

Minimum Quality Standards: Samarth Centers and for all Residential Facilities in India (Samarth &GHARAUNDA projects of National Trust)

Developed by National Trust

The following is a set of Minimum Standards for Residential Facilities, designed to grade the residential facilities on various aspects including Physical Infrastructure, Quality of life of residents, Links with the Community and management and Governance.

These are aspects that the person/s inspecting the facility needs to take a holistic view on.

By trying to understand and weave in the context, the geographical, social factors and the cultural ethos, many dimensions can be added to the entire process.

Care also must be taken to ensure that the inspection must be done with a purpose of facilitating the organization being inspected, rather than taking a critical approach. Where the persons inspecting the place feel there are aspects that are lacking or facilities and systems that are not up to the mark, these must be shared with the Centre Holders. By sharing issues, concerns regarding any perceived shortfalls will enable the centre holder to know the areas where attention needs to be focused.

Since the idea is to improve the facilities across the country, sharing of information and knowledge; providing linkages will enable the centre to strive towards improving their facilities.

ABOUT THE GRADING KEY :

5. Excellent – It fulfils all the conditions stipulated under the minimum standards and in some cases it has additional facilities.
4. Very Good – It fulfils all the conditions under the minimum standards but a few lacunas here and there.
3. Good – The centre has all basics in its place.
2. Average – Facilities are available but there is lot of scope for improvement.
1. Poor - There are hardly any facilities.

The standards are divided into three parts each e.g A1,A2, A3 into three cases A, B, C.
However an explanation of the standards is available at the end of

The UNCRPD, to which India is a signatory, strongly indicates that institutionalization undermines human rights of Persons with Disabilities.

National Trust started a center-based scheme called Samarth in 2005. Since then 119 centers have been set up by registered organizations with grants-in-aid from National Trust. These organizations provide residential services to people with four types of developmental disabilities for long term stay and respite care. With this number of organizations operating in 28 states and 3 of union territories, it is important to ensure that the organizations are managing the centers effectively and providing quality service to Persons with Disabilities, thus standards for Samarth Centres have been developed and later five turned to suit all residential facilities. These standards will be mandatory for the GHARAUNDA Scheme.

The proposed minimum standards and criteria are based on existing international practices but designed to fit the Indian context and have been developed using the UNCRPD as a guide. The standards focus on three aspects of a residential centre, the facility and physical environment, management and governance and quality of life of the residents, *regardless of the disability type, age and socio-economic status of the residents*. The standards are kept at minimum, bearing in mind that many of the registered organizations still do not have full capacity, resource-wise (financial, human, technical), to run centres without external support. National Trust will provide necessary assistance to help residence holders to progressively meet these standards. The standards are not written in stone, National Trust can review and raise standards as and when required.

The perspective:

We are using the same quality standards designed by VSO volunteer Len- Manikan as a base and to build on for a range of options in terms of living arrangements for Adults

These standards should be useful for National Trust all residential facility like Samarth & GHARAUNDA and any options or Schemes we may develop under the Assisted Living Programs.

1. In most of the Samarth centers we have seen that adults are treated like children and all the rehabilitation and therapy programmes are still trying to make them as normal as possible and to learn skill which they should have done much earlier.

Comprehensive assessment and evaluation of improvement in health and improvement in intellectual developments means the person evolving & learning new skill sets. For Adults the assessment should be according to functioning(ICF)and that should be accepted . There is no need of trying to teach skills which the person may never achieve if he has not done it in 18 years .At this stage adaptation assistive devices, and building of self confidence should be the goal

E.g Toilet training, fine motor function, eating independently, if a person has not acquired the above skills by 18 then we need to stop the same strategy of trying to get them to acquire the skill rather we have to use other methods or assistive devices to help make the person participate and be included.

If not toilet trained, we need to use a diaper

If fine motor function is not possible we need to introduce adapted spoons, clothes, switches for computers, or any other assistive device needed.

If a person cannot eat independently because of poor hand function then a person has to be given the confidence to ask for help in eating.

Support plans and support networks:

The discussions of the UNCRPD have moved from legal Guardianship to supported decision making. The aspirations of people with disabilities are that they should also be able to exercise autonomy and self-determination. They would like to make choices and decisions about their own lives. However to do this they need support. Decisions by legal guardians have not always reflected the choice of persons with disabilities.

In order to exercise Supported Decision Making each person needs to have a circle of support which helps them to function better. A Circle of support is basically a community group which consists of two to three members and a 'focus person'. The program is aimed at supporting and creating one support person for each life domain .The support person is the one who enjoys the trust of Persons with Disabilities. In the Circle of support each person may be entrusted to help in decision making in areas of health, finance, livelihood, recreation, social life and marriage. These Circles of support should start by a community group which will aim at supporting and promoting the social participation of the focus person. This will lead to friendship & trust through which a support network can be developed. This network will then using the strategies of supported decision making, make the support plan for each person. This plan will have both short term and long term goals which need to be flexible and reviewed half yearly.

These standards will provide the project holders, decision makers and the residents themselves with a reference point for development and improvement of services, while it gives National Trust an objective method for review, revisions and reconsideration of the scheme toward developments and improvements of the centres.

