HCBS

SETTINGS COMPLIANCE CHECKLISTS

Revised May 2023

HCBS SETTINGS COMPLIANCE CHECKLIST INSTRUCTIONS

This set of Checklists have been designed as tools to assist settings to document their level of compliance with all of the requirements of the Home and Community-Based Settings (HCBS) Rule

- Privacy, dignity, respect, and freedom from coercion and restraint
- Control of personal resources
- A lease or other legally enforceable agreement providing similar protections
- Privacy in their unit, including lockable doors, and freedom to furnish or decorate the unit
- Access to food at any time
- Access to visitors at any time
- Physical accessibility
- For any modifications to the relevant regulatory criteria, there must be person- centered service plan documentation.
- Optimizes, but does not regiment, individual initiative, autonomy, and independence in making life choices, including but not limited to, daily activities, physical environment, and with whom to interact.
- The setting is selected by the individual from among setting options including non-disability specific settings. The setting options are identified and documented in the person-centered plan and are based on the individual's needs and preferences.
- Facilitates individual choice regarding services and supports, and who provides them.
- The setting is integrated in and supports full access to the greater community, including opportunities to seek employment and work in competitive integrated settings, engage in community life, and receive services in the community, to the same degree of access as individuals not receiving Medicaid HCBS.

Each of the Checklists addresses one or more of these requirements. Each is also accompanied by a guidance document with several sections:

- *What This Looks Like in Practice* is intended to help providers consider some of the factors that would demonstrate compliance, including both "dos and don'ts" to think about.
- *ADMH-DDD Guidance* includes links to related rules, guidelines and tools the agency has developed and that will add to the provider's understanding of HCBS compliance expectations.
- *Source Documents/Other Tips, Tools and Ideas* provide links to other good resources from CMS and other states that can perhaps help providers problem-solve and brainstorm about strategies to ensure compliance.

HCBS Compliance Checklist Instructions

- **Complete all portions of the checklist.** Providers will note the date each portion of the review was completed, name of the reviewer, date of review, names and dates of applicable documents, names and dates of trainings, names of those interviewed and dates of interviews.
- Contact your Regional Office if you have any questions about how to complete the provider sections.
- When ADMH-DDD staff arrive to complete any monitoring or certification activities, they will request to see the completed Checklists. Because both monitoring and certification activities address each of these mandatory requirements, the completed Checklists should help facilitate the ease and speed with which ADMH-DDD staff can confirm compliance.
- It's possible that, in completing the Checklist, you might realize you don't yet have all the evidence you need to demonstrate compliance. One of the benefits of these tools is to help you identify where you might need to strengthen your compliance strategies. If you find that to be the case, you can use the guidance documents to help. You can also contact your Regional Office to get technical assistance related to your specific concern.

HCBS Requirement: Lockable Doors and Keys

42 C.F.R. § 441.301(c)(4)(vi)(B)(1)

In a provider-owned or controlled residential setting, each individual must have privacy in their sleeping or living unit with entrance doors lockable by the individual. Only appropriate staff may have keys to the door.

What This Looks Like in Practice

- People who live in the home can come and go even if the front door is locked (e.g., ring a bell, have their own key or request a key prior to leaving).
- Locks are standard on all bedroom unit doors, and people who live in the home can choose whether to use them.
- People have control over their privacy and the option to lock their bedroom or unit door from the inside and outside.
- People have their own key/fob to their bedroom or unit.
- When asked, people know they have a right to lock their own doors and have keys.
- If there are circumstances that prevent people from having a locked bedroom/unit door, or carrying their own keys, these are discussed during the person-centered planning process and described and documented in the person-centered plan.
  - ✓ The person-centered plan documents discussion of practical and creative strategies that can help people have access to privacy, including lockable doors and their own keys, despite the apparent circumstances. (For example, if the person loses the key repeatedly, the team strategizes ways to make it more secure.)
  - ✓ If this is not possible, the person-centered plan documents discussion of practical and creative strategies to remedy the circumstances causing any restriction of this right, and those plans are implemented.
  - ✓ A Human Rights Committee reviews any restrictions when they are proposed, including the plan to remedy it and the projected timelines, and reviews the plan regularly to make sure it remains appropriate and progress is being made.
- Staff can state the rights of people to have privacy, including lockable doors and their own keys.
- The staff person(s) allowed to have keys/fob to a person's room is determined by the person and the provider and should be documented in the person-centered plan.
- Staff and others respect the person's privacy by knocking and receiving permission before entering a person's room.
- Staff only access a person's bedroom or unit without permission to address health and safety concerns. Staff are trained on a safety plan for use in an emergency situation if a person's bedroom or bathroom door is locked.
- People are offered their own bedroom, when available.

ADMH-DDD Guidance and Tools

Provider Operational Guidelines Manual (02/03/22): Section 6.3.b

Source Documents/Other Tips, Tools and Ideas:

1. https://mn.gov/dhs/assets/102517-hcbs-best-practices-guide_tcm1053-318393.pdf
2. https://bhddh.ri.gov/sites/g/files/xkgbur411/files/documents/HCBS-Final-Rule---Guide-and-FAQ- Part-1-Jan2019.pdf
3. https://www.maine.gov/dhhs/sites/maine.gov.dhhs/files/inline-files/Maine-HCBS-Provider- Manual-2021_0.docx
4. https://www.medicaid.gov/Medicaid-CHIP-Program-Information/By-Topics/Long-Term-Services- and-Supports/Home-and-Community-Based-Services/Downloads/Exploratory-questions-re- settings-characteristics.pdf
5. https://www.medicaid.gov/medicaid-chip-program-information/by-topics/long-term-services-and- supports/home-and-community-based-services/downloads/exploratory-questions-non- residential.pdf
6. https://www.dmas.virginia.gov/media/2846/residential-locks-roommates-decorate-2021.pdf

Checklist: Lockable Doors

Policy, Procedures and Operational Guidelines: [Name of Agency]

1. Ensure that P&P Manual contains the specific requirement that individuals will have locks on their sleeping or living unit to allow for privacy.
2. Ensure the P&P Manual describes the expectation that staff and others respect the person's privacy by knocking and receiving permission before entering a person's room.
3. Ensure the P&P Manual explains how to determine the appropriate staff who can have a key to an individual's room and the circumstances under which they can use it.
4. Ensure that P&P Manual describes the specific procedure to obtain due process if a modification is required, in keeping with the description in the *Checklist for Person- Centered Plan Documentation of Modifications to HCBS Requirements* to include Human Rights Committee Review (HRC).
5. Ensure that P&P Manual requires provider staff are trained with regard to privacy requirements, including locks on sleeping or living unit doors and individuals' right to lock door unless there is a formal restriction, completed in accordance with due process policy, in place.
6. Ensure that operational (maintenance) guidelines include a procedure for ensuring that locks are present and in working order on at least a quarterly basis.

✓ Does the Manual contain the expectation for each policy?
✓ Does the Manual describe the provider's specific procedures for ensuring each policy is implemented?

Check to confirm policy is complete	Yes	No
1. Contains		
2. Describes		
3. Explains		
4. Describes		
5. Requires		
6. Ensures		

Ensure that provider staff have been trained to competency for this requirement.

1. Is there training curriculum available for review?
2. Does the training material accurately reflect the requirement and what it should look like in practice?
3. Do the training rosters show that all staff have been trained in this requirement?

