Resident intake checklist

Use with the companion admission guide. Check only when evidence is complete. Mark conditional items N/A with a reason. This is a management tool, not an ADHS form.

Resident: _____ Home: _____

Acceptance date/time: _____ Occupancy date: _____

Manager: _____ Care level: _____

☐ 1. Confirm care fit before acceptance

Match needs to the license, written scope, staff capabilities, and admission restrictions. Resolve any applicable exception before accepting.
REQUIREMENT | R9-10-803(A)(2), 806(A)(5), 807(C), 814-816

Owner: _____ Due: _____ Done: _____ Evidence: _____

☐ 2. Obtain the clinical needs document

Before or at acceptance: document dated within the preceding 90 calendar days. Address medical/nursing services and restraints; verify permitted signer.
REQUIREMENT | R9-10-807(B); additional behavioral-health documentation if applicable

Owner: _____ Due: _____ Done: _____ Evidence: _____

☐ 3. Complete the documented residency agreement

Before or at acceptance: include all ten required items and the manager's signature/date. Include the home's nighttime-awake staffing disclosure.
REQUIREMENT | R9-10-807(D); use the ten-item list in the companion guide

Owner: _____ Due: _____ Done: _____ Evidence: _____

☐ 4. Give the resident or representative their copies

Before or at acceptance: residency agreement, resident rights, and health care directive policy/procedure. Keep the original agreement in the record.
REQUIREMENT | R9-10-807(F); R9-10-810(A)

Owner: _____ Due: _____ Done: _____ Evidence: _____

☐ 5. Establish medication orders and arrangements

Have orders for medications administered or assisted with. Document services under the applicable medication pathway. Track any verbal-order follow-up.
REQUIREMENT | R9-10-811(C)(12)-(14); 817; personal/directed care OTC rules: 814(G), 815(D)

Owner: _____ Due: _____ Done: _____ Evidence: _____

Acceptance: when the person begins living in and receiving assisted living services, or begins receiving respite/adult day services. Do not substitute the tour or reservation date. R9-10-801(1).

Track the admission deadlines

Working days and calendar days are different. Use acceptance or occupancy as specified. The 14-day service-plan window does not extend other admission requirements.

Resident: _____ Manager: _____

☐ 6. Exit and evacuation-route orientation

Within 24 hours after acceptance. Orient the resident to exits and evacuation route, document the orientation, and retain it in the medical record.
REQUIREMENT | R9-10-819(B); R9-10-811(C)(18)

Owner: _____ Due: _____ Done: _____ Evidence: _____

☐ 7. Obtain the permitted resident-side signature

Before or within five working days after acceptance. Obtain the signature of the resident or another individual permitted by the rule.
REQUIREMENT | R9-10-807(E); agreement itself is due before or at acceptance

Owner: _____ Due: _____ Done: _____ Evidence: _____

☐ 8. Verify TB screening and evidence

Before or within seven calendar days after occupancy. Use R9-10-113's screening and evidence pathway; check prior-positive/history requirements.
REQUIREMENT | R9-10-807(A), 113; limited respite exception: 808(B)(2)

Owner: _____ Due: _____ Done: _____ Evidence: _____

☐ 9. Complete the initial service plan

Except respite: no later than 14 calendar days after acceptance. Include required content, participation, clinical review, and all applicable signatures/dates.
REQUIREMENT | R9-10-808(A)(1)-(3), (5); additional content: 814(F), 815(C)

Owner: _____ Due: _____ Done: _____ Evidence: _____

☐ 10. Verify any verbal medication order in writing

If used: obtain the practitioner's written verification within 14 calendar days after the verbal order was received. Document the verbal order when received.
REQUIREMENT | R9-10-817(A)(2)

Owner: _____ Due: _____ Done: _____ Evidence: _____

☐ 11. Give the first shift a practical handoff

Explain verified care needs, allergies, assistance, current orders, communication needs, routines, and open follow-up. Resolve medication discrepancies.
PRACTICE | Suggested management practice; use verified records and practitioner direction

Owner: _____ Due: _____ Done: _____ Evidence: _____

Respite: use the three-working-day service-plan pathway on page 4. The TB exception applies only when the respite resident is not expected to be present for more than seven calendar days.

Check the resident record

Verify contents, signatures, dates, and the record location. Some records are conditional or arise later. A request for a document is not proof that it has been received.

