Appendix P

Home and Community-Based (HCB) Settings Quality Review – State-level
Heightened Scrutiny

South Carolina Department of Disabilities and Special Needs (SCDDSN) Category 3 settings

Heightened scrutiny is the process of identifying settings that are presumed to have the characteristics of an institution and therefore are subject to more intense review (scrutiny) by the state. Using the criteria in 42 CFR 441.301(c)(5), the South Carolina Department of Health and Human Services (SCDHH) gathered data on settings to determine whether the settings have home and community-based (HCB) qualities. SCDHH named this process the “HCB Settings Quality Review.” This process may also be referred to as “state-level review.” The details of this process are found in Section 5.7 of the SC HCBS Statewide Transition Plan.

Category 3 settings are defined in the Home and Community-Based Services (HCBS) regulation as, “setting[s] that has the effect of isolating individuals receiving Medicaid HCBS from the broader community of individuals not receiving Medicaid HCBS.” South Carolina utilized the following additional criteria to identify settings in this category:

- Setting is a Community Residential Care Facility (CRCF) that was formerly an Intermediate Care Facility for Individuals with Intellectual Disabilities (ICF/IID), and is physically located next to another CRCF that was also formerly an ICF/IID
- Setting is a HUD 811 apartment complex (disability specific complex)
- Setting has a locked fence around the property
- There are three (3) or more HCBS settings clustered together operated by the same provider.

Following Centers for Medicare and Medicaid Services (CMS) March 2019 guidance, settings under Category 3 will be divided further into two sub-groups based on their Compliance Action Plan quality and robustness and review of all required evidence in this process.

- Settings that can fully implement all their HCBS remediation steps to comply with HCBS regulatory criteria by July 1, 2021. This first list of settings will not be submitted for formal CMS heightened scrutiny review but must be listed for public comment. That list is found in Appendix O of the Statewide Transition Plan. CMS reserves the right to review any of the settings on this first list.
- Settings that can fully implement all their HCBS remediation steps to comply with HCBS regulatory criteria but will not be able to do so by July 1, 2021. This second list of settings
will be submitted for formal CMS heightened scrutiny review and will be listed in this document (Appendix P of the Statewide Transition Plan) for public comment.

This Appendix provides the results of the state-level review process for SCDDSN settings that fall under Category 3, can fully implement all their HCBS remediation steps to comply with HCBS regulatory criteria but will not be able to do so by July 1, 2021. These settings are submitted to CMS for official heightened scrutiny review.

The number of SCDDSN settings in Category 3 submitted for official CMS heightened scrutiny review is listed in the table below:

<table>
<thead>
<tr>
<th>Setting Type</th>
<th>Category 3</th>
</tr>
</thead>
<tbody>
<tr>
<td>Day Services/Work Activity Center (WAC)</td>
<td>1</td>
</tr>
<tr>
<td>Residential/Supervised Living Program II (SLP II)</td>
<td>3</td>
</tr>
<tr>
<td>Residential/Supported Living Program I (SLP I)</td>
<td>1</td>
</tr>
<tr>
<td>Residential/Community Inclusive Residential Supports (CIRS)</td>
<td>0</td>
</tr>
<tr>
<td>Residential/Community Training Home II (CTH II)</td>
<td>14</td>
</tr>
<tr>
<td>Residential/Community Residential Care Facility (CRCF)</td>
<td>4</td>
</tr>
<tr>
<td><strong>TOTAL</strong></td>
<td><strong>23</strong></td>
</tr>
</tbody>
</table>

The settings reviewed for Category 3 heightened scrutiny and submitted to CMS for review are listed below:

<table>
<thead>
<tr>
<th>Setting Name</th>
<th>Setting Type</th>
<th>Region</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Boyd</td>
<td>CTH II</td>
<td>Piedmont</td>
</tr>
<tr>
<td>2. Brentwood Apts.</td>
<td>SLP II</td>
<td>Piedmont</td>
</tr>
<tr>
<td>3. Brown</td>
<td>CTH II</td>
<td>Piedmont</td>
</tr>
<tr>
<td>4. Cain</td>
<td>CTH II</td>
<td>Piedmont</td>
</tr>
<tr>
<td>5. Camp</td>
<td>CRCF</td>
<td>Coastal</td>
</tr>
<tr>
<td>6. Canvasback</td>
<td>CTH II</td>
<td>Coastal</td>
</tr>
<tr>
<td>7. Canvasback</td>
<td>SLP II</td>
<td>Coastal</td>
</tr>
<tr>
<td>8. Code</td>
<td>CTH II</td>
<td>Piedmont</td>
</tr>
<tr>
<td>9. Fair Creek</td>
<td>CTH II</td>
<td>Piedmont</td>
</tr>
<tr>
<td>10. Farmington</td>
<td>CRCF</td>
<td>Coastal</td>
</tr>
<tr>
<td>Setting Name</td>
<td>Category</td>
<td>Location</td>
</tr>
<tr>
<td>--------------------------------------</td>
<td>----------------</td>
<td>--------------</td>
</tr>
<tr>
<td>Independence Place A1</td>
<td>CTH II</td>
<td>Pee Dee</td>
</tr>
<tr>
<td>Independence Place A2</td>
<td>CTH II</td>
<td>Pee Dee</td>
</tr>
<tr>
<td>Independence Place B</td>
<td>CTH II</td>
<td>Pee Dee</td>
</tr>
<tr>
<td>Keowee</td>
<td>CTH II</td>
<td>Piedmont</td>
</tr>
<tr>
<td>McGowen</td>
<td>CTH II</td>
<td>Piedmont</td>
</tr>
<tr>
<td>Nalley</td>
<td>CTH II</td>
<td>Piedmont</td>
</tr>
<tr>
<td>Powell</td>
<td>CTH II</td>
<td>Piedmont</td>
</tr>
<tr>
<td>Rice Road</td>
<td>CTH II</td>
<td>Piedmont</td>
</tr>
<tr>
<td>Tribble Work Activity Center</td>
<td>WAC</td>
<td>Piedmont</td>
</tr>
<tr>
<td>Vanguard I</td>
<td>CRCF</td>
<td>Pee Dee</td>
</tr>
<tr>
<td>Vanguard II</td>
<td>CRCF</td>
<td>Pee Dee</td>
</tr>
<tr>
<td>Woodduck</td>
<td>SLP I (one unit)</td>
<td>Coastal</td>
</tr>
<tr>
<td>Woodduck</td>
<td>SLP II</td>
<td>Coastal</td>
</tr>
</tbody>
</table>

All providers of these settings have an approved agency-wide compliance action plan to address overall HCBS compliance by March 17, 2023. They will be required to develop a more detailed plan to address issues identified in this process. Details on that process follows the settings’ summaries below.