Name of Training:
Name of Trainer:
Date of Training:
Training Roster Available:

Provider Confirmation				
Name of Policy				
Policy Page and/or Number				
Date Policy Completed/Approved				
Approved By				

Setting Observations: [Address of Setting]	Individual/Staff Name(s)	Date
All bedroom doors have working locks.		
Every individual has a key to their sleeping or living unit doors.		
Due Process Plans are available for review when bedroom doors do not have working locks and individuals do not have keys; the Due Process Plans are consistent with the Due Process policy for individuals who do not have keys.		
List any individual who do not have a key and the date of HRC review:		

Interviews of People in Setting	Individual/Staff Name(s)	Date
Ensure that every individual interviewed is aware of the right to lock sleeping or living unit doors for privacy. Examples of questions to ask: ✓ Can you lock the door to your bedroom if you want to so that you can have privacy? ✓ If any individual interviewed has an approved restriction consistent with the due process policy, ensure the individual has been informed of the restriction and the plan to remove it.		
Ensure that every individual interviewed has a key to their sleeping or living unit doors. Examples of questions to ask: ✓ Do you have a key for your bedroom? ✓ Do you keep it with you or have a special place for it? ✓ If you don't have a key, why not? Has anyone offered to give you one? If any individual interviewed has an approved restriction consistent with the due process policy, ensure the individual has been informed of the restriction and the plan to remove it.		
Interview individuals about their ability to use their keys and locks effectively and any relevant supports and/or training in the person-centered plan. Examples of questions to ask: ✓ Do you know how to use your key/lock? ✓ If feasible and appropriate: Could you please show me how you use your key/lock? If any individual cannot effectively use their lock and/or key: Is someone helping you practice and learn how to use it, or does someone help you use it when needed?		

Interview staff to ensure they can describe an individual's right to lock the bedroom door for privacy and any approved restriction, including the plan in process to remove it, consistent with the due process policy. ✓ If any individual supported has a plan in place to remove a modification, such as an individual training plan, provider staff should be able to describe the components of the plan that they are expected to implement		
Interview staff to ensure they can describe how they support individuals to use, or learn how to use, their lock and key.		
Interview staff to ensure that those who have key access to individuals' rooms can describe the circumstances under which they can use the key.		
Notes:		

HCBS Requirement: Enforceable Lease

42 C.F.R. § 441.301(c)(4)(vi)(A)

For provider-owned or controlled settings, the unit or dwelling is a specific physical place that can be owned, rented, or occupied under a legally enforceable agreement by the individual receiving services, and the individual has, at a minimum, the same responsibilities and protections from eviction that tenants have under the landlord/tenant law of the State, county, city, or other designated entity.

For settings in which landlord tenant laws do not apply, the State must ensure that a lease, residency agreement or other form of written agreement will be in place for each HCBS participant, and that the document provides protections that address eviction processes and appeals comparable to those provided under the jurisdiction's landlord tenant law.

What This Looks Like in Practice

- The lease or other legally enforceable residency agreement contains the HCBS-required resident rights and informs people receiving supports and providers of their responsibilities under the agreement, such as:
    - ✓ Amount and due date for rent or room/board
    - ✓ Person's responsibilities (i.e., maintaining his/her living space and not engaging in activities that disrupt or potentially cause harm to roommates)
    - ✓ Provider's responsibilities for property maintenance
    - ✓ Reasons the provider could initiate an involuntarily termination to the lease/agreement
    - ✓ Provider's timeframe for giving the person a notice of service termination and/or eviction
    - ✓ Person's appeal rights information
    - ✓ The timeframe the lease is in force
- The provider explains the terms of the lease/agreement in a format the person can easily understand.
- The provider might include information about lease/agreement rights in a program handbook, but, if so, the lease/agreement explicitly references that those rights are outlined in the handbook. There is also documentation showing the person received the handbook and had the opportunity to get any questions answered.
- The provider gives the person a fully signed copy of the lease/residency agreement and a place for safekeeping.
- The provider does not impose or accept any restriction to this right.
- The following should *never* occur:
    - ✓ A provider forces an individual to move out without due process, including adequate notice.
    - ✓ A provider discharges/evicts an individual for an issue that was not included or described in the admission agreement that was signed by the person or their legal representative.

ADMH-DDD Guidance and Tools:

Provider Operational Guidelines Manual (02/03/22): Section 6.3.b

Source Documents/Other Tips, Tools and Ideas

1. Alabama Uniform Residential Landlord and Tenant Act: http://ali.state.al.us/legislation/landlord_tenant.pdf
2. https://www.maine.gov/dhhs/sites/maine.gov.dhhs/files/inline-files/Maine-HCBS-Provider-Manual- 2021_0.docx
3. https://mn.gov/dhs/assets/102517-hcbs-best-practices-guide_tcm1053-318393.pdf
4. https://bhddh.ri.gov/sites/g/files/xkgbur411/files/documents/HCBS-Final-Rule---Guide-and-FAQ- Part-1-Jan2019.pdf
5. https://dss.sd.gov/docs/medicaid/hcbs/01.25.17_PowerPoint.pdf
6. https://www.dmas.virginia.gov/media/1228/occupancy_lease_agreement_terms.pdf

Checklist: Legally Enforceable Agreement (Lease)

Policy, Procedures and Operational Guidelines: [Name of Agency]

1. Ensure that P&P Manual contains the specific requirement that individuals will have a legally enforceable lease that provides the same responsibilities and protections from eviction/discharge/transfer as other community members and as aligned with landlord-tenant law.
2. Ensure that the P&P Manual describes how and when the individual will be informed of the lease and lease requirements.
3. Ensure that P&P Manual describes the specific procedure to obtain due process if a modification is required, in keeping with the description in the *Checklist for Person-Centered Plan Documentation of Modifications to HCBS Requirements.*
4. Ensure that P&P Manual requires provider staff to be trained with regard to the lease and lease requirements.

✓ Does the Manual contain the expectation for each policy?
✓ Does the Manual describe the provider's specific procedures for ensuring each policy is implemented?

Check to confirm the policy is complete	Yes	No
1. Contains		
2. Describes		
3. Describes		
4. Requires		

Ensure that provider staff have been trained to competency for this requirement.

1. Is there training curriculum available for review?
2. Does the training material accurately reflect the requirement and what it should look like in practice?
3. Do the training rosters show that all staff have been trained in this requirement?

Name of Training:
Name of Trainer:
Date of Training:
Training Roster Available:

Provider Confirmation				
Name of Policy:				
Policy Page and/or Number				
Date Policy Completed/Approved				
Approved By:				

Setting Observations: [Address of Setting]	Individual/Staff Name(s)	Date
Observe that all individuals have a current and signed, legally enforceable lease agreement.		
List any individuals who do not have a lease available for review and that is consistent with the policies described above.		
List any individuals who have modifications that require due process consistent with policy.		
Interviews of People in Setting	**Individual/Staff Name(s)**	**Date**
Interview individuals, and/or guardians if applicable, to ensure they are aware of the right to and existence of the legally enforceable lease.		
Interview staff to ensure they are aware of an individual's right to a legally enforceable lease agreement.		
Notes:		

HCBS Requirement: Control of Personal Resources

42 C.F.R. § 441.301(c)(4)(i)

The setting is integrated and supports full access to the greater community for people who receive HCBS services. This includes opportunities to seek employment and work in competitive integrated settings, engage in community life, control personal resources and receive services in the community to the same degree of access as people who do not receive HCBS.

