

DFTA General Program Standards of Operation

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Table of Contents

INTRODUCTION	1
STANDARD 1: EQUAL ACCESS TO ALL ELIGIBLE PERSONS	1
STANDARD 2: LANGUAGE AND CULTURAL COMPETENCY	1
STANDARD 3: HOURS OF OPERATION	2
STANDARD 4: RESPECT FOR CLIENTS	2
STANDARD 5: FEEDBACK.....	3
STANDARD 6: CONTRIBUTIONS.....	3
STANDARD 7: PERSONAL INFORMATION	4
STANDARD 8: RESPECT FOR ALL	5
STANDARD 9: AUTONOMY, INDEPENDENCE, AND CIVIC ENGAGEMENT	5
STANDARD 10: PROMOTIONAL ACTIVITIES (PUBLIC INFORMATION AND OUTREACH).....	6
STANDARD 11: LINKAGES	6
STANDARD 12: EFFECTIVE ADMINISTRATION	6
STANDARD 13: PROHIBITIONS ON THE USAGE OF PUBLIC FUNDS.....	7
STANDARD 14: DUE RECOGNITION.....	8
STANDARD 15: STAFFING.....	8
STANDARD 16: STAFF UNDERSTANDING OF RESPONSIBILITY.....	8
STANDARD 17: ORIENTATION, TRAINING, AND SUPERVISION	9
STANDARD 18: DATA COLLECTION	9
STANDARD 19: EMERGENCY CONTACT INFORMATION.....	10
STANDARD 20: EMERGENCY PROCEDURES	10
STANDARD 21: EMERGENCY PREPAREDNESS.....	11
STANDARD 22: TARGET POPULATION	12
STANDARD 23: SAFETY.....	12
STANDARD 24: CLEANLINESS	14
STANDARD 25: RECORDS.....	15
STANDARD 26: MONITORING	15
STANDARD 27: RECORDKEEPING	16

Introduction

The following General Standards apply to all DFTA-funded programs, unless otherwise specified. DFTA's program standards provide service-specific guidelines applicable to programs that provide those services.

Scope of Services

Standard 1: Equal Access to All Eligible Persons

Compliance 1.1. The program ensures equal access to all eligible persons.

- Within funding availability, the program ensures any eligible adult equal access to participation, services, activities and informational sessions without regard to race, color, creed, national origin, gender identity, age (over 60), non-citizen or citizen status, disability, sexual orientation, marital status, familial status, military status, arrest or conviction record, predisposing genetic characteristics or other categories protected by law against discrimination.
- Service denial to eligible individuals may occur under these circumstances:
 - Reasons stated in service-specific standards.
 - Another provider can more appropriately serve the individual (the individual may be referred to that provider).
 - In accordance with program policies and procedures when the individual's behavior causes physical or mental harm to others.

Compliance 1.2. Free-of-Cost Services.

- The program does not charge fees for program participation or for providing services, unless specified otherwise in service-specific standards.

Compliance 1.3. Persons with Disabilities.

- The program addresses the needs of persons with disabilities, including hearing and visual impairments. Resources may include assistive technology for persons with hearing impairments (TTY), large print documents for persons with visual impairments, and other resources specified in service-specific standards.
- The program complies with the Americans with Disabilities Act if seniors are served on site. If not at street level, the center has an exterior ramp and/or elevators from ground level. At least one bathroom used by participants is barrier free and easily accessible from all program areas.

Standard 2: Language and Cultural Competency

Compliance 2.1. The program is linguistically and culturally competent.

- The program has a language access plan that includes these provisions:
 - The program will provide on-demand language assistance free of charge to persons with limited English proficiency (LEP). At minimum, the program will have a telephonic interpretation service contract or similar community arrangement with a language interpretation services provider to assist LEP individuals.

- The program will inform persons with limited English proficiency of the availability of free language assistance at its location. Notice will be in writing designed to be understood by LEP individuals.
- The program will train staff that have contact with the public in the timely and appropriate use of these and other language services.