The standards went through consultation with Persons with Disabilities, project holders, professionals and other relevant stakeholders. It can also be used for monitoring and evaluation of the residential centers. Project holders and the residents must have a copy of the standards and criteria.

Why standards are necessary

The rights of persons and welfare of persons with disabilities cannot be compromised on the basis of lack of, or limited resources. Standards are necessary to ensure that the project holders, with the support from National Trust, deliver quality services to persons with disabilities. The standards ensure protection of the residents and safeguard the health, welfare and quality of life of the persons with disabilities living in these residential Centers.

What the standards is not

The standards is not an instrument to ferret out the ill-equipped organizations and used as basis to terminate support. National Trust, in its capacity, will support project holders in meeting the standards. At the initial implementation, existing project holders who do not meet the standards will be given opportunity to improve, or opt to voluntarily close down if they believe they cannot or do not want to comply with these standards. National Trust will discuss with respective project holders what to do with existing residents in event of closure.

Some terminologies

Project holder refers to the registered organization receiving fund from National Trust to run the center-based scheme.

Samarth Center refers to the facility or the residential service provided by Samarth holder.

Resident refers to person with developmental disability living in the Residential Center, either for long-term or respite care.

Sections of UNCRPD informing the standards and criteria

Article 19. - Living independently and being included in the community, Sub-sections a, b, c,

States Parties to the present Convention recognize the equal right of all persons with disabilities to live in the community, with choices equal to others, and shall take effective and appropriate measures to facilitate full enjoyment by persons with disabilities of this right and their full inclusion and participation in the community, including by ensuring that:

- a) Persons with disabilities have the opportunity to choose their place of residence and where and with whom they live on an equal basis with others and are not obliged to live in a particular living arrangement;*
- b) Persons with disabilities have access to a range of in-home, residential and other community support services, including personal assistance necessary to support living and inclusion in the community, and to prevent isolation or segregation from the community;*
- c) Community services and facilities for the general population are available on an equal basis to persons with disabilities and are responsive to their needs.*

Article 23 - Respect for home and the family, Sections 3, 4, 5

3. States Parties shall ensure that children with disabilities have equal rights with respect to family life. With a view to realizing these rights, and to prevent concealment, abandonment, neglect and segregation of children with disabilities, States Parties shall undertake to provide early and comprehensive information, services and support to children with disabilities and their families.

4. States Parties shall ensure that a child shall not be separated from his or her parents against their will, except when competent authorities subject to judicial review determine, in accordance with applicable law and procedures, that such separation is necessary for the best interests of the child. In no case shall a child be separated from parents on the basis of a disability of either the child or one or both of the parents.

5. States Parties shall, where the immediate family is unable to care for a child with disabilities, undertake every effort to provide alternative care within the wider family, and failing that, within the community in a family setting.

Article 28 - Adequate standard of living and social protection, Section 1-a,b,c

1. States Parties recognize the right of persons with disabilities to an adequate standard of living for themselves and their families, including adequate food, clothing and housing, and to the continuous improvement of living conditions, and shall take appropriate steps to safeguard and promote the realization of this right without discrimination on the basis of disability.

2. States Parties recognize the right of persons with disabilities to social protection and to the enjoyment of that right without discrimination on the basis of disability, and shall take appropriate steps to safeguard and promote the realization of this right, including measures:

a) To ensure equal access by persons with disabilities to clean water services, and to ensure access to appropriate and affordable services, devices and other assistance for disability-related needs;

b) To ensure access by persons with disabilities, in particular women and girls with disabilities and older persons with disabilities, to social protection programmes and poverty reduction programmes;

c) To ensure access by persons with disabilities and their families living in situations of poverty to assistance from the State with disability-related expenses, including adequate training, counseling, financial assistance and respite care;

Monitoring and Evaluation

Residential Centres shall be subject to monitoring visits by persons familiar with objectives and programmes of and duly authorized by National Trust. The monitoring team will be composed of qualified professionals, representative of center managers, persons with disabilities and National Trust staff. Select project managers can also be part of the monitoring team. This will also serve as learning opportunity for project holders. The monitoring team will be provided with an orientation about the standards and criteria.

The purpose of the monitoring visit is to determine the progress of center in terms of attaining the standards and help the project holders and National Trust in identifying necessary actions to take to improve management and services in the centers. This will consist of 1) observation of the facility and daily activities, 2) interview with residents, staff, families, community and LLC members, and 3) analysis of records and documents. The centres will be informed of the dates of the monitoring visit.

There will be a rating system to be used by the monitoring team and a format for reporting, stating findings and recommendations. Project holders will be given an opportunity to see the report for validation of facts before this is finalized. National Trust will then require the project holders to produce an action plan to address critical findings and recommendations within a given time frame. National Trust will monitor the implementation. National Trust can withdraw support to the centre if it is found failing to comply with standards after two consecutive monitoring visits within the given time frames.

Surprise inspections maybe conducted if there are adverse reports from the community or complaints from residents brought to the attention of National Trust.