What This Looks Like in Practice

- People have control over their personal funds and other personal resources as well as access to information about their income.
- People are offered financial literacy skills training, including how to use the personal resources they possess and how to protect those resources at home, work, and in the community.
- People have the opportunity to shop and make purchases consistent with their choices and available personal resources.
- The setting supports people to implement the decisions they make about how they want to spend their money (e.g., providing support and transportation to go to places they choose to spend their money, providing support for on-line and/or mail order purchases, etc.).
- People have a way to access their money when they choose, not just during a set timeframe or business office hours.
- The setting offers each person a separate place to keep their money, checkbook, ATM card (as applicable), and only the person (and necessary staff, if applicable) should have a key to this location. If a person does not have key, this modification must be justified and documented in the person-centered plan
- People choose their own banking and financial services.
- If designated as the Representative Payee, the provider ensures that commingling of funds does not occur.
- The provider does not require people to sign over their paycheck or another form of payment/income as a condition of receiving services (unless required by a state-funded program).

ADMH-DDD Guidance and Tools:

ADMH DDD Provider Money Management Guidance
Operational Guideline: Money Management for Individuals Served
Provider Operational Guidelines Manual (02/03/22):

Source Documents/Other Tips, Tools and Ideas

1. https://www.maine.gov/dhhs/sites/maine.gov.dhhs/files/inline-files/Maine-HCBS-Provider-Manual-2021_0.docx
2. https://mn.gov/dhs/assets/102517-hcbs-best-practices-guide_tcm1053-318393.pdf
3. https://dss.sd.gov/docs/medicaid/hcbs/01.25.17_PowerPoint.pdf
4. https://dds.dc.gov/publication/hcbs-training-control-personal-resources-strategies-and-tools
5. https://www.medicaid.gov/Medicaid-CHIP-Program-Information/By-Topics/Long-Term-Services- and-Supports/Home-and-Community-Based-Services/Downloads/Exploratory-questions-re-settings-characteristics.pdf
6. https://www.medicaid.gov/medicaid-chip-program-information/by-topics/long-term-services-and-supports/home-and-community-based-services/downloads/exploratory-questions-non- residential.pdf

Checklist: Control Over Personal Resources

Policy, Procedures and Operational Guidelines: [Name of Agency]

1. Ensure that P&P Manual contains the specific requirement that individuals will have control over their personal resources, including personal funds, and that individuals have access to information about their resources.
2. Ensure the P&P Manual describes the expectation that individuals are able to shop and make purchases with their personal funds consistent with their personal choices.
3. Ensure the P&P Manual explains the process for designating a Representative Payee and how commingling of funds will be prevented.
4. Ensure that P&P Manual describes the specific procedure to obtain due process if a modification is required, in keeping with the description in the *Checklist for Person- Centered Plan Documentation of Modifications to HCBS Requirements.*
5. Ensure that P&P Manual requires provider staff are trained with regard to individuals' control over Personal Resources.

✓ Does the Manual contain the expectation for each policy?
✓ Does the Manual describe the provider's specific procedures for ensuring each policy is implemented?

Check to confirm policy is complete	Yes	No
1. Contains		
2. Describes		
3. Describes		
4. Describes		
5. Requires		

Ensure that provider staff have been trained to competency for this requirement.

1. Is there training curriculum available for review?
2. Does the training material accurately reflect the requirement and what it should look like in practice?
3. Do the training rosters show that all staff have been trained in this requirement?

Name of Training:
Name of Trainer:
Date of Training:
Training Roster Available:

Provider Confirmation				
Name of Policy:				
Policy Page or Number				
Date Policy Completed/Approved:				
Approved By:				

Setting Observations: [Address of Setting]	Individual Name(s)	Date
Observe, as feasible, whether individuals have control over and access to their personal resources.		
If there is an approved provider- imposed restriction, is a plan in process to remove it that is consistent with the person-centered plan and due process policy?		
Interviews of People in Setting	**Individual Name(s)**	**Date**
Interview individuals to ensure they are aware of their right to have control over and access to personal resources. Examples of questions to ask: ✓ Are you able to keep your own money with you? ✓ If you don't keep your own money with you, can you get it whenever you ask for it? ✓ Do you have your own bank account or ATM card? Do you know how to use them?		
Ensure that every individual has the ability to shop and make purchases with their personal funds consistent with the individual's personal choices. Examples of questions to ask: ✓ If you want to buy something and you have enough money to pay for it, do you go shopping for it? Do you ever buy things on-line? ✓ Where do you like to shop? How often do you go shopping? If there is an approved provider- imposed restriction, there is a plan in process to remove it that is consistent with the person-centered plan and due process policy.		
Interview staff to ensure they can describe an individual's right to control and access their personal resources, including personal funds, and that they can describe their roles and responsibilities in supporting individuals to exercise control over personal resources.		
For providers who are Representative Payees, Interview staff to ensure they can describe their role and responsibilities.		
Notes:		

HCBS Requirement: Freedom to Furnish and Decorate Sleeping or Living Units

42 C.F.R. § 441.301(c)(4)(vi)(B)(3)

People have the freedom to furnish and decorate their sleeping or living units within the lease or other agreement.

What This Looks Like in Practice

- People can decorate their rooms as desired by choosing decorations and/or furnishing them within their budget and within the terms of any lease/residency agreement.
- The provider encourages individuality within the bedroom décor and has a process for gathering input from individuals and providing support in decorating bedrooms.
- Any rules or responsibilities about furnishing of living units must be included in the terms of the lease or residency agreement and must be respected by both the participant and the provider.
- People can bring their own furniture and other belongings to this setting, such as a favorite chair or comfortable bed, as long as personal effects do not compromise the health and safety of any person and space allows.
- A person's bedroom should not be furnished by the provider with no input from the person, and decorations should not be restricted beyond normal landlord-tenant norms.
- Bedrooms don't all look identical.
- When re-decorating common areas, the provider takes into account the preferences of the people living in the home, to the extent possible.

ADMH-DDD Guidance and Tools:

Provider Operational Guidelines Manual (02/03/22):

Other Tips, Tools and Ideas

1. https://mn.gov/dhs/assets/102517-hcbs-best-practices-guide_tcm1053-318393.pdf
2. https://bhddh.ri.gov/sites/g/files/xkgbur411/files/documents/HCBS-Final-Rule---Guide-and- FAQ-Part-1-Jan2019.pdf
3. https://dss.sd.gov/docs/medicaid/hcbs/01.25.17_PowerPoint.pdf
4. https://www.maine.gov/dhhs/sites/maine.gov.dhhs/files/inline-files/Maine-HCBS-Provider- Manual-2021_0.docx
5. https://www.medicaid.gov/Medicaid-CHIP-Program-Information/By-Topics/Long-Term-Services- and-Supports/Home-and-Community-Based-Services/Downloads/Exploratory-questions-re- settings-characteristics.pdf
6. https://www.dmas.virginia.gov/media/2846/residential-locks-roommates-decorate-2021.pdf

Checklist: Freedom to Furnish and Decorate Sleeping or Living Units

Policy, Procedures and Operational Guidelines: [Name of Agency]

1. Ensure that P&P Manual contains the specific requirement that individuals will have control over decorating and furnishing their living units and that units are not pre- furnished.
2. Ensure the P&P Manual describes the expectation that individuals have control over their decor as long as personal effects do not compromise the health and safety of any person and as space allows.
3. Ensure the lease agreement specifies any rules or responsibilities about the furnishing of living units in the terms of the lease or residency agreement.
4. Ensure that P&P Manual describes the specific procedure to obtain due process if a modification is required, in keeping with the description in the *Checklist for Person- Centered Plan Documentation of Modifications to HCBS Requirements.*
5. Ensure that P&P Manual requires provider staff are trained with regard to individuals' control over decorating and furnishing their living units.