Below is summary information that addresses the reasons SCDHHS believes each setting can overcome the presumption that it has qualities of an institution and achieve full HCBS compliance. The link to each setting’s full review rubric and evidence list is provided under “Evidence to support.”

<table>
<thead>
<tr>
<th>Setting Name</th>
<th>Reason for Category</th>
</tr>
</thead>
<tbody>
<tr>
<td>Boyd</td>
<td>Three (3) or more HCBS settings clustered together operated by the same provider</td>
</tr>
</tbody>
</table>

| Evidence to Support setting progress to HCBS compliance | 
|--------------------------------------------------------|-----------------------------------------------|
| **Link to full rubric and evidence list**              | • Location of setting in community:          |
|                                                      |   o Grocery stores 2.3 – 3.2 miles from setting |
|                                                      |   o Restaurants 0.9 – 3.5 miles from setting   |
|                                                      |   o Shopping/retail within 1-3 miles of setting |
|                                                      |   o Houses of worship 1.5 – 6 miles from setting |
|                                                      |   o Various local parks 1.5 - 5 miles from setting |
|                                                      |   o Banks, healthcare offices, 1-3 miles of home |
|                                                      | • Dedicated vehicle for setting to take residents shopping, out to eat, appointments, etc. |
|                                                      | • Activity logs for setting indicates opportunities to go out in community:          |
|                                                      |   o Out to eat, visit local parks |


Quarterly “Pow-wows” conducted with residents used to measure satisfaction with services, supports
- Also determine preferences, concerns, things residents want to learn, places they want to go
- Rights training is incorporated into these discussions
- Also reviews to whom residents can go when requesting changes in services (case manager)
- Documentation of staff training on person-centered thinking, participant rights

State Remediation Oversight
- See compliance monitoring plan for all submitted Category 3 settings at end of Appendix
- Additional remediation oversight activities:
  - Quality Improvement Organization (QIO) conducts yearly licensing reviews to monitor these types of residential settings
  - QIO conducts contract compliance reviews that monitor HCBS compliance measures
  - QIO conducts yearly residential on-site reviews

<table>
<thead>
<tr>
<th>Setting Name</th>
<th>Brentwood Apartments</th>
</tr>
</thead>
<tbody>
<tr>
<td>Reason for Category</td>
<td>Setting is a HUD 811 apartment complex (disability specific complex)</td>
</tr>
<tr>
<td>Evidence to Support setting progress to HCBS compliance</td>
<td><img src="#" alt="Link to full rubric and evidence list" /></td>
</tr>
<tr>
<td></td>
<td>Location of setting in community:</td>
</tr>
<tr>
<td></td>
<td>- Grocery stores 2 – 3 miles from setting</td>
</tr>
<tr>
<td></td>
<td>- Restaurants 0.7 – 2.5 miles from setting</td>
</tr>
<tr>
<td></td>
<td>- Shopping/retail within 1-3 miles of setting</td>
</tr>
<tr>
<td></td>
<td>- Houses of worship 1 – 6 miles from setting</td>
</tr>
<tr>
<td></td>
<td>- Various local parks 2-5 miles from setting</td>
</tr>
<tr>
<td></td>
<td>- Banks, healthcare offices, 1-3 miles of home</td>
</tr>
<tr>
<td></td>
<td>Dedicated vehicles for setting to take residents shopping, out to eat, appointments, etc.</td>
</tr>
<tr>
<td></td>
<td>- One resident has his own moped for transportation</td>
</tr>
<tr>
<td></td>
<td>- Several residents taking a class to prepare for driver’s permit test</td>
</tr>
<tr>
<td></td>
<td>- Local bus system information available to residents</td>
</tr>
<tr>
<td></td>
<td>Activity calendars and logs for setting indicates various opportunities to go out in community:</td>
</tr>
<tr>
<td></td>
<td>- Visits with family</td>
</tr>
<tr>
<td></td>
<td>- Out to eat</td>
</tr>
<tr>
<td></td>
<td>- Various recreational activities (laser tag, mini-golf, outdoor concerts, seasonal events)</td>
</tr>
<tr>
<td></td>
<td>- Attend churches of choice</td>
</tr>
<tr>
<td></td>
<td>- Shopping at various retail stores, grocery stores, errands</td>
</tr>
<tr>
<td></td>
<td>- Go to yard sales on weekends</td>
</tr>
<tr>
<td></td>
<td>- One resident attends local senior center twice weekly</td>
</tr>
<tr>
<td></td>
<td>Documentation of staff training on person-centered thinking, participant rights</td>
</tr>
</tbody>
</table>
| State Remediation Oversight | • See compliance monitoring plan for all submitted Category 3 settings at end of Appendix  
• Additional remediation oversight activities:  
  o Quality Improvement Organization (QIO) conducts yearly licensing reviews to monitor these types of residential settings  
  o QIO conducts contract compliance reviews that monitor HCBS compliance measures  
  o QIO conducts yearly residential on-site reviews |
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Setting Name</td>
<td>Brown</td>
</tr>
<tr>
<td>Reason for Category</td>
<td>Three (3) or more HCBS settings clustered together operated by the same provider</td>
</tr>
</tbody>
</table>
| Evidence to Support setting progress to HCBS compliance | • Location of setting in community:  
  o Grocery stores 2.3 – 3.2 miles from setting  
  o Restaurants 0.9 – 3.5 miles from setting  
  o Shopping/retail within 1-3 miles of setting  
  o Houses of worship 1.5 – 6 miles from setting  
  o Various local parks 1.5 - 5 miles from setting  
  o Banks, healthcare offices, 1-3 miles of home  
  • Dedicated vehicle for setting to take residents shopping, out to eat, appointments, etc.  
  • Activity logs for setting indicates opportunities to go out in community:  
  o Out to eat, visit local parks  
  • Monthly “Pow-wows” conducted with residents used to measure satisfaction with services, supports  
  o Also determine preferences, concerns, things residents want to learn, places they want to go  
  o Rights training is incorporated into these discussions  
  o Also reviews to whom residents can go when requesting changes in services (case manager)  
  • Documentation of staff training on person-centered thinking, participant rights |
| State Remediation Oversight | • See compliance monitoring plan for all submitted Category 3 settings at end of Appendix  
• Additional remediation oversight activities:  
  o Quality Improvement Organization (QIO) conducts yearly licensing reviews to monitor these types of residential settings  
  o QIO conducts contract compliance reviews that monitor HCBS compliance measures  
  o QIO conducts yearly residential on-site reviews |
<table>
<thead>
<tr>
<th>Setting Name</th>
<th>Cain</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Reason for Category</strong></td>
<td>Three (3) or more HCBS settings clustered together operated by the same provider</td>
</tr>
</tbody>
</table>
| **Evidence to Support setting progress to HCBS compliance** | • Location of setting in community:  
  o Grocery stores 2.3 – 3.2 miles from setting  
  o Restaurants 0.9 – 3.5 miles from setting  
  o Shopping/retail within 1-3 miles of setting  
  o Houses of worship 1.5 – 6 miles from setting  
  o Various local parks 1.5 - 5 miles from setting  
  o Banks, healthcare offices, 1-3 miles of home  
  • Dedicated vehicle for setting to take residents shopping, out to eat, appointments, etc.  
  • Monthly “Pow-wows” conducted with residents used to measure satisfaction with services, supports  
    o Also determine preferences, concerns, things residents want to learn, places they want to go  
    o Rights training is incorporated into these discussions  
    o Also reviews to whom residents can go when requesting changes in services (case manager)  
  • Documentation of staff training on person-centered thinking, participant rights |
| **State Remediation Oversight** | • See compliance monitoring plan for all submitted Category 3 settings at end of Appendix  
  • Additional remediation oversight activities:  
    o Quality Improvement Organization (QIO) conducts yearly licensing reviews to monitor these types of residential settings  
    o QIO conducts contract compliance reviews that monitor HCBS compliance measures  
    o QIO conducts yearly residential on-site reviews |