Steps taken in developing the Standards

The standards were drafted in consultation with project holders and SNACs. The purpose was to involve them in developing acceptable standards and criteria. Some of the recommendations from the consultations were integrated into the final standards and criteria, and will take effect immediately.

Project holders will have a copy of the standards. In the initial stage of implementation they will hold self-assessments, and will have the option to voluntarily close down if they strongly believe they will not be able to comply with the standards. Through the self-assessment and other project holders will identify areas for improvement and National Trust will determine the assistance to be provided.

In case of voluntary closure, National Trust and the Samarth holder will discuss and decide what to do with existing residents. There should be a detailed plan for phase out so as not to jeopardize the plight of the persons with disability. Existing regulations of National Trust regarding early closure *will* apply. (See National Trust guideline on early closure)

Improvements will be carried out from three months to one year depending on the degree and amount of work to be done. Monitoring will begin from six months after finalization of standards. Bi-annual inspection will be completed during the first year and annual inspection for the succeeding years.

NT responsibilities:

- Identification and orientation of members of monitoring teams
- Allocation of funds for monitoring and capacity building
- Resource identification and mobilization, this may include networking and linkages with governments at various levels, corporate sector and individuals.
- To develop its own complaint and redress procedure to handle complaints lodged by parents, local community members, residents.

Minimum Quality Standards for Residential Homes
Evaluation Format

<u>Minimum Quality Standards for Residential Homes</u> <u>Evaluation Format</u>			
	<u>Area A. Facility and Physical Environment – Own building</u>	<u>Rented building</u>	
<i>A.1</i>	Centre provides home-like environment	Write the Appropriate alphabet grading	Grading Key
	<ul style="list-style-type: none"> a. Facilities available to ensure proper maintenance of temperature at comfort level in the entire building (Example: /cooler/ceiling fans/heaters/ exhaust fans etc) b. Rooms have windows and proper ventilation to provide adequate sunlight and cross ventilation c. Every resident has been provided a clean and suitable bed/mat (at least 6 ft by 3 ½ ft.) d. Toilets which are accessible and suitable are also available at all times. e. Facilities are available to ensure privacy while taking bath / using toilet. f. Provision is available for washing the clothes, bed sheets etc., on a regular basis. g. Separate kitchen and dining area with adequate water supply and proper hygienic standards is available. 	<ul style="list-style-type: none"> <input type="checkbox"/> 	<ul style="list-style-type: none"> 5. Excellent – It fulfils all the conditions stipulated under the minimum standards and it some cases it has additional facilities. 4. Very Good – It fulfils all the conditions under the minimum standards but a few lacunas here and there. 3. Good – The centre has all basics in its place. 2. Average – Facilities are available but there is lot of scope for improvement. 1. Poor - There are hardly any facilities.

	<p>h. Drinking water is available all the 24 hrs.</p> <p>i. The facility is secured and provides separate rooms for male and female.</p> <p>j. Recreation facilities for residents are available and the environment is cheerful and stimulating.</p> <p>k. Fire safety equipments with trained personnel are available.</p> <p>l. Personal are also trained to take residents safer places during fire accidents.</p> <p>m. Facilities are available to manage problems created by the failure of power round the clock.</p> <p>n. To attend to medical emergencies linkage with the nearest medical facility is available. Transport services are in place.</p> <p>o. Residents have access to the outside world by way of telephone, internet, fax etc.</p> <p>p. The residents also have the required knowledge to use these facilities when required.</p>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	
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A.	Area A. Facility and Physical Environment scoring	Guiding explanation for	For assessors
A.1	Centre provides home-like environment		
A.1.a&b	Building has adequate and appropriate lighting, heating and ventilation The focus should be the minimal use of energy- on the concepts of green building. Use innovative method using solar / wind / water energy, natural cooling, bio gas plants, water recycling, rain harvesting, etc.	Center has windows, for winter there should be either heaters or woolen blankets; exhaust fans, coolers/ceiling fans for dry months	Walk-through observation
A.1.b	<p>Every resident has his or her own bed. The centre will endeavour to respect personal space (at least 8 x 6ft). In extreme event where resident has to share a bed with another resident, it shall not remain for a long period of time, and the personal space of each resident is not inconvenienced. With sufficient bedding – cotton mattress, pillow with cotton cover, sheets, towel, blanket and quilt (all of good quality).</p> <p>❖ Pest control measures – treatment for bed bugs, mosquito nets given to all</p>	<p>Single beds or double-decked beds are allowed, there should be space between beds for comfort and mobility; clean bedding and linens that are in good condition. Linens are changed and washed every week. There would be lockers/cupboards where residents can keep their personal belongings. Sufficient clothing should be make available including undergarments, jersey for winters, seasonal clothes for all seasons, footwear’s etc. The requirement for cleanliness should also be met by providing enough soap, toothpaste, shampoo, washing powder, oil, sanitary pad for girls/women, working taps, buckets, mugs, doors to respect privacy etc.</p> <p>(See National Trust guideline on permissible number of residents per square foot)</p>	Walk-through observation
A.1.c	<p>There is a proper waste disposal system</p> <p>❖ Pest control measures – treatment for bed bugs, mosquito nets given to all and appropriate arrangement for garbage disposal.</p>	Wastes are segregated (recyclable/non-biodegradable/biodegradable); Wastes are disposed daily, compost pit available,	Walk-through observation