- ✓ Does the Manual contain the expectation for each policy?
- ✓ Does the Manual describe the provider's specific procedures for ensuring each policy is implemented?

Check to confirm policy is complete	Yes	No
1. Contains		
2. Describes		
3. Specifies		
4. Describes		
5. Requires		

Ensure that provider staff have been trained to competency for this requirement.

1. Is there training curriculum available for review?
2. Does the training material accurately reflect the requirement and what it should look like in practice?
3. Do the training rosters show that all staff have been trained in this requirement?

Name of Training:
Name of Trainer:
Date of Training:
Training Roster Available:

Provider Confirmation				
Name of Policy:				
Policy Page or Number				
Date Policy Completed/Approved:				
Approved By:				

Setting Observations: [Address of Setting]	Individual Name(s)	Date
Observe whether individuals have bedrooms that do not all look alike and that they appear to be decorated with personal items.		
If there is an approved provider- imposed restriction, is a plan in process to remove it that is consistent with the person-centered plan and due process policy?		
Interviews of People in Setting	**Individual Name(s)**	**Date**
Interview individuals to ensure they can decorate and furnish their living units according to their preferences. Examples of questions to ask: ✓ Can you decorate your room like you want to? ✓ What kinds of decorations do you like? ✓ Are their things you can't have in your room that you would like to have? ✓ Would you like to show me your room?		
Interview staff to ensure they can describe an individual's right to decorate and furnish their living units.		
Notes:		

HCBS Requirement: Access to Food

42 C.F.R. § 441.301(c)(4)(vi)(B)(3)

People have access to food at any time.

What This Looks Like in Practice

- People have choices of when, where and with whom they would like to eat (e.g., no set mealtimes or assigned seats, an individual can request alternative meals if desired, etc.).
- People can eat a meal or snack at any time (e.g., if they miss a meal due to an activity, they do not have to wait for the next meal to eat; the provider can set aside a plate for them to reheat later or provide an alternate meal when they return).
- People have a place to store their own snacks if they want.
- The kitchen and food storage areas are accessible to people who live in the home. Kitchen cabinets and refrigerators are not locked or "off-limits."
- People who work have access to food through typical workplace rules that all employees follow.
- Examples of support may include:
  - ✓ Assisting with budgeting and shopping for snacks
  - ✓ Assisting with safe storage of snacks
  - ✓ Providing alternative choices when a main meal option is not chosen or when the participant eats a meal outside of a standard mealtime
  - ✓ Assisting with healthy food choices without controlling or discounting the participant's preferences
- The setting may not limit a person's access to food items solely based on:
  - ✓ Whether staff think the food is "junk food"
  - ✓ The staff's personal beliefs
  - ✓ A staff's perception that the person is not a healthy weight
- If it's an agreed upon goal in a person's person-centered plan, staff at the setting can assist a person to learn about better food choices and how to make them – but staff still respect the person's decisions, even if they don't agree with them.
- The setting does not limit a person's access to food unless there is an identified and documented risk to the person's health or safety that requires rights modification.

ADMH-DDD Guidance and Tools:

Provider Operational Guidelines Manual (02/03/22): Section 6.3.b

Source Documents/Other Tips, Tools and Ideas

1. https://www.maine.gov/dhhs/sites/maine.gov.dhhs/files/inline-files/Maine-HCBS-Provider-Manual-2021_0.docx
2. https://mn.gov/dhs/assets/102517-hcbs-best-practices-guide_tcm1053-318393.pdf
3. https://bhddh.ri.gov/sites/g/files/xkgbur411/files/documents/HCBS-Final-Rule---Guide-and-FAQ- Part-1-Jan2019.pdf
4. https://www.oregon.gov/DHS/SENIORS-DISABILITIES/HCBS/Resources/Access%20to%20Food.pdf
5. https://www.medicaid.gov/Medicaid-CHIP-Program-Information/By-Topics/Long-Term-Services- and-Supports/Home-and-Community-Based-Services/Downloads/Exploratory-questions-re-settings-characteristics.pdf
6. https://www.medicaid.gov/medicaid-chip-program-information/by-topics/long-term-services-and-supports/home-and-community-based-services/downloads/exploratory-questions-non- residential.pdf

Checklist: Access to Food

Policy, Procedures and Operational Guidelines: [Name of Agency]

1. Ensure that P&P Manual contains the specific requirement that individuals have access to food at any time and are provided a place to store snacks.
2. Ensure the P&P Manual describes the expectation that individuals have choices of when, where and with whom they would like.
3. Ensure the P&P Manual describes the expectation that individuals who work have access to food through typical workplace rules that all employees follow.
4. Ensure that P&P Manual describes the specific procedure to obtain due process if a modification is required, in keeping with the description in the *Checklist for Person- Centered Plan Documentation of Modifications to HCBS Requirements.*
5. Ensure that P&P Manual requires provider staff are trained with regard to individuals' access to food at any time.

✓ Does the Manual contain the expectation for each policy?
✓ Does the Manual describe the provider's specific procedures for ensuring each policy is implemented?

Check to confirm policy is complete	Yes	No
1. Contains		
2. Describes		
3. Describes		
4. Describes		
5. Requires		

Ensure that provider staff have been trained to competency for this requirement.

1. Is there training curriculum available for review?
2. Does the training material accurately reflect the requirement and what it should look like in practice?
3. Do the training rosters show that all staff have been trained in this requirement?

Name of Training:
Name of Trainer:
Date of Training:
Training Roster Available:

Provider Confirmation

Name of Policy:				
Policy Page or Number				
Date Policy Completed/Approved:				
Approved By:				

Setting Observations: [Address of Setting]	Individual/Staff Name(s)	Date
Ensure that individuals have access to food at any time and are provided a place to store snacks.		
If there is an approved provider- imposed restriction, is a plan in process to remove it that is consistent with the person-centered plan and due process policy?		
Interviews of People in Setting	**Individual/Staff Name(s)**	**Date**
Interview individuals to ensure they are aware they can have to food at any time and are provided a place to store snacks. Examples of questions to ask: ✓ If you get hungry or want a snack outside of mealtimes, can you get something to eat if you want to? ✓ Do you have to get permission from anybody? If so, do you know why you need permission?		
Interview staff to ensure they can describe an individual's right to access to food at any time and their roles and responsibilities to support that right. ✓ If any individual has an approved restriction consistent with the due process policy, ensure staff know about the restriction and the plan to remove it, and can describe their roles and responsibilities in implementing that plan.		
Notes:		

HCBS Requirement: Privacy

42 C.F.R. § 441.301(c)(4)(iii)

Providers must ensure an individual's right of privacy.

