Aging and Disability Resource Center Annual Update Checklist

As required in the ADRC Scope of Services, the ADRC will annually review and submit information regarding the ADRC. Please complete the steps listed below indicating with a checkmark when the item has been completed. Please sign and submit this form by email to your assigned regional quality specialist or through DocuSign by January 1, 2026. The information to review and submit can be found on the <u>ADRC SharePoint</u> site. If you have any questions, please contact your assigned regional quality specialist. Thank you.

Signature	Date signed
Title:	
ADRC director/supervisor or designee name:	
ADRC of	
$\hfill \square$ I have completed the checklist and certify that the information requested updated as required.	ed has been reviewed and
 Optional: Share a success story illustrating the positive impact that your customer during the past year. This information can be submitted throu informational page under the Useful Links tab. Please exclude any person 	gh your ADRC
□ Confirm that you have submitted the ADRC annual quality improvement the Change Project Report and Instructions (F-00615) or Change Project Instructions (F-00615A) to your regional quality specialist.	
☐ Confirm that you have reviewed the personnel section on your ADRC inf complete, correct, and current. This includes updating the review type, observation date for all ADRC specialists. (ADRC specialists hired on or a year are not required to have an observation.)	observation type, and
☐ Confirm that you have uploaded the organizational chart(s) on your ADF complete, correct, and current.	RC informational page t is
☐ Confirm that the Governing Board section on your ADRC informational p and it is complete, correct, and current.	page has been reviewed
☐ Confirm that the ADRC Directory has been reviewed and it is complete, correct, and current.	