Resident: _____ Manager: _____

☐ 12. Identity, dates, and care contacts

Name, birth date, acceptance date; primary care provider, other care providers, and emergency/change/termination contact with required contact details.
REQUIREMENT | R9-10-811(C)(1)-(2), (4)

Owner: _____ Due: _____ Done: _____ Evidence: _____

☐ 13. Representative and decision-making documents

When applicable: representative contact information plus resident consent, relevant power of attorney, or guardianship order; health care directive.
REQUIREMENT | R9-10-811(C)(3), (8); do not assume every family contact has authority

Owner: _____ Due: _____ Done: _____ Evidence: _____

☐ 14. Required admission documents

Clinical needs documentation; applicable general/informed consent; required TB evidence; signed residency agreement and amendments.
REQUIREMENT | R9-10-811(C)(5)-(9); signature and TB deadlines remain as specified

Owner: _____ Due: _____ Done: _____ Evidence: _____

☐ 15. Service plan and care records

Plan and updates, documentation of services provided, medication orders, administration/assistance records, and refusals where applicable.
REQUIREMENT | R9-10-811(C)(10)-(14); R9-10-808(C)(1)(g)

Owner: _____ Due: _____ Done: _____ Evidence: _____

☐ 16. Safety and resident-specific records

Exit orientation; applicable clinical determinations and behavior records; vaccination availability notification; significant changes and actions taken.
REQUIREMENT | R9-10-811(C)(15)-(22); see conditional pathways on page 4

Owner: _____ Due: _____ Done: _____ Evidence: _____

☐ 17. Record access and integrity

Authorized, dated, legible, authenticated entries; original entries remain legible. Protect records. Electronic records require safeguards and computer timestamps.
REQUIREMENT | R9-10-811(A)-(B)

Owner: _____ Due: _____ Done: _____ Evidence: _____

Ongoing: Add applicable financial-affairs notifications and termination records when needed. Keep vaccination availability/refusal documentation within the home's process. R9-10-811(C)(23)-(24); A.R.S. 36-406(A)(1)(d).

Check conditional pathways

Mark each item applicable or N/A, with the reason and supporting record. These are review prompts. Read the full cited provision before relying on an exception.

Resident: _____ Manager: _____

☐ 18. Respite care

Current-needs service plan within three working days after acceptance, or qualifying prior-plan review/update. Significant-change update: three working days.
REQUIREMENT | R9-10-808(B)(1); qualifying prior plan developed within previous 12 months

Owner: _____ Due: _____ Done: _____ Evidence: _____

☐ 19. Short respite TB exception

Only if the respite resident is not expected to be present for more than seven calendar days. Record expected stay and reassess promptly if plans change.
REQUIREMENT | R9-10-808(B)(2); no blanket waiver of other admission requirements

Owner: _____ Due: _____ Done: _____ Evidence: _____

☐ 20. Bed/chair confinement, pressure sore, nursing

Assess the exact personal/directed-care restriction and applicable exception. Where 814(B)(2) applies, verify request, practitioner review/determination, and plan.
REQUIREMENT | R9-10-814(A)-(D); R9-10-815(B); hospice is not a blanket exception

Owner: _____ Due: _____ Done: _____ Evidence: _____

☐ 21. Directed care and memory care

Designate a representative when unable to direct self-care. Include additional plan content and verify safe care capability and applicable memory-care requirements.
REQUIREMENT | R9-10-815(A), (C); 816, including 816(F)

Owner: _____ Due: _____ Done: _____ Evidence: _____

☐ 22. Behavioral care

Required professional evaluation within 30 calendar days before acceptance or before behavioral care starts; scope review and signed/dated determination.
REQUIREMENT | R9-10-812; reevaluate at least every six months while need continues

Owner: _____ Due: _____ Done: _____ Evidence: _____

☐ 23. Other behavioral health services

For authorized services: behavioral health professional evaluation within 30 calendar days before acceptance; scope review and signed/dated determination.
REQUIREMENT | R9-10-813; 807(B)(2); reevaluate at least every six months while need continues

Owner: _____ Due: _____ Done: _____ Evidence: _____

Read closely: Directed care's bed/chair and pressure-sore exception references 814(B)(2), not the separate personal-care short-term illness/injury provision. See the companion guide for details.

Assign the follow-up

Use this page for unresolved work and recurring dates. Scheduling and this sign-off format are management practices; they do not certify compliance or clinical suitability.

Resident: _____ Manager: _____

Service-plan review dates

Supervisory: at least every 12 months. Personal: every six months. Directed: every three months. Also review/update within 14 calendar days after a significant physical, cognitive, or functional change. Respite follows the separate three-working-day rule.

Next scheduled review: _____ Responsible person: _____

Other follow-up

Track applicable six-month clinical evaluations, verbal-order verification, and TB symptom documentation under R9-10-113. Use the precise trigger in the cited rule.

1. Open item: _____

Owner: _____ Due: _____ Follow-up: _____

Evidence / record location: _____

2. Open item: _____

Owner: _____ Due: _____ Follow-up: _____

Evidence / record location: _____

3. Open item: _____

Owner: _____ Due: _____ Follow-up: _____

Evidence / record location: _____

Manager review: _____ Date/time: _____

Sources and use

Primary source: Arizona Administrative Code, Title 9, Chapter 10, Supplement 26-1 (March 31, 2026). Read R9-10-113 and Article 8 with the companion admission guide. Rulemaking index checked through September 25, 2026.

Official Arizona rules PDF | A.R.S. 36-401 | Tendera resources

Not legal or clinical advice. This checklist covers the guide's intake workflow, not every obligation of a licensed facility. Keep completed copies with authorized resident records.