<table>
<thead>
<tr>
<th>Setting Name</th>
<th>Camp</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Reason for Category</strong></td>
<td>Setting is a Community Residential Care Facility (CRCF) that was formerly an Intermediate Care Facility for Individuals with Intellectual Disabilities (ICF/IID), and is physically located next to another CRCF that was also formerly an ICF/IID</td>
</tr>
</tbody>
</table>
| **Evidence to Support setting progress to HCBS compliance** | • Located in a residential area; near businesses/retail  
  o Retail stores 01. – 2 miles from home  
  o Houses of worship 0.1 – 2 miles from home  
  o Restaurants 0.1 – 2 miles from home  
  o Local parks, recreation 0.6 – 3.5 miles from home  
  o Banks 1.7 – 3 miles from home  
  o Local library 3 miles from home |
| **State Remediation Oversight** | • See compliance monitoring plan for all submitted Category 3 settings at end of Appendix  
  • Additional remediation oversight activities:  
    o QIO conducts licensing reviews to monitor these types of residential settings  
    o QIO conducts contract compliance reviews that monitor HCBS compliance measures  
    o QIO conducts yearly residential on-site reviews |
- Documentation of separate vehicles, separate staff for this setting and the CRCF next door
- Documentation of activities customized to residents’ preferences; how residents access the community:
  - Visit local library
  - Visit local beach; local parks; other local attractions
  - Shopping at various stores, malls
  - Engage in local recreation and seasonal activities like going strawberry picking
  - Participate in local Miracle League games
  - Visits with family
- Documentation of staff training on HCBS requirements, person-centered thinking

