows and other openings to the outdoors shall be screened against insects, as required by seasonal conditions.
8. All garbage shall be collected and stored to prevent the transmission of contagious diseases, creation of a nuisance, or the breeding of insects and rodents, and shall be disposed of at least weekly. Garbage or trash in the kitchen area must be placed in lined containers with covers.
9. Poisonous compounds (such as cleaning products and insecticides) shall be labeled for easy identification and shall not be stored in the food storage area unless they are stored in a separate, locked compartment within the food storage area.

XII. Facility

A. Primary Adult Day Center Sites

1. A primary adult day center site is the identified main site for the adult day provider organization that provides the full range of services and hours of operation in a given region.
2. Adult day services shall be offered to participants at a minimum of five (5) days per week, nine (9) hours per day at the primary adult day center site.

B. Satellite Adult Day Center Sites

1. For any current Adult Day provider wishing to obtain state certification and to receive either State or federal funding, a written request shall be submitted to the Department seeking approval to operate any satellite locations prior to opening and providing adult day services.
2. Prior to opening and providing adult day services, an adult day center shall demonstrate that the proposed satellite operation is in compliance with the Standards for Adult Day Services in Vermont including standards around unmet needs (II.A.2 and 3).

C. Accessibility

Certified adult day centers shall be designed or remodeled to accommodate individuals in conformance with the requirements of Section 504 of the Rehabilitation Act of 1973, and 28 CPR, Part 36 implementing Title III of the Americans with Disabilities Act, P.L. 101-336, and any applicable Vermont or local accessibility requirements.

D. Renovations & Additions

Prior to making renovations or additions that will involve structural changes, the adult day center shall:

1. Consult the Department.
2. Obtain all necessary town, city, or state permits (including the Department of Labor and Industry) prior to structural renovations or additions being made or obtain documentation stating that approval of the work is not necessary **and** have one of the documents available for review.

E. Health and Safety

1. The adult day center's building shall be designed, constructed and maintained in compliance with all applicable health and safety laws and regulations.
2. There shall be sufficient personnel working on a regular schedule and in conformity with generally accepted standards to ensure that the building is clean, sanitary and safe at all times.
3. Certified adult day centers shall meet all of the applicable fire safety and building requirements of the Department of Public Safety and shall be inspected annually.
 - a. For those adult day centers that are inspected annually by the

Department of Veterans Affairs for Life Safety Code compliance, that survey will be accepted as the annual review as long as a copy of the review (and, as necessary, an accepted plan of corrective action) is provided to the Department. Those centers that are inspected by the Department of Veterans Affairs but that inspection occurs less than annually shall demonstrate their meeting of this standard through the procedures described in parts b. or c. of this section.

- b. For those adult day centers that undergo a comprehensive health and safety inspection annually by another public review entity, that survey will be accepted as the annual review as long as a copy of the review (and, as necessary, an accepted plan of corrective action) is provided to the Department.
- c. For those adult day centers not already being inspected in one of the two ways outlined above, a current completion of the Center's own safety checklist shall meet the requirements of this section.

F. Environment

1. A center shall have a sign outside clearly identifying the name of the adult day center.
2. An adult day center shall be designed and furnished with consideration for the special needs and interests of the people to be served and the activities and services to be provided.
3. Lighting in all areas shall be adequate to support the safety of participants and facilitate the activities of the program.
4. Noise levels shall be controlled.
5. Heating, cooling and ventilation system(s) shall afford comfortable conditions for participants.
6. There shall be sufficient furniture to accommodate the needs of all participants. Furniture and equipment to be used by participants shall be selected both for comfort and safety, and to enhance personal independence of participants.
7. Where possible, a covering shall be provided over one outside entrance to protect participants from inclement weather.
8. A telephone shall be available for participants.
9. The center shall make arrangements as necessary for the security of the participants and their possessions in the facility.

10. When necessary, arrangements shall be made with local authorities to provide safety zones for those arriving by motor vehicles and adequate traffic signals for pedestrian crossing
11. Emergency first-aid kits shall be available in the program area.