What This Looks Like in Practice

- Settings have policies and procedures and related staff training to ensure peoples' needs and desires for privacy are respected and protected.
- Staff and roommates respect a person's personal possessions/private property.
- People have access to make and receive private telephone calls and access to personal communication via text, email or other personal communication method.
- People have access to spaces for private conversations or quiet time (e.g., a place to be alone if someone is upset or wants to relax in a quiet area).
- There is a location where people can visit privately with visitors.
- People have privacy during activities of daily living such as maintaining personal hygiene, bathing, grooming and dressing. Staff ask for the person's permission to provide the needed support and do so in a private area and with discretion and dignity.
- Staff knock on the door and get permission from a person before entering the living unit. If the person is not readily able to express permission, the staff will, as much as possible, ensure that the person is aware of the staff person's presence and intention to enter the living unit and monitor the person's reaction for signs of their privacy being violated.
- The provider and staff keep personal information private and do not share it with others without the person's expressed consent.
- Staff do not discuss an individual in the open or within earshot of those who do not need to hear the discussion.
- People's full names and personal/health information are not left in public for others to see.
- Staff don't open mail or other forms of communication without the consent of the person or their guardian.
- One way of ensuring that individuals have privacy in their living unit is providing them with the choice of roommate. People are supported in exploring every possible residential option, including being able to choose a roommate whenever possible. This means that:
    - ✓ The provider has a written process supporting individuals choosing their own roommate.
    - ✓ People are involved in the selection of a roommate.
    - ✓ The provider informs individuals of the process for requesting or changing a roommate.

ADMH-DDD Guidance and Tools:

Provider Operational Guidelines Manual (02/03/22): Sections 6.3.b and 6.3.c

Source Documents/Other Tips, Tools and Ideas

1. https://www.maine.gov/dhhs/sites/maine.gov.dhhs/files/inline-files/Maine-HCBS-Provider- Manual-2021_0.docx
2. https://mn.gov/dhs/assets/102517-hcbs-best-practices-guide_tcm1053-318393.pdf
3. https://bhddh.ri.gov/sites/g/files/xkgbur411/files/documents/HCBS-Final-Rule---Guide-and- FAQ-Part-1-Jan2019.pdf
4. https://dss.sd.gov/docs/medicaid/hcbs/01.25.17_PowerPoint.pdf
5. https://www.medicaid.gov/Medicaid-CHIP-Program-Information/By-Topics/Long-Term-Services- and-Supports/Home-and-Community-Based-Services/Downloads/Exploratory-questions-re- settings-characteristics.pdf
6. https://www.medicaid.gov/medicaid-chip-program-information/by-topics/long-term-services- and-supports/home-and-community-based-services/downloads/exploratory-questions-non- residential.pdf
7. https://www.dmas.virginia.gov/media/2846/residential-locks-roommates-decorate-2021.pdf

Checklist: Privacy

Policy, Procedures and Operational Guidelines: [Name of Agency]

1. Ensure that P&P Manual contains the specific requirement that individuals have the right to privacy, have the right to have their information kept private, and have the right to have personal care provided in private.
2. Ensure the P&P Manual describes the expectation that people have access to make and receive private telephone calls and access to personal communication via text, email or other personal communication method as well as a location where they can visit with others privately.
3. Ensure the P&P Manual describes the expectation that the provider and staff keep personal information private and do not share it with others without the person's expressed consent.
4. Ensure the P&P Manual describes the expectation that staff will not enter the person's living unit without first knocking on the door and obtaining permission from the person to enter the living unit.
5. Ensure that P&P Manual describes the specific procedure for choosing a roommate, whenever possible.
6. Ensure that P&P Manual describes the expectation for obtaining due process if a modification to is required, in keeping with the description in the *Checklist for Person- Centered Plan Documentation of Modifications to HCBS Requirements.*
7. Ensure that P&P Manual requires provider staff are trained with regard to individuals' right to privacy.

- ✓ Does the Manual contain the expectation for each policy?
- ✓ Does the Manual describe the provider's specific procedures for ensuring each policy is implemented?

Check to confirm policy is complete	Yes	No
1. Contains		
2. Describes		
3. Describes		
4. Describes		
5. Describes		
6. Describes		
7. Requires		

Ensure that provider staff have been trained to competency for this requirement.

1. Is there training curriculum available for review?
2. Does the training material accurately reflect the requirement and what it should look like in practice?
3. Do the training rosters show that all staff have been trained in this requirement?

Name of Training:
Name of Trainer:
Date of Training:
Training Roster Available:

Provider Confirmation				
Name of Policy:				
Policy Page or Number				
Date Policy Completed/Approved:				
Approved By:				

Setting Observations: [Address of Setting]	Individual/Staff Name(s)	Date
Observe that individuals are afforded the right to privacy.		
If there is an approved restriction, there is a plan in process to remove it that is consistent with the person- centered plan and due process policy.		
Interviews of People in Setting	**Individual/Staff Name(s)**	**Date**
Interview individuals to ensure they are aware of their right to privacy. Examples of questions to ask: ✓ Do staff allow you to have privacy when you want it? ✓ If you have visitors, can you visit with them privately? ✓ If you want to make telephone calls, do you have a place to do that privately? ✓ Do staff help you with any personal care? Do they do that in a private place? ✓ If there is an approved restriction, there is a plan in process to remove it that is consistent with the person-centered plan and due process policy.		
Interview staff to ensure they can describe an individual's right to privacy, including not sharing personal information without the individual's consent and not entering the living unit without permission. ✓ If any individual has an approved modification about staff entering the living unit without permission that is consistent with the due process policy, ensure staff know about the restriction and the plan to remove it, and can describe their roles and responsibilities in implementing that plan.		
Notes:		

HCBS Requirement: Dignity and Respect

42 C.F.R. § 441.301(c)(4)(iii)

Providers must ensure an individual's rights of dignity and respect.

What This Looks Like in Practice

- The setting ensures individuals they serve are treated with dignity and respect at all times. This includes respecting individuals' likes and dislikes, talking with individuals in a way that makes them feel respected and heard and assisting individuals with ADLs in a compassionate manner that preserves their dignity.
- During mealtimes, staff do not require people to wear bibs or use disposable cutlery, plates and cups.
- People choose hairstyles and clothes that meet their personal preferences, fit and are clean and appropriate for the time of day and weather.
- Staff address people in the manner in which the person would like to be addressed. People are addressed by their preferred name, not "hon," "sweetie" or a similar name.
- Staff do not curse or use profanity and converse with people in a respectful and appropriate manner.
- Staff do not discuss a person who is present like they are not there or within earshot of other persons living in or visiting the settings. Staff include the person in conversation.
- Staff converse respectfully with people while providing care and assistance, regardless of the person's ability to vocalize a response.
- Staff use written, verbal and non-verbal communication that demonstrates the values of respect and dignity.
- When in the community, staff model respectful interactions and communications for others.
- The setting does not allow any restriction to this right.

