

**LIGHTHOUSE PROGRAM MONITORING TOOL  
DIRECT CARE WORKER RECORD REVIEW**

<b>Agency:</b>										
<b>Date of Review:</b>					<b>Review Period:</b>					
<b>Direct Care Worker</b>										
	<b>Yes</b>	<b>No</b>	<b>Yes</b>	<b>No</b>	<b>Yes</b>	<b>No</b>	<b>Yes</b>	<b>No</b>	<b>Yes</b>	<b>No</b>
Is there CBI in the record?										
Is there current CPR in the record?										
Is there current First Aid in the record?										
Is there current HIPAA training in the record?										
Is there current OSHA training in the record?										
Is there documentation of orientation to the agency, community, and services in the record?										
Is there documentation of annual continuing training?										
Is there signed confidentiality form in record?										
Is there documentation of abuse, neglect and exploitation and how to report it in the record?										
Is there documentation of personal care skills including bathing, grooming, feeding, toileting, transferring, positioning, and ambulation in the record?										
Is there documentation of home safety, fall prevention and emergency plan response in the record?										