G. Location and Space

1. In addition to complying with all applicable building codes and zoning requirements, the selection of a site shall be based, to the extent possible, on the needs of potential participants, and shall include consideration of the following factors:
 - a. Demographic information and projections
 - b. Greatest accessibility to the communities from which participants are drawn
 - c. Proximity to other services and facilities
 - d. Convenience of public or private transportation
 - e. Safety and security of participants and staff.
2. When possible, the center shall be located at ground level.
3. An adult day center may share a facility with another type of program or service (e.g. senior center), however the adult day center is required to have separate program space.
4. The center shall have sufficient space to accommodate the full range of programs activities and services including:
 - a. At least sixty (60) square feet of program space for each participant.
 - i. It is strongly recommended that centers serving a significant number of people with cognitive impairments or those who use adaptive equipment for ambulation or medical care provide eighty to one hundred (80 – 100) square feet per participant.
 - ii. In determining adequate square footage, only those activity areas commonly used by participants are to be included. Dining and kitchen areas are to be included only if those areas are used by participants for activities other than meals. Reception areas, storage areas, offices, restrooms, passageways, treatment rooms, service areas, or specialized spaces used only for therapies are not to be included when calculating square footage.

- b. Sufficient flexibility and adaptability for large and small groups, and for individual activities and services.
- c. Sufficient private office space to permit staff to work effectively and without interruption.
- d. Adequate storage space.
- e. At least one toilet for every 10 participants, easily accessible from all areas.
- £ Areas separate from program space that provides sufficient space for a rest area, for special therapies, for privacy, and for isolating participants who become ill.
- g. A sufficient parking area for the safe daily arrival and departure of participants.
- h. Outdoor space that is used for outdoor activities that is safe, accessible to indoor areas, and accessible to those with a disability.
- i. Adequate space (such as closets and separate lockers), for outer garments and private possessions.
- j. Adequate dining, kitchen and storage space shall be available for meal and snack service as outlined in Section XI.

XIII. Variances

An adult day center may request a variance to any of these standards by contacting the Department.

- a. A variance may be granted if:
 - i. Strict compliance would impose a substantial hardship on the participants or the service providers.
 - ii. The goal of the standard will otherwise be met.
 - iii. The variance will not result in less protection of the health, safety, and welfare of the participant.
 - iv. The variance will be in compliance with applicable state and federal regulations.

- b. The variance request shall include:
 - i. The standard for which a variance is being requested.
 - ii. An explanation of why the standard cannot be met by the center.
 - iii. The extent to which the center will be able to meet the standard.
 - iv. The timeline in which the center will come in to compliance with the standard, if applicable.
- C. The Department shall respond in writing within sixty (60) days of receiving the variance request.

Appendix

Recommended Daily Meal Patterns for Breakfast and Lunch/Supper

Food Group	Breakfast
Milk (cup)	3/4
Fruit or non-starchy vegetables (cup)	<i>Yi</i>
Grain/bread (oz. equivalent)	2
AND	
Lean meat or meat alternative (oz. equivalent)	1
OR	
Grain/bread (oz. equivalent)	3
Lean meat or meat alternative (oz. equivalent)	0

Lean meat or meat alternates should be served 3 days per week at breakfast. On each of the days without meat or meat alternates, serve an additional 1 oz equivalent of bread/grains.

Food Group	Lunch/Supper
Milk or yogurt (cup)	1
Fruit (cup)	<i>Yi</i>
Vegetable (cup)	1
Grain/bread (oz. equivalent)	2
Lean meat or meat alternative (oz.)	2

At least half of the grain/bread must be whole grains. Other grain/bread must be enriched.

The number of cups indicated for vegetables represents the total served. Offer two different types of vegetables per meal. Serve dark green vegetables at least twice per week, orange vegetables at least twice per week, starchy vegetables no more than twice per week, and other vegetables at least three times per week.

Milk or yogurt: low fat. Yogurt with less than 17 grams of total sugar per 1 cup serving.

Fruit: apples, apricots, avocado, bananas, blueberries, cantaloupe, cherries, fruit cocktail, grapefruit, grapes, honeydew, kiwi fruit, mangoes, nectarines, oranges, peaches, pears, papaya, pineapple, plums, prunes, raisins, raspberries, strawberries, tangerines, watermelon

Dark green vegetables: Bok choy, broccoli, collard greens, dark green leafy lettuce, kale, mescaline, mustard greens, romaine lettuce, spinach, turnip greens, watercress.

Orange vegetables: Acorn squash, butternut squash, carrots, Hubbard squash, pumpkin, sweet potatoes.

Starchy vegetables: Corn, green peas, lima bean, potatoes.

Other vegetables: Artichokes, asparagus, bean sprouts (cooked or canned only), beets, Brussel sprouts, cabbage, cauliflower, celery, cucumbers, eggplant, green beans, green or red peppers, iceberg lettuce, mushrooms, okra, onions, parsnips, tomatoes, tomato juice, vegetable juice, turnips, wax beans, zucchini