Compliance 2.2. The program is culturally competent.

- All service activities reflect (1) understanding of the needs, characteristics, cultural expectations and preferences of different ethnic groups residing in the community; (2) sensitivity and responsiveness to issues relating to culture, religion, socioeconomic status, gender identity, sexual orientation and immigrant adjustment; (3) sensitivity to cultural barriers impeding service utilization, including but not limited to language barriers; and (4) knowledge of linguistically and culturally competent service providers in the community and City, and ability to refer individuals to these providers when needed.
- All services are provided with respect for cultural differences, preferences and styles of communication, and with skill in assisting individuals in overcoming cultural and linguistic barriers.
- As appropriate to the type of services provided, cultural preferences are respected – e.g. through foods served, holiday celebrations, social activities and program communications.

Standard 3: Hours of Operation

The program is open and services are provided during budgeted hours of operation

Compliance 3.1. The program is open the number of days budgeted.

Compliance 3.2. The program provides services during its contracted hours of operation.

Compliance 3.3. The program's director or her/his appropriate delegate is present at the program during hours of operation.

Compliance 3.4. The program responds to telephone calls during business hours in a timely manner.

- Calls are answered in person or by voicemail during hours of operation. After hours and during weather emergencies and unexpected closings, a recorded message informs callers that the program is closed and states the hours of operation.

Standard 4: Respect for Clients

The program respects the rights of participants/clients.

Compliance 4.1. Respect for clients.

- The program respects the dignity of older persons, their right to receive reliable, safe, quality services, and their rights to courtesy, consideration and recognition of their needs and preferences.
- Senior Center programs post a DFTA-issued Participant Bill of Rights in a public place that is clearly visible to participants, their families and program staff.

Compliance 4.2 Complaints/Grievances.

- The program has a written policy and procedure that covers responses to the following categories of complaint/grievance:
 - Complaints about service denial (for DFTA-funded homecare, see Case Management standards).
 - Complaints about satisfaction issues (e.g. program services or staff);
 - Complaints about other clients/participants.
- The program informs clients/participants about its complaint/grievance procedure.
- The grievance procedure is written in each of the languages spoken by more than 30% of participants and at least in 14 pt. font.
- At a minimum, the written complaint/grievance procedure states the name(s) and title(s), where applicable, of an impartial third party with authority to make a binding decision on the grievance. If grievances are handled by a group or committee, the procedure states the composition of the group/committee. It also states the complainant's rights to:
 - Present his/her complaint or grievance privately.
 - Have his/her complaint or grievance addressed within a timeframe that is stated.
 - Appeal to the Board of Directors of the program's sponsor (procedure specifies name/title of person to whom the appeal should be addressed), or file a Request for a Hearing if the complaint/grievance is against a case management or homecare agency (see Service Specific Standards).
 - Appeal the Board of Directors' decision to DFTA.
 - Have all information and documentation relating to a complaint or grievance treated as a confidential matter unless disclosure is required by a court order or for program monitoring by an authorized agency.
- Complete and dated written or electronic records of all complaints/grievances and actions taken are maintained.

Standard 5: Feedback

The program offers participants/clients opportunities to comment on satisfaction and suggest service improvements.

Compliance 5.1. The program provides opportunities for feedback.

- The program provides opportunities for regular input from participants/clients on satisfaction and service issues, and can demonstrate that feedback is considered.

Standard 6: Contributions

The program offers participants/clients opportunities to contribute to service cost.

Compliance 6.1. Contribution guidelines.

- The program informs participants/clients of the following, via a posted sign where possible, and in writing when persons are not served on site:
 - Individuals are encouraged to contribute to the cost of the program. Contributions are used to help support the program.
 - Persons with incomes at or above 185% of the poverty line are encouraged to contribute at a level based on the actual cost of the service.
 - Contributions are voluntary and confidential.
 - No person will be denied service because s/he does not contribute.