A.1.d & e	<ul style="list-style-type: none"> Centre has clean and hygienic toilet and bathroom. Special aid or device is provided to resident who cannot use regular toilet and bathroom Separation at bed and bath time for residents by sex and age group. 	<p>At least 1 toilet and bathroom for every 10 residents and these toilets should be accessible even at night also.</p> <p>Asian-style toilets are acceptable for persons with disabilities can use it. Western style toilet has to be available for those incapable of squatting. Toilets and bathrooms are cleaned everyday.</p>	Walk-through observation
A.1.g	Kitchen and dining area are in sanitary condition	Separate cloths are used for wiping kitchen counters, dining tables and hands; perishable items are refrigerated; hand-washing before food preparation; pets are kept away from kitchen counters and tables	<i>Walk-through observation; ocular inspection</i>
A.1.h	Water and electricity are available 24-hours. Water treatment every six months with reports maintained (filtering, tank cleaning and chlorine treatment)	inverter/generator/solar panel/biogas/indoor pipes/ water storage facility/hand pumps	Walk-through observation
A.1.i&j	<p>Recreation materials and facilities are available to residents</p> <ul style="list-style-type: none"> Cheerful, vibrant, stimulating environment – walls should not be bare, painting & photographs, show the personality of residents. The decorations can be chosen by the residents. 	<p>Recreation materials are not locked in cabinets or rooms. Recreation materials and facilities are age-appropriate and stimulate senses of resident such as percussion musical instruments/music therapy, encourages creativity such as arts/art therapy</p>	Walk-through and activity observations
A.1.k	Centre maintains and inspects fire equipments. Centre conducts emergency drills, has evacuation plan and records results of drills.	Buckets of sand and/or fire extinguisher is available. Size and number of fire extinguishers are based on fire department standards. Record of emergency drills conducted maintained	<i>Walk-through observation</i> <i>Review of documents;</i> Records of emergency drills, certificate from fire department

A.2	Centre is disabled friendly kept safe, clean and barrier free. Guiding explanation for scoring		For assessors
A.2.b	1. Project holder strives to design the centre according to accessibility standards of India. Toilets, sports area, reading room, kitchen etc. all should be easily accessible.	For this purpose, the accessibility standards of Ministry of Urban Development will be used. click here for accessibility standards	Walk-through observation
A.2.d	Equipment and aid are of high quality, safe and maintained in good condition. Where improvised aid or equipment is used, this should be tested for safety for residents.	Regular check of equipment and aids to ensure Does not use defective mobility aids or assistive devices; aids and devices are appropriate to the needs of the residents, e.g. size of wheelchairs	<i>Ocular inspection</i>
A.2.e	Centre uses appropriate and safe furnishings	Non-slip floors, absence of protruding sharp/pointed objects	Walk-through observation
A.2.f	Disaster Management		

A.3	Location of the centre provides for facilitation of community participation		Guiding explanation for scoring	For assessors
A.3.a	Centre coordinates with Local Project Committees and LLCs about activities and concerns of the center and its residents.	Center is regularly visited by Local Project Committee (LPC) member. Center consults with LPC about issues and concerns when necessary.		<i>Cursory look at documents, - logs/travel diaries of visit or meetings with LLCs, quarterly reports of LLC</i>
A.3.b	<p>Centre holds cultural, social, sport activities that involve residents and community members</p> <p>Centre allows residents to participate in community activities that interest them</p>	<p>Coordination with LPC, community members, panchayats, civic groups regarding events and festivals</p> <p>There are means to inform the residents of activities taking place in the community, e.g. information board, regular meetings.</p>		<p><i>Observation of activities and/or review of documents – photos, reports</i></p> <p><i>Interview with residents/parents and staff,</i></p>
A.3.c,d f,s, h	<ul style="list-style-type: none"> ● Centre collects feedback from parents, relatives, community members. Sensitization programmes in the community –to be arranged on monthly basis ● Residence should use local services and resources Name & numbers of E.I. centres, primary schools, public schools, sports facilities, parks, vocational Training centres, Industries, local theatre, folk groups etc. ● Network with local parents associations/DPOs/NGOs. ● Data base of volunteers 	There is a system of soliciting feedback and comments and record of actions taken to respond or address feedback, e.g. log books, suggestion box, regular meeting with staff, parents and residents.		<i>Interviews</i> Log books, suggestion box, minutes of meetings

B.	Management and Governance		
B.1	Purpose and Function	Write the Appropriate number for grading	Grading key
	<ul style="list-style-type: none"> a) The organization is duly registered with the proper authorities b) It has a clearly defined purpose and objectives. c) The organization has clear written policies, rules and regulations for management of centre. On all issues pertaining to the residents and their welfare. d) These are committees (food, cleanliness, sports & recreation, vocational/employment, community interaction) for making decision. e) The residents are also members of these committees f) Proper rules are available for admission and exit of residents. g) There is a system for assessing the quality and effectiveness of services and programs h) There is a mechanism and procedure to address complaints of all kinds 	<ul style="list-style-type: none"> <li style="text-align: center;"><input type="checkbox"/> 	<ul style="list-style-type: none"> 5. Excellent – It fulfils all the conditions stipulated under the minimum standards and in some cases it has additional facilities. 4. Very Good – It fulfils all the conditions under the minimum standards but a few lacunas here and there. 3. Good – The centre has all basics in its place. 2. Average – Facilities are available but there is lot of scope for improvement. 1. Poor - There are hardly any facilities.

