

1 SETTING

1.1 Does the program's setting isolate individuals from the surrounding community and persons who are not receiving Medicaid HCBS services?

Expectation: Individuals do not receive services/training primarily in isolated facilities, or settings which limit their potential integration with the community at large.

Related Questions:

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| Is the program surrounded by high walls/fences and/or have closed/locked gates? | <input type="checkbox"/> YES | <input type="checkbox"/> NO |
| Is the program setting among private residences/businesses and community resources? | <input type="checkbox"/> YES | <input type="checkbox"/> NO |
| Does the program purposefully separate individuals receiving Medicaid HCBS services from those who do not? | <input type="checkbox"/> YES | <input type="checkbox"/> NO |
| Is the program on the grounds of, or adjacent to, a public institution? <i>Note: A Public Institution is an inpatient facility that is financed and operated by a county, state, municipality, or other unit of government.</i> | <input type="checkbox"/> YES | <input type="checkbox"/> NO |
| Is the setting located on a parcel of land that contains more than one State licensed facility? | <input type="checkbox"/> YES | <input type="checkbox"/> NO |
| Is the setting located in a building that is also a publicly or privately operated facility that provides inpatient institutional treatment? | <input type="checkbox"/> YES | <input type="checkbox"/> NO |

1.2 Is the program traversable by the individuals it serves; does it meet the needs of individuals who require supports?

Expectation: Individuals are able to maneuver through the hallways, doorways, and common areas with or without assistive devices. Supports are available to individuals who require them.

Related Questions:

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| Are supports provided for individuals who need them to move around the setting independently/as they are able (grab bars, ramps, viable emergency exits etc.)? | <input type="checkbox"/> YES | <input type="checkbox"/> NO |
| Are appliances/amenities accessible to individuals with varying access needs? | <input type="checkbox"/> YES | <input type="checkbox"/> NO |
| Can individuals make use of furniture and spaces conveniently and comfortably? | <input type="checkbox"/> YES | <input type="checkbox"/> NO |
| Are hallways/common areas accessible to individuals of varying needs? | <input type="checkbox"/> YES | <input type="checkbox"/> NO |
| Are individuals, or groups of individuals, restricted from areas of the program because it is inaccessible to individuals with specific ambulatory needs? | <input type="checkbox"/> YES | <input type="checkbox"/> NO |

1.3 Is the program non-institutional in nature?

Expectation: Programs should have characteristics of community settings.

Related Questions:

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| Does the program offer individuals flexibility outside of the structured events? | <input type="checkbox"/> YES | <input type="checkbox"/> NO |
| Does the program afford opportunities for individual schedules that focus on the needs and desires of an individual? | <input type="checkbox"/> YES | <input type="checkbox"/> NO |

2 ACTIVITIES AND COMMUNITY INTEGRATION

2.1 *Do individuals go outside of the facility during the receipt of services?*

Expectation: Individuals receive services in community settings outside the facility.

Related Questions:

Do individuals exercise choice in determining community-based activities (related to objectives in their service plan) in which they will participate during receipt of services? YES NO

Do individuals have planned opportunities to interact with citizens without disabilities? YES NO

Do individuals have unplanned opportunities to interact with citizens without disabilities? YES NO

How often does the program provide opportunities for individuals to receive services in community settings outside the facility?

2.2 *Do services provided by the program make individuals more aware of community resources and employment options?*

Expectation: Individuals have opportunities to discover and learn to access new community resources and identify potential employment options.

Related Questions:

How does the program facilitate individuals' access to the community?

Does the program organize activities or facilitate access to community resources of individuals' choosing (related to objectives in their service plan)? YES NO

How does the program and its organized activities expose individuals to new community resources and potential employment options?

2.3 *Are individuals employed outside of the facility?*

Expectation: Individuals have the ability to seek and gain competitive employment in the community.

Related Questions:

How does the program aid individuals who wish to pursue competitive employment in the community?



2.4 *Are individuals able to move freely outside of the facility?*

Expectation: Individuals have full access to the community and are allowed to come and go from the facility, as they are able, unless the individual's safety would be jeopardized. Reasons to restrict movement are documented in the individual's record. Attempts to mitigate safety issues prior to revoking an individual's right to freedom of movement are documented.

Related Questions:

Are individuals able to come and go from the facility and its grounds as they are able? YES NO

Can individuals engage in community and social activities of their preference outside of the facility as they are able? YES NO

Are individuals moving around inside and outside of the facility? YES NO

Does the facility provide accessible transportation so individuals may access the community? YES NO

Is transportation provided or arranged by the facility to community activities? YES NO

How does the facility organize appropriate transportation to community activities?