- Procedure for making a contribution.

Compliance 6.2. Service specific contribution guidelines.

- See Service specific standards for procedures for collecting, safeguarding and accounting for contributions.

Standard 7: Personal Information**The program protects participant/client personal information.****Compliance 7.1. Confidentiality protections.**

- The program keeps confidential all personal information about persons who apply for or receive services. It shares confidential information only on a need-to-know basis with its funding agency and with program staff for purposes of providing services. It shares confidential information with outside entities only with the informed consent of the individual or pursuant to a court order or when there is deemed to be actual and immediate danger to the health or welfare of the individual.
- The program respects the right of participants/clients and the public to information about how the program protects confidentiality.
- Staff members that use DFTA's client data system:
 - Have been given a unique user ID and password.
 - Do not allow unauthorized individuals to use the client data system, gain access to passwords, or share IDs.
 - Have their access to the client data system immediately deactivated when they are no longer employed by the program or no longer need access to the database.

Compliance 7.2. Privacy.

Staff discuss personal matters with participants/clients in privacy.

Compliance 7.3. Release of Information.

- The program obtains the individual's signed Consent Form (DFTA Form or its own Release Form) before sharing information necessary for the client to receive services from another provider or to apply for benefits and entitlements. *Note: The Release covers all instances of information exchange and does not need to be renewed.*
- If Intake is conducted over the phone, the signed Consent is obtained at the first meeting of the client and a program representative face-to-face.
- If no direct contact between program staff and client is anticipated, the program reads the Consent Form to the client and obtains his/her verbal consent.
- The program notes that the client's consent was obtained in DFTA's client data system.

Compliance 7.4. Maintenance of Participant/Client Information

- Only workers authorized to use program files have access to them.
- Paper files are kept secure.
- All computer equipment is secure and protected from theft, damage, misuse or tampering.

Compliance 7.5. Requests for identifying information.

- The program refuses requests from outside organizations or persons for names or other identifying information about service receivers, such as addresses and phone numbers, unless such request is authorized by DFTA.

Compliance 7.6. Public Information Activities.

- Materials such as reports, press releases, videotapes, etc. produced by the program for public dissemination do not contain personally identifying information on any participant without his/her written consent.

Standard 8: Respect for All

The program is helpful, welcoming and respectful to inquirers and participants/clients.

Compliance 8.1. Phones are answered in a timely, helpful and courteous manner.

Compliance 8.2. The premises of programs that provide services on site are comfortable and cheerful to the extent possible within program resources.

Compliance 8.3. Participants and clients are welcomed, provided with accurate program information and, where services are provided on site, helped to feel “at home.”

Compliance 8.4. The program’s director and staff are accessible and available to participants/clients.

Compliance 8.5. Participants/clients receive information about changes in program policies and operations that affect their wellbeing in a timely manner.

Standard 9: Autonomy, Independence, and Civic Engagement

The program promotes participant/client autonomy, independence, decision-making and social/civic engagement to the extent possible.

Compliance 9.1. Wherever possible, the program offers service options and choices to participants/clients and respects individual preferences. *Also see service-specific standards.*

Compliance 9.2. Applicable only to senior centers: Advisory Council.

- The center has a functioning participant Advisory Council. *Note: Senior centers with a single-purpose Board of Directors are exempt from this requirement if at least 51% of Board members are center participants.*
 - The Advisory Council has written by-laws.
 - Advisory Council members are center participants elected through regularly scheduled elections open to the entire membership. Advisory Council Officers (i.e., President, Treasurer etc.) may be elected by the Advisory Council membership rather than the senior center membership.
 - The Council has a publicized meeting schedule.
 - The center director or her/his delegate attends meetings.
 - There are clear channels of communication from the Advisory Council to center management and the sponsoring organization.

DFTA strongly recommends that prior to an Advisory Council election, the Senior Center holds an orientation for the senior center membership to discuss the election process and roles and responsibilities of Advisory Council

members and officers, as a way to encourage participation in the process from seniors who have not previously participated.

