

Facility:
 Date:
 Surveyor:

Training Tasks List
 Intermediate Care Facility/Individuals with Intellectual Disabilities

Directions: Please fill out all information as appropriate.

Task	No Exposure	Observed and/or Needs More Experience	Performed with Supervision	Competent with Minimal supervision
Pre-survey review				
Entrance conference				
Sample selection				
Review of facility's abuse, neglect, and mistreatment system				
Review criminal background checks				
Review incident reports				
Individual observations of clients and/or staff interactions				
Documentation of findings: date, time, location of observations				
Documentation of behavior interactions				
Client interviews				
Medication pass				
Environment: Observation of areas of facility				
Check hot water temperatures				
Dietary assessment				
Record review				
Team assessment of compliance				

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Training Tasks List
Intermediate Care Facility/Individuals with Intellectual Disabilities

Task	No Exposure	Observed and/or Needs More Experience	Performed with Supervision	Competent with Minimal supervision
Writing deficiencies				
Exit conference				
Review of facility Forms (1513, 3070-G, 3070H)				
Team leading experience				
Entering regulations				
Printing and/or copying to disk				
E-mailing surveys				