

EXAMPLE FORM

Plan of Operation for Boarding Home Facilities

Directions: The following information must be submitted with an application to operate a Boarding Home Facility. The information must reflect how the operation plans to maintain complicance with the city ordinance.

Boarding Home Address:

I. Permit Holder Responsibilities 1. Who will be the person(s) responsible for ensuring that the boarding home meets standards outlined in the city		
Name	Phone Number	
Home Address	Email Address	
2. Will there be a live-in caregiver? \Box Yes \Box No	If Yes, how many? Attach additional page of details, as needed.	
Name	Phone Number	
	Email Address	
3. Who will be the additional emergency contact?		
Name	Phone Number	
Home Address	Email Address	
4. The records of employees, caregivers and boarding home members require constant updating of the information. How do you plan to maintain these records in order for all of the information to be current?		
5. Boarding home residents must be kept informed of the policies of the boarding home. What method(s) will you use to ensure that boarding home residents are informed upon move in and while residing at the boarding home?		
you use to ensure that boarding home residents are informe	_	

6. Background checks must be submitted upon hire and annually for employees, owners, and volunteers. How will you conduct these checks and maintain current records?
will you conduct these enecks and maintain current records.
7. How will new employees be oriented in the following topics?
• Employer rules and policies.
 Recognizing and reporting abuse, neglect and exploitation.
 Resident's rights, including all applicable rights from the following:
a. Texas Human Resource Code, Chapter 102, Rights of the Elderly.
b. Texas Human Resource Code, Chapter 112, Developmental Disabilities.
c. Texas Property Code, Chapter 301, Fair Housing Practices.
d. Texas Property Code, Chapter 92, Residential Tenancies.
 Policies and procedures for contacting emergency personnel when a resident's health or safety is at risk.
 Complaint process specific to the city and boarding home.
Assistance with self-administration of medication.
Prevention of injuries, incidents and unusual accidents.
Emergency, evacuation and disaster plan.
Service specific orientation that includes, bu tis not limited to:
a. Nutrition, including meal preparation and dietary needs.
b. Sanitation.
c. Laundry.
d. Housework.
Please have a copy of the orinetation curriculum available for the Health Inspector to review.
8. How will operators and employees receive the following ongoing training requirements?
• Updates and changes in any policies and procedures within 10 days of the owner, operator or employee
becoming aware of the change.
 Orientation specific to the needs of each new resident within one day of the resident moving into the home.
 Orientation specific to the needs of a resident whose needs have changed due to injury, illness,
hospitalization or other circumstances which affect his resident's needs within one day of the owner,
operator, or employee becoming aware of the change.
operator, or employee becoming aware or the change.
Please have a copy of the orientation curriculum available for the Health Inspector to review.

9. Caregivers must receive training annually. How will you ensure that your caregivers receive the required hours of training?		
10. Do you have a pre-service training curriculum or will you only hire caregivers who already meet the require- ment of pre-service training?		
If you have a curriculum, please have a copy available for review at your inspection.		
☐ Facility has a pre-service training curriculum.		
\square Facility will only hire caregivers who already meet the requirement of pre-service training.		
II. Safety, Sanitation and Fire		
1. How will you ensure that the operation, both indoors and outdoors, is maintained to protect the health and safety of boarding home residents?		
2. How will you ensure that the building, grounds, equipment, and supplies are maintained in a clean and sanitary manner?		
3. What is your plan to prevent foodborne illness in the boarding home?		
o. What is your plan to prevent loodborne limess in the boarding home.		
4. What is your plan to control communicable disease in the boarding home?		

5. What is your plan to ensure the safety of the residents in cas Identify the designated relocation areas in and outside of the b	
III. Physical Health and Well-Being	
1. What is your plan when a resident gets ill or injured while at	the boarding home?
2. How will you ensure that medication is stored and dispensed	d properly?
3. If providing meal service, how will you ensure that the nutri	tional peods of the residents are met on a daily
basis? What meals will you serve? If you are serving meals and attachment.	
Include any forms or checklists you may use to help you m Home ordinance.	aintain compliance with the Boarding
Signature	
Prepared by:	Title:
Signature:	Date Signed:
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