DFTA strongly recommends that the Senior Center Sponsor and the Advisory Council jointly develop a written agreement detailing how Advisory Council fundraising accounts will operate (i.e., who has access, who signs the checks, what the money can be used for, how it is tracked, how often the Director provides the Advisory Council with a report on the account, etc.). DFTA does not have oversight over fundraising accounts because it is not public funding, but does recommend developing an agreement in order to avoid conflict.

Standard 10: Promotional Activities (Public Information and Outreach)

Where appropriate to the services it provides, the program conducts activities to promote its services.

Compliance 10.1. Promotion of services.

- At least twice yearly, the program promotes its services to the general public and/or underserved populations in its service area through promotional activities, unless services are over-utilized. Where services are under-utilized, promotional activities occurs more often. Promotional activities include:
 - **Public Information:** examples of public information include but are not limited to: obtaining media coverage for the program's services; stationing a representative at a Resource Fair in the community; distributing flyers or other promotional materials to various places in the community such as local street fairs, retail shops, pharmacies, residences; organizing a mass mailing of information; holding an event that brings currently unserved seniors to its site.
 - **Outreach:** This includes face-to-face or telephone contact between a staff person and an individual. Outreach is when the program finds an isolated older person, not when an older person finds the program. Examples include: (1) Staff visits to a new senior housing building to locate isolated individuals who have never been clients of the program (this contact must be conducted one-on-one and not done as a group presentation). (2) The program has a table at a health event where staff conduct face-to-face identification of isolated individuals by discussing the individual's needs and available services one-on-one.

Compliance 10.2. Public information and outreach materials include the availability of free language assistance for persons with limited English proficiency.

Compliance 10.3. The program can demonstrate that it regularly seeks support for its services and activities from other organizations or institutions in the community.

Standard 11: Linkages

The program works with other community service providers and organizations to foster coordination, minimize service duplication and promote access to services.

Compliance 11.1. The program maintains effective linkages.

- As appropriate to the services it provides, the program maintains effective linkages with other DFTA-funded programs in the community as well as with resources such as settlement houses and other multi-purpose service organizations, houses of worship, ethnic and social clubs, educational institutions, cultural programs, food stores, food pantries, banks and pharmacies.

Standard 12: Effective Administration

The program's policies and procedures promote effective administration.

Compliance 12.1. City, state and federal regulations/contract requirements.

- The program's policies and procedures address applicable city, state and federal regulations as required by contract. These include but are not limited to:
 - Prohibition of the use of funds to advance any sectarian or partisan effort.
 - Prohibition of any sectarian, partisan or religious services, counseling, proselytizing, instruction.
 - Prohibition of partisan political activity at the program site or where clients receive program services. If the program permits any legally qualified candidate for any public office (including the current office holder) to visit the facility or to visit clients for political purposes (e.g. to make a speech, provide a photo or TV opportunity, etc.), other candidates for the same office are allowed to visit for the same purpose, amount of time, number of appearances, time of day, etc. (The program is not obligated to inform other candidates, but only to respond to requests).
 - Attendance by seniors at any event involving the appearance of public officials is voluntary.
 - Contributions for political purposes may not be collected.
 - Prohibition of illegal gambling.

Compliance 12.2. Personnel Policies.

- Written personnel policies cover these areas at minimum (note: where there are DFTA standards in these areas, policies are consistent with standards):
 - Prohibition of Nepotism and Conflict of Interest
 - Non-discrimination/non-harassment
 - Confidentiality protection
 - Background checks/references
 - Drug-free/Alcohol-free workplace
 - Employment classification (exempt/non-exempt, part-time, full-time, temporary)
 - Leave policies (vacation, sickness, FMLA)
 - Jury Duty
 - Military Service Leave
 - Employee Grievance Procedure
 - Employee Benefits
 - Compensatory Policy for Executive Director
 - Whistleblower Policy
 - Employee Termination
 - Disciplinary Actions and Dismissals: Documentation regarding discipline/dismissal of DFTA-funded employees is maintained and made available to DFTA upon request.
 - Any employee involved in theft or inflicting bodily harm on another is suspended immediately without pay pending further investigation of the charges.