ADMH-DDD Guidance and Tools:

Provider Operational Guidelines Manual (02/03/22): Section 6.3.b and 6.3.c

Source Documents/Other Tips, Tools and Ideas

1. https://www.maine.gov/dhhs/sites/maine.gov.dhhs/files/inline-files/Maine-HCBS-Provider-Manual-2021_0.docx
2. https://mn.gov/dhs/assets/102517-hcbs-best-practices-guide_tcm1053-318393.pdf
3. https://dss.sd.gov/docs/medicaid/hcbs/01.25.17_PowerPoint.pdf
4. https://www.medicaid.gov/Medicaid-CHIP-Program-Information/By-Topics/Long-Term-Services-and-Supports/Home-and-Community-Based-Services/Downloads/Exploratory-questions-re-settings-characteristics.pdf
5. https://www.medicaid.gov/medicaid-chip-program-information/by-topics/long-term-services-and-supports/home-and-community-based-services/downloads/exploratory-questions-non-residential.pdf

Checklist: Dignity and Respect

Policy, Procedures and Operational Guidelines: [Name of Agency]

1. Ensure that P&P Manual contains the specific requirement that providers ensure that individuals are treated with dignity and respect at all times.
2. Ensure the P&P Manual describes the expectation that individuals have freedom of choice about clothing and hairstyle.
3. Ensure the P&P Manual describes the expectation that staff will address people in the manner in which the person would like to be addressed.
4. Ensure that P&P Manual prohibits any restriction to this requirement.
5. Ensure that P&P Manual describes the expectation for obtaining due process if a modification to is required, in keeping with the description in the *Checklist for Person- Centered Plan Documentation of Modifications to HCBS Requirements.*
6. Ensure that P&P Manual requires provider staff are trained with regard to individuals' rights to dignity and respect.

- ✓ Does the Manual contain the expectation for each policy?
- ✓ Does the Manual describe the provider's specific procedures for ensuring each policy is implemented?

Check to confirm policy is complete	Yes	No
1. Contains		
2. Describes		
3. Describes		
4. Prohibits		
5. Describes		
6. Requires		

Ensure that provider staff have been trained to competency for this requirement.

1. Is there training curriculum available for review?
2. Does the training material accurately reflect the requirement and what it should look like in practice?
3. Do the training rosters show that all staff have been trained in this requirement?

Name of Training:
Name of Trainer:
Date of Training:
Training Roster Available:

Provider Confirmation				
Name of Policy:				
Policy Page or Number				
Date Policy Completed/Approved:				
Approved By:				

Setting Observations: [Address of Setting]	Individual/Staff Name(s)	Date
Observe whether individuals are treated with dignity and respect, consistent with what this should look like in practice.		
If there is an approved restriction, there is a plan in process to remove it that is consistent with the person- centered plan and due process policy.		
Interviews of People in Setting	**Individual/Staff Name(s)**	**Date**
Interview individuals to ensure they are aware of these rights and if they feel they are treated with dignity and respect. Examples of questions to ask: ✓ Do you feel that staff listen to and respect you? ✓ Do you feel that your likes, dislikes, and preferences are respected? ✓ Are you able to wear your hair and clothes as you would like as long as they are fit, clean, and appropriate for the weather?		
Interview staff to ensure they can describe an individual's rights to dignity and respect at all times and their roles and responsibilities to support these rights.		
Notes:		

HCBS Requirement: Freedom from Coercion

42 C.F.R. § 441.301(c)(4)(iii)

Providers must ensure an individual's freedom from coercion.

What This Looks Like in Practice

- Coercion means persuading or convincing someone to do something using force, threats intimidation or other unethical means. The setting informs individuals that they have the right to live in an environment free from coercion.
- In a manner or format people supported can understand, the setting makes sure people know their rights and how to exercise them and provides them with instructions on how to file a complaint if their rights are violated by a peer, staff or any other person present at the setting.
- The complaint policy includes a statement that no retaliation will occur if a complaint is filed.
- The setting posts a recipient rights document in a public area where people and guardians are likely to see it.
- In a residential setting, the individual's rights are identified as part of the lease/Residency Agreement, and the setting keeps record of giving individual rights to each person.
- The provider reviews with individuals their rights no less than annually, and more frequently as needed.
- Staff understand and demonstrate that they have a responsibility to protect peoples' rights.
- Staff understand and demonstrate that their job is to provide assistance and support to people, rather than to direct or "manage" them.
- Staff show people that they account for and honor their choices according to their person-centered plan.

ADMH-DDD Guidance and Tools:

Provider Operational Guidelines Manual (02/03/22)

Source Documents/Other Tips, Tools and Ideas

1. https://www.maine.gov/dhhs/sites/maine.gov.dhhs/files/inline-files/Maine-HCBS-Provider-Manual-2021_0.docx
2. https://mn.gov/dhs/assets/102517-hcbs-best-practices-guide_tcm1053-318393.pdf
3. https://www.medicaid.gov/Medicaid-CHIP-Program-Information/By-Topics/Long-Term-Services-and-Supports/Home-and-Community-Based-Services/Downloads/Exploratory-questions-re-settings-characteristics.pdf
4. https://www.medicaid.gov/medicaid-chip-program-information/by-topics/long-term-services-and-supports/home-and-community-based-services/downloads/exploratory-questions-non-residential.pdf

HCBS Requirement: Freedom from Restraint

42 C.F.R. § 441.301(c)(4)(iii)

Providers must ensure an individual's freedom from restraint.

What This Looks Like in Practice

- The provider informs individuals that they have the right to live in an environment free from restraint.
- Staff understand and demonstrate that their job is to provide assistance and support to people, rather than to direct or "manage" them.
- Staff show people that they account for and honor their choices according to their person-centered plan.
- To assist those who might not use socially acceptable ways to express themselves when they are tired, angry, anxious, fearful or impatient, staff provide positive behavioral supports and techniques as the primary and first-line tools and interventions. Examples include modeling, positive reinforcement, problem-solving, comfort statements, environmental adaptations, etc.
- All behavioral support needs are described in the person-centered plan.
- The need for any restrictive intervention is assessed by a qualified professional, described and justified in the person-centered plan. It is also approved according to the ADMH-DDD *Behavioral Services Procedural Guidelines* and the policy and procedures for modifying and HCBS requirement.
- Medications, whether over the counter or prescription, are not used for convenience of staff or as a substitute for positive behavior supports.
- Medical restraints are used only when ordered by a medical practitioner.
- If a behavioral restraint is ever necessary to protect a person or others from harm, only trained staff perform restraint techniques that are approved for use by ADMH-DDD, and only for the least time required.
- All chemical and physical behavioral restraints are reviewed by an appropriately constituted Human Rights and Behavioral Review Committee.

ADMH-DDD Guidance and Tools:

Provider Operational Guidelines Manual (02/03/22): Sections 6.3.b and 6.3.e
Behavioral Services Procedural Guidelines

Source Documents/Other Tips, Tools and Ideas

- https://www.maine.gov/dhhs/sites/maine.gov.dhhs/files/inline-files/Maine-HCBS-Provider-Manual-2021_0.docx
- https://mn.gov/dhs/assets/102517-hcbs-best-practices-guide_tcm1053-318393.pdf
- https://www.medicaid.gov/Medicaid-CHIP-Program-Information/By-Topics/Long-Term-Services-and-Supports/Home-and-Community-Based-Services/Downloads/Exploratory-questions-re-settings-characteristics.pdf
- https://www.medicaid.gov/medicaid-chip-program-information/by-topics/long-term-services-and-supports/home-and-community-based-services/downloads/exploratory-questions-non-residential.pdf

Checklist: Freedom from Coercion and Restraint

Policy, Procedures and Operational Guidelines: [Name of Agency]

1. Ensure that P&P Manual contains the specific requirement that providers ensure that individuals are free from coercion and restraint.
2. Ensure the P&P Manual describes the expectation that the provider does not allow practices that include coercion or restraint interventions of individuals in their care.
3. Ensure the P&P Manual describes the expectation that the provider informs individuals of their rights and provides them with instructions on how to file a complaint if their rights are violated by a peer, staff or any other person present at the setting and that a recipient rights document and who to contact to file a complaint is posted in a public area.
4. Ensure that P&P Manual describes the specific procedure to obtain due process if a modification is required, in keeping with the description in the *Checklist for Person- Centered Plan Documentation of Modifications to HCBS Requirements.*
5. Ensure that P&P Manual requires provider staff are trained with regard to individuals' rights to freedom from coercion and restraint.