B.	Management and Governance		Guiding explanation for scoring	For assessors
B.1	Purpose and Function			
B.1.a	Organization operating centre is duly registered with proper authorities	National Trust, Slum Rehabilitation Authority (SRA), Foreign Contribution Regulation Act (FCRA), Person With Disability Act (PWD Act), Public Sector Undertaking (PSU), Public Sector Enterprises (PSE)	<i>Review of documents</i> registration documents, renewal receipts)	
B.1.b	Has clear and defined purpose	It should be stated if the center is not used exclusively for crisis center as intended by National Trust, e.g. hostel facility for students, orphanage	<i>Review of documents</i> manual/handbook of operation	
B.1.c	Has written policies, rules and regulations for management of centre and of the residents. <u>Resident's Committee:</u> Management of self decision making / choice making	1) Includes code of conduct, 2) policy and criteria for admission, 3) policy and procedure for notification of parents, relatives in case of accident, illness and death of a resident, .Well defined Admission and Exit policies in place e.g.	<i>Review of documents</i> manual/handbook of operation	
B.1.d & e	There should be at least five committees and each member should have to be a part of at least one committee and every resident should have at least one responsibility so that each one participates fully in the running of home. These five committees could be for decision making in the areas of:- <ul style="list-style-type: none"> ● Food ● Cleanliness ● Supports and recreation ● Vocation / employment ● Community interaction 			

<p>B.1.f</p>	<p><u>Admission Policy:</u></p> <ul style="list-style-type: none"> • Preference should be given to adults and destitute children who have sensory issues / communication challenges / mobility issues or high support needs with :- • No family • Crisis in the family e.g. death of parents. Old age, long term illness. • No family support • Signs of severe malnourishment or abuse • Victims of natural calamities or other exceptional circumstances. • A person with disability who chooses to live away from his/her family <p>Care should be taken that the man & women ratio should be equal – can be flexible to some extent.</p>	<p><u>Exit Policy:</u></p> <ul style="list-style-type: none"> • Train people with disabilities and make support plans, if they wish to move out of the residential facilities and live independently or in small groups in the community, LLC should give the support needed. • Review of long term and short term goals for exiting should be done at least half yearly. • Group plan as well as individual plan should be appropriately designed • Allow and support Person With Disabilities to move out. They should be allowed to move out whenever they want and if they fail to live independently in the community they should be allowed to move back also. • Post exit also – support as needed should be provided through the support plan, through the District Trust/LLC. • However, a range of options have to be made available, from where the person can choose. The range can spread across choosing to live with the family, to a group form or to raising a family themselves. • A comprehensive home plan should be made 	
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		<p>with the group using all the options of support prior to leaving the facility (Financial Assistance, education, training, accommodation, social welfare benefits and schemes.</p> <p>management and staff must be aware of these procedures, orientation is done</p>	
B.1.g	There is a system for assessing the quality and effectiveness of services and programs	Evaluation of progress of residents, board/staff meetings to discuss effectiveness of services	<i>Review of documents</i> Individual program plan, minutes of board/staff meeting
B.1.h	There is a complaint mechanism and procedure.	Complaint mechanism and procedure defines the areas, procedure for filing complaint, course of action taken vis-à-vis type of complaint, procedure for redress Residents, staff, parents are aware of these policies. The mechanism also allows staff, residents, parents, relatives, concerned local community members and government officials to forward complaints to National Trust when necessary. Center because it receives fund from government, is also subject to RTI.	<i>Review of documents</i> Copy of the policy

B.2	Standard 2. Staff	Write the Appropriate number for grading	Grading key
	<p>a) The Centre is managed by a trained/ experienced parents persons with disability</p> <p>b) The staff is adequately trained and sensitized on the specific needs of all disabilities</p> <p>c) There is adequate staff available round the clock to cater to the needs of the residents</p> <p>d) There are laid down provisions for getting volunteers. Specifications on their role and the nature of support they require are worked out</p>	<p><input type="checkbox"/></p> <p><input type="checkbox"/></p> <p><input type="checkbox"/></p> <p><input type="checkbox"/></p>	<p>5. Excellent – It fulfils all the conditions stipulated under the minimum standards and it some cases it has additional facilities.</p> <p>4. Very Good – It fulfils all the conditions under the minimum standards but a few lacunas here and there.</p> <p>3. Good – The centre has all basics in its place.</p> <p>2. Average – Facilities are available but there is lot of scope for improvement.</p> <p>1. Poor - There are hardly any facilities.</p>