Compliance 12.3. Other policies.

- Record retention and disposal
- Social Media
- Incident/Accident Protocols (on and off-site):
 - See Standard 20.

Standard 13: Prohibitions on the Usage of Public Funds

The program does not use public funds to support, endorse or promote commercial products or services.

Compliance 13.1 The program observes these prohibitions:

- Verbal or written endorsement of products or services is not allowed.
- Acceptance of money or other incentives from vendors aimed at encouraging enrollment of seniors in a service or purchase of a product is not allowed.
- Sales of commercial products or services are not allowed:
 - Mailing or calling lists that contain participant/client names, addresses, telephone numbers, etc. are not given out under any circumstances.
 - Individual vendors may not peddle products or conduct sales. Vendors may give instructional and educational talks on specific topics of concern to older persons – e.g. availability and use of home health equipment, medical equipment, etc. The presentations must be educational, not commercial, and the program must allow other similar vendors the same access if requested.

Standard 14: Due Recognition

The program gives due recognition to government funding sources.

Compliance 14.1. The program gives due recognition to DFTA and its state and federal funding sources (as applicable) for aging services in printed program brochures, printed stationery and other public information materials.

Compliance 14.2. Unless inconsistent with applicable laws and lease and license requirements, the program has an identifying sign at its point of entrance, including sponsorship by the Department, program name and days and hours of operation.

Staff Continuity and Appropriateness

Standard 15: Staffing

The program's staffing corresponds to levels specified in its contract proposal.

(See also service specific standards.)

Compliance 15.1. The program's staffing corresponds to the levels proposed to DFTA in its response to DFTA's RFP, or as later approved by DFTA

Compliance 15.2. Key positions are filled within three months or the program can document strenuous efforts to fill important vacancies.

Standard 16: Staff Understanding of Responsibility

The program ensures that staff understand their job responsibilities, program purpose and mission and DFTA requirements as applicable to their functions.

Compliance 16.1. There are current job descriptions for each position, including title, minimum qualifications and duties.

Compliance 16.2. The program maintains documentation that new staff have read and understood their job descriptions.

Compliance 16.3. Staff function in the position for which they were hired, and in accordance with their job descriptions and program personnel policies.

Compliance 16.4. The program provides staff with information needed for job performance in a timely and effective fashion, including but not limited to:

- The program's most recent contract proposal to DFTA.
- DFTA's program standards and applicable service standards.
- Changes to policies and procedures.
- Operational issues, problems, and concerns as relevant to effective job performance.

Standard 17: Orientation, Training, and Supervision

The program ensures that staff and volunteers are appropriately oriented, trained and supervised.

Compliance 17.1. The program provides and documents its orientation of new staff.

- Orientation covers the following at minimum (see also service specific standards):
 - Program personnel policies;
 - Job functions and tasks;
 - Program policies and procedures;
 - Relevant DFTA standards;
 - Participant and client rights (including rights to consideration, privacy, dignity and respect);
 - Emergency procedures

Compliance 17.2. Appropriate staff attend mandated DFTA trainings.

Compliance 17.3. A designated staff person supervises volunteers.

Procedures and Methods

Standard 18: Data Collection

The program uses DFTA's client data system to register all participants/clients and to document service provision.

Compliance 18.1. Registration Data.

- The program collects the following information at registration: name, address, phone number(s), emergency contact, physician, major chronic condition(s), birth date, proof of age or signed declaration of age, diet, and for referral and reporting purposes, income and ethnic status. *Note: Services cannot be denied if this information is not provided.*

Compliance 18.2. The program reviews the participant/client's profile with the individual on an annual basis and updates as necessary, unless a more frequent review is specified for specific services.