- ✓ Does the Manual contain the expectation for each policy?
- ✓ Does the Manual describe the provider's specific procedures for ensuring each policy is implemented?

Check to confirm policy is complete	Yes	No
1. Contains		
2. Describes		
3. Describes		
4. Describes		
5. Requires		

Ensure that provider staff have been trained to competency for this requirement.

1. Is there training curriculum available for review?
2. Does the training material accurately reflect the requirement and what it should look like in practice?
3. Do the training rosters show that all staff have been trained in this requirement?

Name of Training:
Name of Trainer:
Date of Training:
Training Roster Available:

Provider Confirmation

Name of Policy:				
Policy Page or Number				
Date Policy Completed/Approved:				
Approved By:				

Setting Observations: [Address of Setting]	Individual/Staff Name(s)	Date
Observe to ensure that individuals are free from coercion and restraint.		
If there is an approved restriction, there is a plan in process to remove it that is consistent with the person- centered plan and due process policy.		
Interviews of People in Setting	**Individual/Staff Name(s)**	**Date**
Interview individuals to ensure that they are aware of this right and feel free from coercion and restraint. Examples of questions to ask: ✓ Do staff help you do the things you tell them you want to do? ✓ Do you feel safe here? ✓ Do you ever feel threatened or forced to do something that you don't want to do? ✓ Does anyone here ever physically stop you from doing anything? ✓ Do you know how to report a complaint if someone treats you in a way that you think is wrong?		
Interview staff to ensure they can describe individuals' rights to be free from coercion and restraint and their roles and responsibilities to support these rights. ✓ If there is an approved modification or Behavior Support Plan, staff can describe how to implement it as written.		
NOTE:		

HCBS Requirement: Access to Visitors at Any Time

42 C.F.R. § 441.301(c)(4)(vi)(D)

Individuals are able to have visitors of their choosing at any

What This Looks Like in Practice

- People can choose their visitors and have no restrictions on visit times, including the ability to host visitors for meals, just as anyone would have in their own home or rental unit.
- People may have overnight guests.
- People have access to visitors in unrestricted areas within the setting.
- People have the right to privacy during visits.
- People have the opportunity to develop close, private and personal relationships without unnecessary barriers or obstacles imposed on them.
- The provider helps individuals coordinate arrangements for visitors, if needed.
- This requirement does not mean individuals can be inconsiderate of others' rights or the need for quiet and safety in the residence. It is intended to ensure individuals who live in provider owned homes have the same freedoms with relationships and visitors in their homes.
- Providers' policies and procedures for visits should include the individual's right to:
  - Have visitors of their choosing at any time
  - Request privacy during the visit
- The provider will make the Visitation policy available to all people and their guests that specifies:
    - Any limitations on the duration of stay and fees for lodging, visitor meals, etc. The policy may require roommate consent for overnight visitors.
    - Any conditions in which visitors are prohibited and/or restricted due to a risk to the health and safety of people residing at the setting.
    - If visitors are required to sign in:
      - Any restrictions on visitors who have caused or are causing a disturbance or who pose a health or safety risk to people within the setting.
      - The provider will notify people in writing if any visitor restrictions apply to their guests.
- People's right to have visitors of their choosing at any time must also be contained in the resident rights document and the resident handbook.
- People's lease/Residency Agreement shall not impose restrictions on visitors aside from identifying how long a visitor may stay before being considered a tenant.
- The setting may establish procedures to ensure the safety and welfare of people who live and work there. For example, providers may request that visitors notify staff that they are present in the residence. However, the procedure must not restrict visitors unnecessarily for the convenience of staff or restrict the person's freedom of association with whomever they choose.
- Providers may not screen the individual's visitors.
- The provider may not determine who may or may not visit based on their own feelings about the visitor's character.
- The setting may not have scheduled visitation hours.
- The provider directly addresses health and safety concerns with the person and shares them with the person's manager/Support Coordinator. If the case manager/Support Coordinator implements visit modifications, the modifications are documented and implemented in collaboration with the individual and the provider.

ADMH-DDD Guidance and Tools:

Provider Operational Guidelines Manual (02/03/22): Section 6.3.b

Other Tips, Tools and Ideas

1. https://www.maine.gov/dhhs/sites/maine.gov.dhhs/files/inline-files/Maine-HCBS-Provider-Manual-2021_0.docx
2. https://mn.gov/dhs/assets/102517-hcbs-best-practices-guide_tcm1053-318393.pdf
3. https://bhddh.ri.gov/sites/g/files/xkgbur411/files/documents/HCBS-Final-Rule---Guide-and-FAQ-Part-1-Jan2019.pdf
4. https://www.medicaid.gov/Medicaid-CHIP-Program-Information/By-Topics/Long-Term-Services-and-Supports/Home-and-Community-Based-Services/Downloads/Exploratory-questions-re-settings-characteristics.pdf
5. https://www.dmas.virginia.gov/media/1225/residential-visitors.pdf

Checklist: Access to Visitors at Any Time

Policy, Procedures and Operational Guidelines: [Name of Agency]

1. Ensure that P&P Manual contains the specific requirement that individuals are able to have visitors of their choosing at any time.
2. Ensure the P&P Manual describes the expectation that people have access to visitors in unrestricted areas within the setting and may have overnight guests.
3. Ensure the P&P Manual describes the expectation that the people have the opportunity to develop close, private and personal relationships without unnecessary barriers or obstacles imposed on them.
4. Ensure the P&P Manual describes any visitor- related procedures implemented by the setting to ensure the safety and welfare of people who live and work there and that these do not restrict visitors unnecessarily for the convenience of staff or restrict the person's freedom of association with whomever they choose.
5. Ensure that the residents' rights document and resident handbook include the right to have visitors of their choosing at any time.
6. Ensure that P&P Manual describes the specific procedure to obtain due process if a modification is required, in keeping with the description in the *Checklist for Person- Centered Plan Documentation of Modifications to HCBS Requirements.*
7. Ensure that P&P Manual requires provider staff are trained with regard to individuals' ability to have visitors of their choosing at any time.

- ✓ Does the Manual contain the expectation for each policy?
- ✓ Does the Manual describe the provider's specific procedures for ensuring each policy is implemented?

Check to confirm policy is complete	Yes	No
1. Contains		
2. Describes		
3. Describes		
4. Describes		
5. Includes		
6. Describes		
7. Requires		

Ensure that provider staff have been trained to competency for this requirement.

1. Is there training curriculum available for review?
2. Does the training material accurately reflect the requirement and what it should look like in practice?
3. Do the training rosters show that all staff have been trained in this requirement?