B.2	Standard 2. Staffing	Guiding explanation for scoring	For assessors
B.2.a	Centre is managed by a qualified person	Parent/professional/person with disability who possesses managerial and leadership skills	<i>Interview</i> job description, with roles and responsibilities
B.2.b	Centre has adequate staff with appropriate professional background (as required) Number of sanctioned staff- <ul style="list-style-type: none"> • Coordinator (preferably person with disability) • Sahyogi (as required by the residents) • Volunteers for the recreational activities • Security Guards/Gardeners • Cook (on shift duties) 2-(Morning 6-2pm 1pm - 9 pm) • Cleaner -2 (for washing clothes, utensils, room, toilets) • Staff/ Professionals have regular training and updated with developments in their field of expertise 	Has job descriptions detailing roles and responsibilities of staff; hiring procedure indicates qualifications – competencies and personal attributes required of staff vis-à-vis resident with high support need) Information is available to staff about opportunities for further education or training;	<i>Task observation</i> job description, with roles and responsibilities; hiring procedure
B.2.c	Staff is available 24-hours, pool of other professionals is available 24-hour on call basis, e.g. general physician, psychiatrist etc.	Attendants, especially those in graveyard shift are trained on emergency situations and know important contact numbers, e.g. doctors, fire department, hospital, center manager	Interview with staff
B.2.d	If a centre makes use of volunteers, roles and specific support are identified.	Volunteer policy to be in place.	<i>Review of document, interview with volunteer/staff</i>

B.3	Standard 3. Records and Documents	Write the Appropriate number for grading	Grading key
	<ul style="list-style-type: none"> a) Centre maintains proper and systematic records about the services being provided to residents b) Centre has case files for every resident. c) The Centre has registers with all necessary details of all the residents i.e both long-term and respite care. d) The Centre maintains proper records of the residents who exit the centre for contact if required. e) The Centre maintains records on the Health of the residents. 	<input data-bbox="1415 659 1478 708" type="checkbox"/> <input data-bbox="1415 740 1478 789" type="checkbox"/> <input data-bbox="1415 821 1478 870" type="checkbox"/> <input data-bbox="1415 919 1478 967" type="checkbox"/> <input data-bbox="1415 1032 1478 1081" type="checkbox"/>	<p>5. Excellent – It fulfils all the conditions stipulated under the minimum standards and it some cases it has additional facilities.</p> <p>4. Very Good – It fulfils all the conditions under the minimum standards but a few lacunas here and there.</p> <p>3. Good – The centre has all basics in its place.</p> <p>2. Average – Facilities are available but there is lot of scope for improvement.</p> <p>1. Poor - There are hardly any facilities.</p>

B.3	Standard 3. Records and Documents	Guiding explanation for scoring	For assessors
B.3.a	Centre maintains proper and systematic records about the facility and residents	Has inventory of equipment, aids, supplies; filing system	filing system, library, database
B.3.b	Centre has case files for every resident. For each resident there should be a well laid out support plan which needs to be reviewed atleast half yearly;	The files are kept confidential, only authorized persons are allowed access; Including comprehensive assessment and evaluation of improvement in health and improvement in intellectual developments means the person evolving & learning new skill sets; case file has latest photo or resident for identification. For Adults the assessment should be according to functioning (ICF) and that should be accepted. There is no need of trying to teach skills which the person may never achieve if he has not done it in 18 years .At this stage adaptation assistive devices, and building of self confidence should be the goal.	<i>Random check of documents,</i> Case files, data protection policy
B.3.c	Has registers of the residents, long-term and respite care, and records of the departures and destinations of residents.	Indicates whether resident has returned to family or is with legal guardian, etc. (log books, case files,	<i>Review of documents</i> Log books,

B.4	Standard 4. Financial System	Write the Appropriate number for grading	Grading key
	<p>a) The Center has a proper book keeping system</p> <p>b) There is adequately defined annual budget.</p> <p>c) The Centre undergoes regular financial audits</p> <p>d) The Centre is able to generate funding and resources other than from The National Trust</p> <p>e) The Centre has resources for regular funds (grant, fees, parents contribution, regular donation etc)</p>	<p><input type="checkbox"/></p> <p><input type="checkbox"/></p> <p><input type="checkbox"/></p> <p><input type="checkbox"/></p> <p><input type="checkbox"/></p>	<p>5. Excellent – It fulfils all the conditions stipulated under the minimum standards and it some cases it has additional facilities.</p> <p>4. Very Good – It fulfils all the conditions under the minimum standards but a few lacunas here and there.</p> <p>3. Good – The centre has all basics in its place.</p> <p>2. Average – Facilities are available but there is lot of scope for improvement.</p> <p>1. Poor - There are hardly any facilities.</p>

B.4	Standard 4. Financial System	Guiding explanation for scoring	<i>Review of Documents</i>
B.4.a	Center has a proper bookkeeping system	Keeps accurate book, records of income and expenditures ¹ cash books, petty cash books, donations in kind	Financial records
B.4.b	Has defined annual budget.	Budget is aligned with operational plan; clear line items, realistic cost estimates,	Annual budget document
B.4.c	Centre undergoes regular financial audits	Audit by certified C.A.mandatory	Audit reports
B.4.d	Centre is able to generate funding and resources other than from National Trust	Reflect that the centre will be able to sustain their operations and services vis-à-vis the number of permissible residents.	Project proposals, deed of donations