Do individuals have access to public transportation? YES NO

Does the facility offer training to individuals on how to use public transportation? YES NO N/A

Are public transport schedules and contact information readily accessible to individuals? YES NO N/A

Do individuals with physical accessibility needs have access to accessible transportation? YES NO

Describe and provide a copy of the facility's policies and procedures regarding transportation to community activities.

3 CHOICE, DIGNITY & RESPECT

3.1 Do individuals have opportunities to make choices relating to all aspects of services received in the program free from coercion?

Expectation: Individuals have opportunities to make choices relating to all aspects of services received in the program free from coercion.

Related Questions:

Does the setting ensure individuals are supported to make decisions and exercise autonomy to the greatest extent possible? YES NO

Do staff retaliate or impose consequences on individuals in response to complaints? YES NO

Are individuals allowed to voice grievances to the facility staff, public officials, the ombudsman, or any other person, without fear of reprisal, retaliation, restraint, interference, or coercion? YES NO

How does the facility ensure individuals are allowed to voice grievances without fear of reprisal, retaliation, restraint, interference, or coercion? Please explain or provide a copy of the facility's policy and procedure on grievances.

Do individuals make choices regarding the activities in which they engage that are aligned with their plan of care/service plan? YES NO

Are individuals encouraged to create a personal activities schedule? YES NO

Are individuals encouraged to initiate and create activities of their choice? YES NO

Do individual schedules vary from others? YES NO

3.2 Are individuals provided appropriate information/resources on how to file an anonymous complaint?

Expectation: Information is available to individuals on how to file an anonymous complaint. Telephone numbers for appropriate regulating bodies (e.g., the Department of Health and Environmental Control, Long-Term Care Ombudsman, Department of Social Services - Adult Protective Services) and information for reporting Abuse, Neglect and Exploitation are posted in a common area of the facility.

Related Questions:

How does the program make information about how to register an anonymous complaint available to individuals?

Is information about filing complaints posted in obvious and accessible areas? YES NO

3.3 *How do staff treat individuals?*

Expectation: Staff treat individuals in a dignified manner.

Related Questions:

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| Do staff greet and chat with individuals? | <input type="checkbox"/> YES | <input type="checkbox"/> NO |
| Do staff converse with individuals while providing assistance/services and during the course of the day? | <input type="checkbox"/> YES | <input type="checkbox"/> NO |
| Do staff talk to other staff in front of individuals as if the individual is not there? | <input type="checkbox"/> YES | <input type="checkbox"/> NO |
| Do staff address individuals in the manner they like to be addressed? | <input type="checkbox"/> YES | <input type="checkbox"/> NO |
| Are staff available when support/assistance is needed or desired? | <input type="checkbox"/> YES | <input type="checkbox"/> NO |
| Are there program policies for responding to incidents in which staff do not treat individuals with dignity and respect? | <input type="checkbox"/> YES | <input type="checkbox"/> NO |
- Please provide a copy.

3.4 *Are individual choices accommodated?*

Expectation: Individual choices are accounted for and honored unless the individual's safety would be jeopardized and in accordance with the person-centered plan.

Related Questions:

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| Do staff ask the individual about his/her needs/preferences? | <input type="checkbox"/> YES | <input type="checkbox"/> NO |
| Are individuals aware of how to make service requests? | <input type="checkbox"/> YES | <input type="checkbox"/> NO |

How are individual requests accommodated?

3.5 *Are individuals, or their representatives, active participants in the development of, and updates to, the plan of care / service plan?*

Expectation: Individuals and/or their representatives are active participants in the service planning process. Planning meetings occur at times convenient to the individual/representative.

Related Questions:

How does the setting post or provide information to individuals/representative(s) about how to request and schedule a planning meeting?

Was the individual/representative(s) present during the last plan meeting? YES NO

Do individuals participate in their plan meetings? YES NO

Is the individual's input reflected in the service plan? YES NO

3.6 *Is the individual's right to dignity and privacy respected?*

Expectation: The individual's right to dignity and privacy is protected and respected.

Related Questions:

Is health information about individuals kept private? YES NO

Is health information stored in a central location, locked in a secure area, and only accessible to professional staff? If no, where is it stored? YES NO

Are schedules of individuals for PT, OT, medications, restricted diet, etc., posted in a general open area for all to view? YES NO

Are health-related and personal care activities conducted in private locations? Examples: blood pressure readings, personal hygiene, incontinence care, etc. YES NO