<table>
<thead>
<tr>
<th>State Remediation Oversight</th>
</tr>
</thead>
<tbody>
<tr>
<td>• See compliance monitoring plan for all submitted Category 3 settings at end of Appendix</td>
</tr>
<tr>
<td>• Additional remediation oversight activities:</td>
</tr>
<tr>
<td>o Quality Improvement Organization (QIO) conducts yearly licensing reviews to monitor these types of residential settings</td>
</tr>
<tr>
<td>o QIO conducts contract compliance reviews that monitor HCBS compliance measures</td>
</tr>
<tr>
<td>o QIO conducts yearly residential on-site reviews</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Setting Name</th>
<th>Canvasback CTH II</th>
</tr>
</thead>
<tbody>
<tr>
<td>Reason for Category</td>
<td>Three (3) or more HCBS settings clustered together operated by the same provider</td>
</tr>
<tr>
<td>Evidence to Support setting progress to HCBS compliance</td>
<td></td>
</tr>
<tr>
<td>Link to full rubric and evidence list</td>
<td></td>
</tr>
<tr>
<td>• Location of home in community:</td>
<td></td>
</tr>
<tr>
<td>o Grocery stores 0.5 – 2.5 miles from home</td>
<td></td>
</tr>
<tr>
<td>o Restaurants within 2 miles of home</td>
<td></td>
</tr>
<tr>
<td>o Shopping/retail within 1-5 miles of home</td>
<td></td>
</tr>
<tr>
<td>o Houses of worship 1.5 – 3.5 miles from home</td>
<td></td>
</tr>
<tr>
<td>o Various local parks within 3 miles of home</td>
<td></td>
</tr>
<tr>
<td>o Banks, healthcare offices, within 5 miles of home</td>
<td></td>
</tr>
<tr>
<td>• Dedicated vehicle for home to take residents shopping, out to eat, appointments, etc.</td>
<td></td>
</tr>
<tr>
<td>• Activity calendar for home indicates various opportunities to go out in community:</td>
<td></td>
</tr>
<tr>
<td>o Local flea market, movies, eating out, various errands</td>
<td></td>
</tr>
<tr>
<td>• Sample service plan provided notes one resident works in community</td>
<td></td>
</tr>
<tr>
<td>• Documentation of monthly resident rights training</td>
<td></td>
</tr>
<tr>
<td>• Documentation of staff training on HCBS requirements, person-centered thinking, CQL Basic Assurances and Personal Outcomes Measures</td>
<td></td>
</tr>
<tr>
<td>• Updated provider policies to support HCB outcomes</td>
<td></td>
</tr>
<tr>
<td>o “Residential Philosophy:”</td>
<td></td>
</tr>
<tr>
<td>▪ Resident driven decision making</td>
<td></td>
</tr>
</tbody>
</table>
| State Remediation Oversight | • See compliance monitoring plan for all submitted Category 3 settings at end of Appendix  
• Additional remediation oversight activities:  
  o Quality Improvement Organization (QIO) conducts yearly [licensing reviews](#) to monitor these types of residential settings  
  o QIO conducts [contract compliance reviews](#) that monitor HCBS compliance measures  
  o QIO conducts yearly [residential on-site reviews](#) |

<table>
<thead>
<tr>
<th>Setting Name</th>
<th>Canvasback SLP II</th>
</tr>
</thead>
<tbody>
<tr>
<td>Reason for Category</td>
<td>Three (3) or more HCBS settings clustered together operated by the same provider</td>
</tr>
</tbody>
</table>
| Evidence to Support setting progress to HCBS compliance | • Location of home in community:  
  o Grocery stores 0.5 – 2.5 miles from home  
  o Restaurants within 2 miles of home  
  o Shopping/retail within 1-5 miles of home  
  o Houses of worship 1.5 – 3.5 miles from home  
  o Various local parks within 3 miles of home  
  o Banks, healthcare offices, within 5 miles of home  
• Dedicated vehicle for setting to take residents shopping, out to eat, appointments, etc.  
• Activity calendar for setting indicates various opportunities to go out in community:  
  o Local flea market, movies, eating out, various errands  
• Documentation of monthly resident rights training  
• Documentation of staff training on HCBS requirements, person-centered thinking, CQL Basic Assurances and Personal Outcomes Measures  
• Updated provider policies to support HCB outcomes  
  o “Residential Philosophy:  
    ▪ Resident driven decision making  
    ▪ Community access and integration to the extent desired and directed by the resident  
    ▪ Promotion of self-advocacy  
    ▪ Choice-driven services  
    ▪ Effective communication  
    ▪ Quality services” |
| State Remediation Oversight | • See compliance monitoring plan for all submitted Category 3 settings at end of Appendix  
• Additional remediation oversight activities: |
o Quality Improvement Organization (QIO) conducts yearly [licensing reviews](#) to monitor these types of residential settings
o QIO conducts [contract compliance reviews](#) that monitor HCBS compliance measures
o QIO conducts yearly [residential on-site reviews](#)

<table>
<thead>
<tr>
<th>Setting Name</th>
<th>Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>Reason for Category</td>
<td>Three (3) or more HCBS settings clustered together operated by the same provider</td>
</tr>
</tbody>
</table>

**Evidence to Support setting progress to HCBS compliance**

- [Link to full rubric and evidence list](#)
  - Location of setting in community:
    - Grocery stores 2.3 – 3.2 miles from setting
    - Restaurants 0.9 – 3.5 miles from setting
    - Shopping/retail within 1-3 miles of setting
    - Houses of worship 1.5 – 6 miles from setting
    - Various local parks 1.5 - 5 miles from setting
    - Banks, healthcare offices, 1-3 miles of home
  - Dedicated vehicle for setting to take residents shopping, out to eat, appointments, etc.
  - Activity logs for setting indicates opportunities to go out in community:
    - Out to eat, visit local parks, run errands
  - Monthly “Pow-wows” conducted with residents used to measure satisfaction with services, supports
    - Also determine preferences, concerns, things residents want to learn, places they want to go
    - Rights training is incorporated into these discussions
    - Also reviews to whom residents can go when requesting changes in services (case manager)
  - Documentation of staff training on person-centered thinking, participant rights