Compliance 18.3. The program records service provision to the participant/client in DFTA's client data system.

Compliance 18.4. The program inactivates/closes the participant/client's file in DFTA's client database when the individual will no longer be receiving services from the program.

- See Service specific standards for exceptions; e

Standard 19: Emergency Contact Information

The program requests emergency contact information from every participant/client.

Compliance 19.1. The program has a current record of emergency contacts for participants/clients, including name, address, telephone numbers and locations where contacts can be reached.

Standard 20: Emergency Procedures

The program has comprehensive accident and emergency procedures covering on-site and/or off-site services, as applicable.

Compliance 20.1. Fire/Other Evacuation Emergency Procedures.

- When services are provided on-site, the program has a written evacuation plan that has been developed in consultation with the local Fire Station for situations requiring building evacuation. The plan includes:
 - The location of fire extinguishers;
 - The primary fire exits and alternative exits;
 - The order in which groups should leave the building;
 - Persons responsible for leading groups;
 - Persons responsible for checking premises, including bathrooms; and,
 - The destination of each group once outside.
- The written plan and diagram are posted in each room, office and public bulletin board.
- The program holds two evacuation (fire) drills annually and documents the date and time of each drill, who participated in the drill (to ensure that assigned staff manned the assigned exits and led group out as indicated in the written evacuation plan), the time needed to evacuate the building and any problems encountered.
- Each staff person and volunteer is trained on evacuation emergency procedures and knows his or her responsibility in the event of an emergency, including whom to notify.

Compliance 20.2 Accident/Medical Emergencies.

- The program has a written plan that specifies staff responsibilities in dealing with accidents or medical emergencies. The plan includes what to do for the victim, what to do for other participants who witness the emergency, who to notify, and insurance or other forms that must be completed.
- The program has the telephone number of all local emergency agencies including the local police precinct.
- When services are provided at the program facility, at least one staff person has current certification on CPR and how to use a defibrillator machine.
- If 911 has been called, a staff person:
 - stays with the participant until 911 is on the scene;
 - informs the program director, who gets in touch with the participant's emergency contact.

Compliance 20.3 Emergencies on Group Trips.

- The program has a written plan to deal with emergencies that occur on trips, such as accidents, medical emergencies, or the disappearance of a participant from the group.
- The written plan specifies what to do for the ill or injured individual; what do for the rest of the group; criteria for ending the trip; who to notify, and what forms to complete.
- A staff person or volunteer of the organization that has organized the trip accompanies each trip as the designated “leader,” knows the exact population count, and has been trained on emergency procedures.
- Before each group trip the designated leader does a head count and checks that participants carry identification with them, and that they have the telephone number of the center.
- Group trip participants are told that they must notify the group leader if they intend to leave the group for any reason.
- If a participant is “lost” from the group, and her/his whereabouts cannot be ascertained, the incident is immediately reported to the program, to DFTA and to the police.

Compliance 20.4 Program Accident and Incident Recording and Reporting.

- There is an accident/incident report on file for all accidents and incidents that involve or affect client safety, services continuity and program integrity. Examples include: accidents or other participant/client emergencies, incidents of physical violence, facility emergencies such as flooding or fires, burglaries or forced entry; thefts, vandalism, etc.
- Report elements comply with DFTA instructions.
- Accidents and incidents are reported appropriately and timely to insurance companies and other regulatory bodies.
- Accidents or incidents involving serious injury or death of a participant are reported immediately to DFTA and to appropriate authorities.

Standard 21: Emergency Preparedness

The program has an emergency preparedness and response plan to address local, regional and citywide emergencies.

Compliance 21.1. As required by DFTA, the program has a current emergency preparedness and response plan for local, regional and citywide emergencies.

Compliance 21.2. During any year in which the plan requires activation, the program’s response is timely and in accordance with its plan and other DFTA and City requirements.

Compliance 21.3. The program arranges at least one emergency preparedness seminar annually.