C	Quality of Life		
C.1	Health and welfare of the resident is of prime importance	Write the Appropriate number for grading	Grading key
	<ul style="list-style-type: none"> a) The Residents receive proper medical, care based on assessment and advice of professionals. b) The residents are enrolled under NIRAMAYA and are able to avail of its benefits c) The Residents are provided with proper diet and nutrition. d) Special needs of a female residents are taken into consideration e) Residents are provided adequate, clean, culture-sensitive clothing. f) Special meals planned for holidays or ill residents.(D) g) Provision for regular exercise and physical outdoors & indoor activities. h) Do you have Individual Support Plan (ISP) for each resident? i) Do you have short term and long term plan for each resident? 	<ul style="list-style-type: none"> <input type="checkbox"/> 	<ul style="list-style-type: none"> 5. Excellent – It fulfils all the conditions stipulated under the minimum standards and it some cases it has additional facilities. 4. Very Good – It fulfils all the conditions under the minimum standards but a few lacunas here and there. 3. Good – The centre has all basics in its place. 2. Average – Facilities are available but there is lot of scope for improvement. 1. Poor - There are hardly any facilities.

C.	Quality of Life Guiding explanation for scoring		
C.1	Health and welfare of the resident is of prime importance		
C.1.a	Resident receives proper medical, dental attention based on assessment and advice of professionals. <ul style="list-style-type: none"> ❖ A medical doctor should be accessible 24 hrs a day close to the facility. Medical record should be well maintained. List of special services in the locality to be available. ❖ Dental and vision check up annually, or when resident feel necessary. 	The resident’s medical, dental and other health needs are assessed by professionals at least once a year. <ul style="list-style-type: none"> ❖ First aid kit is available in the center. List of emergency services should also be available. 	
C.1.b	Resident is enrolled in NIRAMAYA and is able to avail of its benefits	NIRAMAYA cards are renewed annually	
C.1.c&f	<ul style="list-style-type: none"> ❖ Resident is provided with proper diet and nutrition. Where individual dietary plan is not possible there is a weekly menu ensuring adequate nutrition Weekly food plans should be made by food committee, they can be advised by dietician. ❖ Coordinator to check quality of food and special care of residence in need of special nourishment. ❖ Special meals planned for holidays or ill residents. ❖ Seasonal fruits & vegetables should definitely be incorporated into the menu. 	<ul style="list-style-type: none"> ❖ Sanitary storage, preparation, distribution, and service of food; food served is palatable, attractive, and at the proper temperature. Meals to be ready at specific time and according to the residents Weekly menu plan for nutritious meals is prepared, the menu offers variety, resident is consulted in planning the menu, resident can participate in food preparation <ul style="list-style-type: none"> ❖ Food schedule should be adjusted for PHSN or for religious or medical reasons 	
C.1.g	Resident gets proper exercise and physical, indoor and outdoor activities	Outdoor activities are held within and outside the center premises. Physical activities such as sports, dancing, nature walks.	<i>Observation of task/activities</i>
C.1.d	Special needs of a female resident is taken into consideration, e.g. during monthly period.	Female staff is available to attend to special needs of female residents; Activities of Daily Living include training for female residents on hygiene during menstruation	<i>Interview staff/resident</i>
C.1.e	Residents are provided clean, culture-	The clothes while culture-sensitive should also	<i>Walk-through observation</i>

	sensitive clothing	consider comfort for the resident.	
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C.2	Habilitation and Rehabilitation	Write the Appropriate number for grading	Grading key
	<ul style="list-style-type: none"> a) There is a provision of training and supporting the residents for moving towards independent living b) Vocational training and activities take into consideration talent, interests and potential of individual residents c) School-aged residents have access to or are enrolled in mainstream schools d) Exploring possibilities and providing work or employment opportunities and support to the residents outside the centre, after getting Vocational Training e) There is a provision for facilitating registration of residents under Government mandated identification systems, disability ID, BPL card etc. f) The Centre facilitates the residents in accessing the various government run schemes 	<ul style="list-style-type: none"> <li style="text-align: center;"><input type="checkbox"/> 	<ul style="list-style-type: none"> 5. Excellent – It fulfils all the conditions stipulated under the minimum standards and it some cases it has additional facilities. 4. Very Good – It fulfils all the conditions under the minimum standards but a few lacunas here and there. 3. Good – The centre has all basics in its place. 2. Average – Facilities are available but there is lot of scope for improvement. 1. Poor - There are hardly any facilities.