**State Remediation Oversight**

- See compliance monitoring plan for all submitted Category 3 settings at end of Appendix
- Additional remediation oversight activities:
  - Quality Improvement Organization (QIO) conducts yearly [licensing reviews](#) to monitor these types of residential settings
  - QIO conducts [contract compliance reviews](#) that monitor HCBS compliance measures
  - QIO conducts yearly [residential on-site reviews](#)
<table>
<thead>
<tr>
<th>Setting Name</th>
<th>Fair Creek</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Reason for Category</strong></td>
<td>Setting has a locked fence around the property</td>
</tr>
</tbody>
</table>
| **Evidence to Support setting progress to HCBS compliance** | • Fence gate remains open during the day  
• Gate is only secured if a resident displays target behavior(s) that could lead to elopement. Residents who have documented exit-seeking behaviors have behavior support guidelines/protocols in place.  
  o A keypad is used to secure the gate; all residents have been given the code and trained on how to use it to unlock the gate.  
• Location of home is rural, but access to community supported by provider:  
  o Dedicated vehicle for home to take residents shopping, out to eat, appointments, etc.  
  o Restaurants 1.5 – 10+ miles  
    ▪ Typical fast-food chain restaurants approximately 12-13 miles away  
    ▪ Favorite restaurants of residents (Silver Bay, Sonic Drive In, Denny’s) are 18–25 miles away; documentation of provider taking them twice to each restaurant in one month; Denny’s one time  
    ▪ Documentation of residents going out to eat 4-6 times in a month (varies by resident)  
  o Shopping/retail 5.6 – 23 miles away  
    ▪ Family Dollar closest at 5.6 miles  
    ▪ Walmart, Dollar Tree, Dollar General, various drug store shops approximately 12-13 miles away  
    ▪ Documentation of provider taking residents to at least two of these stores 5 - 6 times in one month (stores chosen by residents)  
    ▪ Provider took one resident to Five Below twice in one month (closest is 23 miles away)  
• Documentation of quarterly resident meetings to address concerns, celebrate positive events for residents, provide rights training, ask about activities residents want to do and plan.  
• Documentation of staff training on HCBS requirements, person-centered thinking |
| **State Remediation Oversight** | • See compliance monitoring plan for all submitted Category 3 settings at end of Appendix  
• Additional remediation oversight activities:  
  o Quality Improvement Organization (QIO) conducts yearly licensing reviews to monitor these types of residential settings  
  o QIO conducts contract compliance reviews that monitor HCBS compliance measures  
  o QIO conducts yearly residential on-site reviews |
<table>
<thead>
<tr>
<th>Setting Name</th>
<th>Farmington</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Reason for Category</strong></td>
<td>Setting is a Community Residential Care Facility (CRCF) that was formerly an Intermediate Care Facility for Individuals with Intellectual Disabilities (ICF/IID), and is physically located next to another CRCF that was also formerly an ICF/IID</td>
</tr>
</tbody>
</table>
| **Evidence to Support setting progress to HCBS compliance** | • Located in a residential area; near businesses/retail  
  o Retail stores 0.1 – 2 miles from home  
  o Houses of worship 0.1 – 2 miles from home  
  o Restaurants 0.1 – 2 miles from home  
  o Local parks, recreation 0.6 – 3.5 miles from home  
  o Banks 1.7 – 3 miles from home  
  o Local library 3 miles from home  
  • Documentation of separate vehicles, separate staff for this setting and the CRCF next door  
  • Documentation of activities customized to residents’ preferences; how residents access the community:  
  o Going out to eat  
  o Visit local parks; other local attractions  
  o Shopping at various stores, malls  
  o Engage in local recreation and seasonal activities like going strawberry picking  
  o Visits with family  
  • Documentation of staff training on HCBS requirements, person-centered thinking |
| **State Remediation Oversight** | • See compliance monitoring plan for all submitted Category 3 settings at end of Appendix  
  • Additional remediation oversight activities:  
  o Quality Improvement Organization (QIO) conducts yearly [licensing reviews](#) to monitor these types of residential settings  
  o QIO conducts [contract compliance reviews](#) that monitor HCBS compliance measures  
  o QIO conducts yearly [residential on-site reviews](#) |

<table>
<thead>
<tr>
<th>Setting Name</th>
<th>Independence A1</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Reason for Category</strong></td>
<td>Three (3) or more HCBS settings clustered together operated by the same provider</td>
</tr>
</tbody>
</table>
| **Evidence to Support setting progress to HCBS compliance** | • Location of setting in community:  
  o Grocery stores 0.5 – 1.7 miles from setting  
  o Restaurants 0.5 – 1.2 miles from setting  
  o Shopping/retail 0.5 – 1.5 miles from setting  
  o Houses of worship 1 – 1.5 miles from setting  
  o Library 1.4 miles from setting; recreation within 2 miles of setting |
<table>
<thead>
<tr>
<th>Setting Name</th>
<th>Independence A2</th>
</tr>
</thead>
<tbody>
<tr>
<td>Reason for Category</td>
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</tr>
</tbody>
</table>
| Evidence to Support setting progress to HCBS compliance | Location of setting in community:  
- Grocery stores 0.5 – 1.7 miles from setting  
- Restaurants 0.5 – 1.2 miles from setting  
- Shopping/retail 0.5 – 1.5 miles from setting  
- Houses of worship 1 – 1.5 miles from setting  
- Library 1.4 miles from setting; recreation within 2 miles of setting  
- Banks, healthcare offices, within 2 miles of setting  
- Dedicated vehicle for setting to take residents shopping, out to eat, appointments, etc.  
- Documentation in t-logs indicate residents going out in community:  
  - Shopping, church, riding bike  
  - One resident works in community  
- Documentation of monthly resident rights training  
- Documentation of agency staff training on person-centered planning, Personal Outcomes Measures, dignity and respect for participants  
- CTH II staff training on HCBS rule requirements |
| State Remediation Oversight | See compliance monitoring plan for all submitted Category 3 settings at end of Appendix  
Additional remediation oversight activities:  
- Quality Improvement Organization (QIO) conducts yearly licensing reviews to monitor these types of residential settings  
- QIO conducts contract compliance reviews that monitor HCBS compliance measures  
- QIO conducts yearly residential on-site reviews |
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<tr>
<th>Setting Name</th>
<th>Independence B</th>
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<tbody>
<tr>
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<td>Three (3) or more HCBS settings clustered together operated by the same provider</td>
</tr>
</tbody>
</table>
| **Evidence to Support setting progress to HCBS compliance** | • Location of setting in community:  
  o Grocery stores 0.5 – 1.7 miles from setting  
  o Restaurants 0.5 – 1.2 miles from setting  
  o Shopping/retail 0.5 – 1.5 miles from setting  
  o Houses of worship 1 – 1.5 miles from setting  
  o Library 1.4 miles from setting; recreation within 2 miles of setting  
  o Banks, healthcare offices, within 2 miles of setting  
  • Dedicated vehicle for setting to take residents shopping, out to eat, appointments, etc.  
  • Documentation in t-logs indicate residents going out in community:  
    o Shopping, church, out to eat  
    o One resident has his own car that he uses to access the community, visit family in other cities  
  • Documentation of monthly resident rights training  
  • Documentation of agency staff training on person-centered planning, Personal Outcomes Measures, dignity and respect for participants  
  o CTH II staff training on HCBS rule requirements |
| **State Remediation Oversight** | • See compliance monitoring plan for all submitted Category 3 settings at end of Appendix  
  • Additional remediation oversight activities:  
    o Quality Improvement Organization (QIO) conducts yearly licensing reviews to monitor these types of residential settings  
    o QIO conducts contract compliance reviews that monitor HCBS compliance measures  
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<tbody>
<tr>
<td><strong>Reason for Category</strong></td>
<td>Setting has a locked fence around the property</td>
</tr>
</tbody>
</table>
| **Evidence to Support setting progress to HCBS compliance** | • Location of setting in community:  
  o Grocery stores 2 – 3 miles from setting  
  o Restaurants 0.7 – 3 miles from setting  
  o Shopping/retail within 1-3 miles of setting  
  o Houses of worship 1 – 6 miles from setting  
  o Various local parks 2-5 miles from setting  
  o Banks, healthcare offices, 1-3 miles of home  
  • Dedicated vehicle for setting to take residents shopping, out to eat, appointments, etc.  
  • Fence has a pool latch that replaced the lock |
- Documentation provided noting all four residents being trained on how to use latch
- Sample plans from two residents note both are at risk of elopement
- Activity logs for setting indicates opportunities to go out in community:
  - Out to eat, run errands
- Quarterly “Pow-wows” conducted with residents used to measure satisfaction with services, supports
  - Also determine preferences, concerns, things residents want to learn, places they want to go
  - Rights training is incorporated into these discussions
  - Also reviews to whom residents can go when requesting changes in services (case manager)
- Documentation of staff training on person-centered thinking, participant rights