Adherence to Target Populations and Target Areas

Standard 22: Target Population

The program serves its target population and service areas.

Compliance 22.1. The program serves all communities and community districts within its service area.

Compliance 22.2. The program can demonstrate that it reaches out to the diverse linguistic, cultural and socioeconomic older adult groups within its service area and seniors across the age spectrum.

Compliance 22.3. The program can demonstrate that it reaches out to unserved and underserved older populations, including those in greatest economic and social need, particularly older persons in these categories: low income; low income minority; limited English proficiency; frail and/or with disabilities.

Physical Environment and Equipment

Standard 23: Safety

The program facility is safe.

Compliance 23.1. The program operates in a code compliant environment.

- Equipment is code compliant:
 - Inspections of fire alarm systems occur regularly (record is maintained and current), carbon monoxide detectors are maintained as required by code, including LL 10/2014 and, if required, there is a current holder of the required Certificate of Fitness.
 - If required by code, boilers are inspected and reports filed annually with the Department of Buildings.
 - Central Air Conditioning systems have been filed with the Department of Buildings and have all required OTCR approvals, including energy code compliance.
 - Filters for central air conditioner and window/wall units are replaced or cleaned on a regular basis.
 - Central air conditioning systems are regularly serviced and maintained.
 - Range hood exhaust and ANSUL systems are periodically inspected as per the NYC Fire Code.
- **Code Violations.** All code violations cited by the NYC Building, Fire, Health or Sanitation Departments are addressed and corrected on a timely basis as required by the Department issuing the citation. Certificates of Correction for each violation are filed in a timely manner.
 - Upon receiving a citation for a violation, the program notifies DFTA immediately and forwards a copy of the citation.

Compliance 23.2 Certificate of Occupancy.

- The site has a Certificate of Occupancy (C of O) issued by the New York City Building Department (The C of O certifies that the building is suitable for occupancy for the purpose for which it is being used).
- Exception: Buildings erected before 1938, with no change in occupancy or use. However, if the building has been substantially altered, a C of O is required.
- Program operations do not exceed or contradict the Certificate of Occupancy at any time.

Compliance 23.3 Place of Assembly Permit.

- Each room large enough to be occupied by 75 or more persons has a current Place of Assembly Certificate of Operation issued by the NYC Building Department and a current Place of Assembly Permit issued by the Fire Department.
- Exception: Buildings erected before 1938 with no change in occupancy or use.
- The current Permit, maximum occupancy sign and approved floor plan are publicly posted.

Compliance 23.4 Exits and Exit Lights.

- The site has two exits.
- Exit doors:
 - Have working exit lights to identify their location.
 - Are clearly identified as exits.
 - Open in the direction of exit travel. If premises are occupied by 75 or more persons, one exit leads directly outside while the second may lead to a rated corridor.
 - Are unobstructed at all times and may be easily opened when building is in use.
 - Do not require a key from the exiting side.

Compliance 23.6. Emergency Lighting. Rooms occupied by 75 or more persons have emergency lighting as specified in building code.

Compliance 23.7. Fire Preparedness.

- Programs that are not required to obtain a Place of Assembly Permit each year request an annual fire inspection through the local Firehouse.
- Programs that have elevators maintain inspections as required by the Department of Buildings.
- Programs that have elevators place signs at each landing that show the location of the stairs in a diagram and instruct occupants to use the stairs in case of fire.
- Premises are equipped with smoke detectors as required by code.
- Premises are equipped with fire extinguishers as required by the Fire Department. Specifications of the type, number, placement and maintenance are obtained from the Bureau of Fire Prevention.
- Extinguishers are tagged with the date of the last maintenance inspection.
- Extinguishers are of approved type.
- Extinguishers are inspected annually.
- Decorations, drapes, curtains, scenery used in play production, etc. are certified flame proofed and flame-proof certification is kept up to date.
- Tables and seating in Place of Assembly permitted spaces are situated in accordance with the approved PA plan. Tables in the dining room provide clear aisles to the exits.