C.2	Habilitation and Rehabilitation	Guiding explanation for scoring	For assessors
C.2.a	There is an individual program plan (IPP) based on condition and needs	The IPP includes measurable objectives and timetables to meet the resident's needs	<i>Review of document</i>
C.2.b	Vocational training and activities take into consideration talent, interests and potentials of individual resident. Training area to be separated from The residence area.	Resident above 18 is enrolled in mainstream vocational school. If this is not available vocational training is provided in the center. Where vocational skill or facility is not accessible in the center or in the locality, occupational and other developmental therapies are provided to residents. The therapy provided is based on individual program plan	<i>Observation of task/activities and ocular inspection of facilities</i>
C.2.c	School-aged resident has access or is enrolled in mainstream school	Adults have to be given choices between professional courses and skill & work training.(ARUNIM can be involved in ensuring that residents earn a living wage)	Interview with staff/review of records Individual program plan
C.2.d	<ul style="list-style-type: none"> • Resident after receiving vocational training, can decide to find work outside the centre; and the centre helps to find opportunity for him/her. Residents should be given training on opening of bank account, filling out forms, basic fiscal management, household savings etc. 	Linkage with entrepreneurs, private sectors for potential employments. Each resident should have their own Bank account.	Interview with staff
C.2.e	The center facilitates registration of resident to government-mandated identification systems, disability ID, BPL card, Unique identification card, etc, in order to have access to government services	has updated list of government schemes and programs and their requirements; there is linkage or coordination with other department, e.g. SSA,ICDS, Health, for facilitation of available services	<i>Review of documents,</i>

C.3	Rights of the residents	Write the Appropriate number for grading	Grading key
	<ul style="list-style-type: none"> a) The service provider respects the rights of Persons with Disabilities b) The staff members respect and promote dignity and privacy of the residents c) The Residents are allowed to practice their religion d) Residents are allowed to receive visitors and talk in privacy e) The Centre follows the guiding principles and rights of persons with disabilities as laid out in the UNCRPD f) Residents earn remuneration when participating in income-generating activities of the centre g) Residents can manage and decide what to do with their earnings h) Residents participate actively in making long term and short term goals and reviewing them i) Residents are treated with dignity and as independent persons. They are enabled to develop skills and in supported decision making 	<ul style="list-style-type: none"> <input type="checkbox"/> 	<ul style="list-style-type: none"> 5. Excellent – It fulfils all the conditions stipulated under the minimum standards and it some cases it has additional facilities. 4. Very Good – It fulfils all the conditions under the minimum standards but a few lacunas here and there. 3. Good – The centre has all basics in its place. 2. Average – Facilities are available but there is lot of scope for improvement. 1. Poor - There are hardly any facilities.

C3	Rights of the resident	Guiding explanation for scoring	For assessors
C.3.a	Dignity and privacy of the resident is respected and promoted	1)Resident is free from physical, mental, sexual and other forms of abuse. 2)Enclosed/private dressing room/area is available; 3)Where CCTV is used, this should be limited to areas where resident performs personal activities;4)resident who experienced psychological or emotional trauma receives counseling written policies and procedures that prohibit mistreatment, neglect, and abuse of residents and misappropriation of resident property.	<i>Interview with resident/parents</i>
C.3.b	Resident is not kept in the center against his or her will.	Parents/relatives are given counseling and provided necessary information to have options other than leaving their child/ward with the center.	<i>Interview with parents/resident</i>
C.3.c	A resident is not treated as an ‘inmate‘.	Attendant accompanies resident who cannot travel alone; S/he has discretion to enter and leave the centre either independently or with others, provided the staff are informed of whereabouts; resident can participate in daily activities in the center; in case of orphan there is a certificate from the authority.	Interview
C.3.d	Resident is allowed to practice his/her religion.	An area in the center is set aside for prayers or meditations; information is available to resident about religious events, days of worship, festivals	<i>Walk-through observation</i>
C.3.e	Resident is allowed to receive visitors and talk in privacy.	Area is set aside for visitor and resident to talk privately	<i>Walk-through observation</i>
C.3.f	Resident is not used for show case for funding purposes.	Resident is informed of official visitors and can choose whether or not to meet with them.	<i>Interview/cursory look at policy re visitors</i>
C.3.g	Resident has access to information relating to his or her personal development to aid them in	Regular review of progress of resident; regular individual counseling or consultation to inform	<i>Interview with staff/resident</i>

	making decisions.	resident of progress	
C.3.h	Resident earns remuneration when participating in income-generating activities of the center and can manage and decide what to do with his earnings	Legal guardian or circle of support is assigned to resident 18 y.o. and above who requires one; Center assists resident in opening bank account;	<i>Interview with staff/resident</i>
C.3.i	Guiding principles and rights of PwD in UNCRPD should be respected and followed.	All involved in the facility should be familiar to the understanding of UNCRPD	

S.NO	TOPIC	MARKS	MAX MARKS	
1.	Area A. Facility and Physical Environment		150	
A.1	Centre provides home-like environment			
A.2	The Centre is disabled friendly, safe, clean and barrier free.			
A.3	Community Participation			
	TOTAL			
B	Management and Governance		120	
B.1	Purpose and Function			
B.2	Standard 2. Staff			
B.3	Standard 3. Records and Documents			
B.4	Standard 4. Financial System			
	TOTAL			
C	Quality of Life		130	
C.1	Health and welfare of the resident is of			

	prime importance			
C.2	Habilitation and Rehabilitation			
C.3	Rights of the residents			
	TOTAL			
	<i>GRAND TOTAL</i>		400	