### State Remediation Oversight

- See compliance monitoring plan for all submitted Category 3 settings at end of Appendix
- Additional remediation oversight activities:
  - Quality Improvement Organization (QIO) conducts yearly licensing reviews to monitor these types of residential settings
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<tbody>
<tr>
<td>Fence gate remains open during the day</td>
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</tr>
<tr>
<td>Gate is only secured if a resident displays target behavior(s) that could lead to elopement. Residents who have documented exit-seeking behaviors have behavior support guidelines/protocols in place.</td>
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</tr>
<tr>
<td>A keypad is used to secure the gate; all residents have been given the code and trained on how to use it to unlock the gate.</td>
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</tr>
<tr>
<td>Location of home is somewhat rural, but access to community supported by provider:</td>
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</tr>
<tr>
<td>Dedicated vehicle for home to take residents shopping, out to eat, appointments, etc.</td>
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</tr>
<tr>
<td>Restaurants 1.5 – 10+ miles</td>
<td>Restaurants 1.5 – 10+ miles</td>
</tr>
<tr>
<td>Many chain restaurants within 3 miles of home</td>
<td>Many chain restaurants within 3 miles of home</td>
</tr>
<tr>
<td>Documentation of residents going out to eat 1-4 times in a month (days, locations vary by resident)</td>
<td>Documentation of residents going out to eat 1-4 times in a month (days, locations vary by resident)</td>
</tr>
<tr>
<td>Shopping/retail 2.5 -17 miles away</td>
<td>Shopping/retail 2.5 -17 miles away</td>
</tr>
<tr>
<td>Walmart, Dollar Tree, Dollar General, various drug store shops approximately 2.5- 3 miles away; Clothing stores 10-17 miles from home</td>
<td>Walmart, Dollar Tree, Dollar General, various drug store shops approximately 2.5- 3 miles away; Clothing stores 10-17 miles from home</td>
</tr>
<tr>
<td>Grocery store within 2 miles</td>
<td>Grocery store within 2 miles</td>
</tr>
</tbody>
</table>
- Documentation of provider taking residents to at least two of these stores 5 – 10 times in one month (stores chosen by residents, days and locations vary; does not include grocery shopping)
- Documentation of residents volunteering with Meals on Wheels weekly
- Documentation of quarterly resident meetings to address concerns, celebrate positive events for residents, provide rights training, ask about activities residents want to do and plan.
- Documentation of staff training on HCBS requirements, person-centered thinking

| State Remediation Oversight | • See compliance monitoring plan for all submitted Category 3 settings at end of Appendix
• Additional remediation oversight activities:
  o Quality Improvement Organization (QIO) conducts yearly licensing reviews to monitor these types of residential settings
  o QIO conducts contract compliance reviews that monitor HCBS compliance measures
  o QIO conducts yearly residential on-site reviews |

| Setting Name | Nalley |
| Reason for Category | Three (3) or more HCBS settings clustered together operated by the same provider |
| Evidence to Support setting progress to HCBS compliance | • Location of setting in community:
  o Grocery stores 2.3 – 3.2 miles from setting
  o Restaurants 0.9 – 3.5 miles from setting
  o Shopping/retail within 1-3 miles of setting
  o Houses of worship 1.5 – 6 miles from setting
  o Various local parks 1.5 - 5 miles from setting
  o Banks, healthcare offices, 1-3 miles of home
• Dedicated vehicle for setting to take residents shopping, out to eat, appointments, etc.
• Activity logs for setting indicates opportunities to go out in community:
  o Out to eat, visit local parks, shopping/run errands
• Monthly “Pow-wows” conducted with residents used to measure satisfaction with services, supports
  o Also determine preferences, concerns, things residents want to learn, places they want to go
  o Rights training is incorporated into these discussions
  o Also reviews to whom residents can go when requesting changes in services (case manager)
• Documentation of staff training on person-centered thinking, participant rights |