- Smoking is not permitted. “No Smoking” signs are posted in appropriately places.

Compliance 23.8. Emergency first aid.

- First Aid Kits are visible and accessible to staff.
- Contents are replenished after use or when passed their expiration dates.

Compliance 23.9. Pest and Rodent Control.

- There is no roach infestation, or infestation by other pests or rodents, in any program room, or in the kitchen, dining room, or bathroom.
- Insect infestation control is scheduled when seniors are not present.

Compliance 23.10. Avoidance of safety hazards.

- Stairs and passageways are well lit.
- Stairs, treads, and landings are built with/made of non-skid material. This is not limited to rubberized treads and could simply be sanded paint or concrete. Some programs are operating in buildings that were built before the 1968 building code, therefore, current stair conditions in those premises are grandfathered in, and should not be considered out of compliance.
- Hallways and areas leading to exits are free of obstructions and debris.
- Electric wires are covered.
- Window glass has no serious breaks or cracks.
- Flooring is safe, no broken, cracked, chipped loose tiles or planks.
- Ceilings are safe, no extensive breaks, cracks, peeling or chipping in tiles, paint or plaster.
- Toxic substances are stored in a locked area not accessible to participants.
- The site is litter free.

Standard 24: Cleanliness**The program facility is clean and well-maintained.****Compliance 24.1. Program rooms and grounds.**

- All program rooms and grounds are clean and safe.
- All program rooms (including ceilings) and grounds are well-maintained.
- Paint and plaster are maintained in good condition (no serious breaks, peeling or cracks).

Compliance 24.2 Bathrooms.

- Cleanliness is maintained.
- Ventilation is adequate.
- Operable windows are screened.
- Adequate handwashing facilities are provided and maintained in or adjacent to toilet rooms.
- Each handwashing facility is to be provided with running hot and cold or tempered potable water.
- Each handwashing facility is to be provided with hand-cleaning soap or detergent with a sanitary storage receptacle. Individual single-service towels, warm air blowers or clean individual sections of continuous cloth are to be provided. Conveniently located waste receptacles are to be provided if disposable towels are used.
- Handwashing facilities, soap or detergent receptacles, handwashing devices and related facilities are kept clean and in good repair. Handwashing signs are posted at all employee handwashing facilities.
- Toilets, urinals, sinks and any mechanical hand dryers are in working condition.

Recordkeeping and Reporting

Standard 25: Records

The program maintains all records in good order.

- Records are:
 - Easily Accessible;
 - Clear;
 - Legible;
 - Well-organized;
 - Up-to-date.

Standard 26: Monitoring

Records and other documents are available for monitoring.

Compliance 26.1. The program makes records available to DFTA and NYSOFA, as requested. These include but are not limited to the following, as applicable:

- Documentation of any service denials and temporary exclusions, including actions taken and reasons.
- Complaint/grievance records
- Contributions Records
- Notices of Code Violations and copies of responses to issuing agencies
- Fire/Theft/Vandalism Documentation

- Accident/Incident Reports
- Fire and Emergency Drill Records
- Employee files containing:
 - Documentation of orientation
 - Signed Job Description
 - Job application and/or resume
 - Other records relating to hiring process, as applicable
 - See service specific standards for other requirements
- Participant/client files containing documents specified in service-specific standards.

Standard 27: Recordkeeping

The program maintains records in accordance with DFTA requirements.

Compliance 27.1. See service-specific standards for specific documents/records that must be maintained.

Compliance 27.2. Maintaining records.

- The program maintains required records for seven years, unless otherwise specified in service-specific standards. If any litigation, claim, audit, negotiation or other action involving the record has been started before the expiration of the seven year period, the records are retained until completion of the action and resolution of all issues which arise from it, or for a seven-year period, whichever is longer.

Compliance 27.3. When required by DFTA, in accordance with required timeframes and content specifications, the program submits requested information, reports and documents.