| Setting Name | Nalley |
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  o Restaurants 0.9 – 3.5 miles from setting
  o Shopping/retail within 1-3 miles of setting
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  o Various local parks 1.5 - 5 miles from setting
  o Banks, healthcare offices, 1-3 miles of home
• Dedicated vehicle for setting to take residents shopping, out to eat, appointments, etc.
• Activity logs for setting indicates opportunities to go out in community:
  o Out to eat, visit local parks, shopping/run errands
• Monthly “Pow-wows” conducted with residents used to measure satisfaction with services, supports
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  o Various local parks 1.5 - 5 miles from setting
  o Banks, healthcare offices, 1-3 miles of home
• Dedicated vehicle for setting to take residents shopping, out to eat, appointments, etc.
• Activity logs for setting indicates opportunities to go out in community:
  o Out to eat, visit local parks, shopping/run errands
• Monthly “Pow-wows” conducted with residents used to measure satisfaction with services, supports
  o Also determine preferences, concerns, things residents want to learn, places they want to go
  o Rights training is incorporated into these discussions
  o Also reviews to whom residents can go when requesting changes in services (case manager)
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  o Shopping/retail within 1-3 miles of setting
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  o Various local parks 1.5 - 5 miles from setting
  o Banks, healthcare offices, 1-3 miles of home
• Dedicated vehicle for setting to take residents shopping, out to eat, appointments, etc.
• Activity logs for setting indicates opportunities to go out in community:
  o Out to eat, visit local parks, shopping/run errands
• Monthly “Pow-wows” conducted with residents used to measure satisfaction with services, supports
  o Also determine preferences, concerns, things residents want to learn, places they want to go
  o Rights training is incorporated into these discussions
  o Also reviews to whom residents can go when requesting changes in services (case manager)
• Documentation of staff training on person-centered thinking, participant rights |
### State Remediation Oversight

- See compliance monitoring plan for all submitted Category 3 settings at end of Appendix
- Additional remediation oversight activities:
  - Quality Improvement Organization (QIO) conducts yearly [licensing reviews](#) to monitor these types of residential settings
  - QIO conducts [contract compliance reviews](#) that monitor HCBS compliance measures
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#### Evidence to Support setting progress to HCBS compliance

- Location of setting in community:
  - Grocery stores 2.3 – 3.2 miles from setting
  - Restaurants 0.9 – 3.5 miles from setting
  - Shopping/retail within 1-3 miles of setting
  - Houses of worship 1.5 – 6 miles from setting
  - Various local parks 1.5 - 5 miles from setting
  - Banks, healthcare offices, 1-3 miles of home

- Dedicated vehicle for setting to take residents shopping, out to eat, appointments, etc.

- Activity logs for setting indicates opportunities to go out in community:
  - Out to eat, shopping

- Monthly “Pow-wows” conducted with residents used to measure satisfaction with services, supports
  - Also determine preferences, concerns, things residents want to learn, places they want to go
  - Rights training is incorporated into these discussions
  - Also reviews to whom residents can go when requesting changes in services (case manager)

- Documentation of staff training on person-centered thinking, participant rights

### State Remediation Oversight

- See compliance monitoring plan for all submitted Category 3 settings at end of Appendix
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<th>Setting Name</th>
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</thead>
<tbody>
<tr>
<td>Reason for Category</td>
<td>Setting has a locked fence around the property</td>
</tr>
</tbody>
</table>
| Evidence to Support setting progress to HCBS compliance | - Fence gate remains open during the day  
- Gate is only secured if a resident displays target behavior(s) that could lead to elopement. Residents who have documented exit-seeking behaviors have behavior support guidelines/protocols in place.  
  - A keypad is used to secure the gate; all residents have been given the code and trained on how to use it to unlock the gate.  
- Location of home is somewhat rural, but access to community supported by provider:  
  - Dedicated vehicle for home to take residents shopping, out to eat, appointments, etc.  
  - Restaurants 2.7 – 7.5 miles  
    - Documentation of residents going out to eat 3-7 times in a month (location, day varies by resident)  
  - Shopping/retail 2.5 – 8.4 miles away  
    - Documentation of provider taking residents shopping approximately 2 times a month (stores chosen by residents; planning calendar indicates more opportunities listed, just not documented that residents went)  
- Documentation of quarterly resident meetings to address concerns, celebrate positive events for residents, provide rights training, ask about activities residents want to do and plan.  
- Documentation of staff training on HCBS requirements, person-centered thinking |
| State Remediation Oversight | - See compliance monitoring plan for all submitted Category 3 settings at end of Appendix  
- Additional remediation oversight activities:  
  - Quality Improvement Organization (QIO) conducts yearly licensing reviews to monitor these types of residential settings  
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<tbody>
<tr>
<td>Reason for Category</td>
<td>Three (3) or more HCBS settings clustered together operated by the same provider</td>
</tr>
</tbody>
</table>
| Evidence to Support setting progress to HCBS compliance | - Documentation of dedicated vehicles for Day program  
- Documentation of community service and community activities for program participants  
  - Art projects at local art center  
  - Visits to local nursing home  
  - Participate in drum therapy  
  - Visit local library |
<p>| State Remediation Oversight | |</p>
<table>
<thead>
<tr>
<th>Setting Name</th>
<th>Vanguard I</th>
</tr>
</thead>
<tbody>
<tr>
<td>Reason for Category</td>
<td>Setting is a Community Residential Care Facility (CRCF) that was formerly an Intermediate Care Facility for Individuals with Intellectual Disabilities (ICF/IID), and is physically located next to another CRCF that was also formerly an ICF/IID</td>
</tr>
</tbody>
</table>
| Evidence to Support setting progress to HCBS compliance | - Located in a residential area; near businesses/retail  
  - Retail stores 0.3 – 2 miles from home  
  - Houses of worship 0.5 – 2 miles from home  
  - Restaurants 0.4 – 2.7 miles from home  
  - Local parks, recreation 0.8 – 2.8 miles from home  
  - Banks 0.4 – 2 miles from home  
  - Local library 1 mile from home  
  - Documentation of separate vehicles, separate staff for this setting and the CRCF next door  
  - Documentation in t-logs of how residents access the community:  
    - Out with family, out to eat, attend local basketball game  
    - Documentation of staff training on person-centered planning, Personal Outcomes Measures, dignity and respect for participants  
  - CRCF staff training on HCBS rule requirements |
| State Remediation Oversight | See compliance monitoring plan for all submitted Category 3 settings at end of Appendix  
  - Additional remediation oversight activities:  
    - Quality Improvement Organization (QIO) conducts yearly licensing reviews to monitor these types of non-residential settings  
    - QIO conducts contract compliance reviews that monitor HCBS compliance measures  
    - QIO conducts yearly day on-site reviews |
<table>
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<tr>
<th>Setting Name</th>
<th>Vanguard II</th>
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<tbody>
<tr>
<td><strong>Reason for Category</strong></td>
<td>Setting is a Community Residential Care Facility (CRCF) that was formerly an Intermediate Care Facility for Individuals with Intellectual Disabilities (ICF/IID), and is physically located next to another CRCF that was also formerly an ICF/IID</td>
</tr>
</tbody>
</table>
| **Evidence to Support setting progress to HCBS compliance** | • Located in a residential area; near businesses/retail  
  o Retail stores 0.3 – 2 miles from home  
  o Houses of worship 0.5 – 2 miles from home  
  o Restaurants 0.4 – 2.7 miles from home  
  o Local parks, recreation 0.8 – 2.8 miles from home  
  o Banks 0.4 – 2 miles from home  
  o Local library 1 mile from home  
  • Documentation of separate vehicles, separate staff for this setting and the CRCF next door  
  • Documentation of staff training on person-centered planning, Personal Outcomes Measures, dignity and respect for participants  
  o CRCF staff training on HCBS rule requirements |
| **State Remediation Oversight** | • See compliance monitoring plan for all submitted Category 3 settings at end of Appendix  
  • Additional remediation oversight activities:  
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<tr>
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<td>Three (3) or more HCBS settings clustered together operated by the same provider</td>
</tr>
</tbody>
</table>
| **Evidence to Support setting progress to HCBS compliance** | • Location of home in community:  
  o Grocery stores 0.5 – 2.5 miles from home  
  o Restaurants within 2 miles of home  
  o Shopping/retail within 1-5 miles of home  
  o Houses of worship 1.5 – 3.5 miles from home  
  o Various local parks within 3 miles of home  
  o Banks, healthcare offices, within 5 miles of home  
  • Dedicated vehicle for setting to take residents shopping, out to eat, appointments, etc.  
  • Activity calendar for setting indicates various opportunities to go out in community:  
    o Local flea market, movies, eating out, various errands  
  • Documentation of monthly resident rights training |
<table>
<thead>
<tr>
<th><strong>State Remediation Oversight</strong></th>
<th><strong>SCDHHS will implement the following compliance monitoring plan for the Category 3 settings listed above:</strong></th>
</tr>
</thead>
</table>
| **Documentation of staff training on HCBS requirements, person-centered thinking, CQL Basic Assurances and Personal Outcomes Measures** | **• SCDDSN, at the direction of SCDHHS, will put together a dedicated team to monitor the providers with settings submitted for CMS heightened scrutiny review.**  
  o SCDDSN team will also provide technical assistance to providers to facilitate HCBS compliance.  
| **Updated provider policies to support HCB outcomes** | **• Affected providers must put together a compliance transition plan that details the steps they must take for their setting(s) to be compliant by Dec. 30, 2022.**  
  o The plan must be submitted to SCDDSN no later than Oct. 1, 2021.  
  o The plan includes a required quarterly progress update from the provider to SCDDSN.  
  o SCDDSN is available to providers for technical assistance on the plan development.  
  o The product of each provider’s transition plan would be a new evidence package to SCDDSN and the SCDHHS-SCDDSN heightened scrutiny review team proving full HCBS compliance for each setting that was submitted for CMS heightened scrutiny review.  
| **Residential Philosophy:**  
  ▪ Resident driven decision making  
  ▪ Community access and integration to the extent desired and directed by the resident  
  ▪ Promotion of self-advocacy  
  ▪ Choice-driven services  
  ▪ Effective communication  
  ▪ Quality services” | **• The compliance transition plan will be reviewed and approved by SCDDSN by Nov. 1, 2021.**  
| **Updated provider policies to support HCB outcomes** | **• SCDDSN will submit a mid-year update to the joint SCDHHS-SCDDSN heightened scrutiny review team for review in May 2022.**  
  o The Review Team may send actionable feedback for the provider via SCDDSN.  
| **Updated provider policies to support HCB outcomes** |  |
• The provider must make needed changes, including any feedback from the Review Team, by Dec. 30, 2022.
• Each provider must submit a new final evidence package, one per setting, proving full HCBS compliance to SCDDSN by Dec. 30, 2022.
  o Evidence packages are for each setting that was submitted for CMS heightened scrutiny review.
  o Providers can submit final evidence packages at any time prior to Dec. 30, 2022.
  o The SCDHHS-SCDDSN Review Team will also review final packages.
• Providers not fully compliant by Dec. 30, 2022, risk losing Medicaid waiver funding after March 17, 2023.

Based on CMS feedback on a particular setting, the state will apply that feedback to remediate similarly situated setting settings not included in the CMS review sample in the following ways:

• Customize the feedback on the selected setting type to other similarly situated settings as appropriate to send to the providers of the setting(s).
  o The customization will be based on the setting’s compliance action plan already in place, ensuring targeted remediation feedback.
  o The feedback will be incorporated into the monitoring oversight detailed above.
• Offer the setting provider individual, state-provided technical assistance to implement and apply the setting remediation feedback.
• Review SCDDSN’s setting licensing and service or habilitation standards for any needed revisions to support and facilitate system-wide remediation and compliance.