Name of Training:
Name of Trainer:
Date of Training:
Training Roster Available:

Provider Confirmation				
Name of Policy				
Policy Page and/or Number				
Date Policy Completed/Approved				
Approved By				

Setting Observations: [Address of Setting]	Individual/Staff Name(s)	Date
Observe as feasible, whether individuals are able to have visitors of their choosing at any time.		
If there is an approved provider- restriction, there is a plan in process to remove it that is consistent with the person-centered plan and due process policy.		
Interviews of People in Setting	**Individual/Staff Name(s)**	**Date**
Ensure that every individual is aware they can have visitors of their choosing at any time and that they exercise this right freely. Examples of questions to ask: ✓ Are you able to have visitors when you would like to? ✓ Do you decide who you want to have as guests? ✓ When you have visitors, are you able to talk and meet with them privately? ✓ Do staff ever control who you can or cannot visit with? If some visitors are not allowed, do staff provide a reason? ✓ Does your home have a visitation policy?		
Ensure that staff can describe an individual's ability to have visitors of their choosing at any time. ✓ If any individual has an approved modification consistent with the due process policy, ensure staff know about the restriction and the plan to remove it, and can describe their roles and responsibilities in implementing that plan.		
Notes:		

HCBS Requirement: Physical Accessibility

42 C.F.R. § 441.301(c)(4)(vi)(E)

The setting is physically accessible to the individual(s).

What This Looks Like in Practice

- In general, the setting is fully accessible and compliant with the Americans with Disabilities Act (ADA).
- People have unobstructed access to and are able to use common areas in the home, such as the kitchen, dining area, laundry area and shared living space, to the extent they desire. People can move about the setting and are not confined by gates or other barriers that prevent access to common areas.
- If people use wheelchairs for mobility, all the doorways to common areas in the setting are wide enough to allow the person to move back and forth freely and comfortably.
- Outdoor leisure or recreational areas, like patios and porches, are fully accessible to people with mobility needs.
- As needed, there are grab bars, ramps, adapted furniture, etc., to ensure access to desired areas and household items.
- The setting is designed to promote maximum independence and autonomy. For example, the washer and dryer are front loading for a person in a wheelchair if he/she chooses to do his/her own laundry, and the microwave is in an accessible location in case a person wants to warm up a meal.
- The provider has a conversation with people about accessibility needs upon move-in and ensures the physical environment meets the needs of people who live in the setting.
- Providers and staff regularly check for fall or trip hazards (loose rugs, uneven surfaces, etc.).
- People are notified that they may request a reasonable accommodation, and the provider explains how to make such a request.

ADMH-DDD Guidance and Tools:

Provider Operational Guidelines Manual (02/03/22)

Source Documents/Other Tips, Tools and Ideas

1. https://www.maine.gov/dhhs/sites/maine.gov.dhhs/files/inline-files/Maine-HCBS-Provider-Manual-2021_0.docx
2. https://mn.gov/dhs/assets/102517-hcbs-best-practices-guide_tcm1053-318393.pdf
3. https://bhddh.ri.gov/sites/g/files/xkgbur411/files/documents/HCBS-Final-Rule---Guide-and-FAQ-Part-1-Jan2019.pdf
4. https://dss.sd.gov/docs/medicaid/hcbs/01.25.17_PowerPoint.pdf
5. https://www.medicaid.gov/Medicaid-CHIP-Program-Information/By-Topics/Long-Term-Services-and-Supports/Home-and-Community-Based-Services/Downloads/Exploratory-questions-re-settings-characteristics.pdf
6. https://www.medicaid.gov/medicaid-chip-program-information/by-topics/long-term-services-and-supports/home-and-community-based-services/downloads/exploratory-questions-non-residential.pdf

Checklist: Physical Accessibility

Policy, Procedures and Operational Guidelines: [Name of Agency]

1. Ensure that P&P Manual contains the specific requirement that the setting is fully accessible and compliant with the Americans with Disabilities Act.
2. Ensure the P&P Manual describes the expectation that providers ensure a person's physical environment meets his or her needs.
3. Ensure the P&P Manual describes the expectation that, as needed, the provider installs grab bars, ramps, adapted furniture, etc., to ensure access to desired areas and household items.
4. Ensure the P&P Manual describes the expectation that people are notified that they may request a reasonable accommodation, and that the provider explains how to make such a request.
5. Ensure that P&P Manual describes the specific procedure to obtain due process if a modification is required, in keeping with the description in the *Checklist for Person- Centered Plan Documentation of Modifications to HCBS Requirements.*
6. Ensure that P&P Manual requires provider staff are trained with regard to the setting being physical accessible to the individual, including the right of the individual to move about the setting and not be confined to any one defined area.

✓ Does the Manual contain the expectation for each policy?
✓ Does the Manual describe the provider's specific procedures for ensuring each policy is implemented?

Check to confirm policy is complete	Yes	No
1. Contains		
2. Describes		
3. Describes		
4. Describes		
5. Describes		
6. Requires		

Ensure that provider staff have been trained to competency for this requirement.

1. Is there training curriculum available for review?
2. Does the training material accurately reflect the requirement and what it should look like in practice?
3. Do the training rosters show that all staff have been trained in this requirement?

Name of Training:
Name of Trainer:
Date of Training:
Training Roster Available:

Provider Confirmation				
Name of Policy				
Policy Page and/or Number				
Date Policy Completed/Approved				
Approved By				

Setting Observations: [Address of Setting]	Individual Name(s)	Date
Observe to ensure that all exits and entrances are accessible to all individuals and that they are able to move freely throughout the common living areas.		
If there is an approved provider- restriction, there is a plan in process to remove it that is consistent with the person-centered plan and due process policy.		
Interviews of People in Setting	**Individual Name(s)**	**Date**
Interview individuals to ensure they are able to move freely in and out of the home and throughout their living unit and the home's common areas, without barriers. Examples of questions to ask: ✓ Are you able to move around your home and access different rooms, like the kitchen and laundry room, as you like? ✓ If you use a wheelchair for mobility, are all the doorways to common areas wide enough to allow you to move back and forth freely? ✓ Are you able to use outdoor spaces, like patios and porches? ✓ Are there are grab bars, ramps, or other furniture that help you move around the residence? ✓ If there is an approved modification, there is a plan in process to remove it that is consistent with the person- centered plan and due process policy.		
Interview individuals to ensure they are aware of their ability to request reasonable accommodations. Ask: ✓ Do you know how to ask if you need something that will make it easier help to move around your home or day program?		
Ensure that staff can describe an individual's ability to physically access the space. ✓ If any individual has an approved modification consistent with the due process policy, ensure staff know about the restriction and the plan to remove it, and can describe their roles and responsibilities in implementing that plan.		
Notes:		

HCBS Requirement:

Person-centered Plan Documentation of Modifications to HCBS Requirements Modifications to any of the requirements must be supported by specific assessed need, justified in the person-centered plan and documented in the person-centered plan.

42 C.F.R. § 441.301(c)(4)(vi)(F)

What This Looks Like in Practice

- Everyone, including people who receive waiver services, has the right to make choices, even when those choices might result in poor outcomes. Providers and Support Coordinators maximize an individual's ability to make choices while working to minimize the risk to the person or others.
- Any modification of the rights specified in the HCBS rule is supported by a specific assessed need that clearly and adequately explains why the modification is needed.
- Any modification of the rights specified in the HCBS rule is documented in the person-centered plan, including all of the following:
    - ✓ Positive interventions and supports used prior to any modifications to the service delivery plan
    - ✓ Less intrusive methods of meeting the need that have been tried but did not work
    - ✓ Regular collection and review of data to measure the ongoing effectiveness of the modification
    - ✓ Established time limits for periodic reviews to determine if the modification is still necessary or can be terminated
    - ✓ An assurance that interventions and supports will cause no harm to the person
    - ✓ Informed consent. The person's informed consent is obtained prior to a necessary modification, and the setting does not implement a modification without such consent.
- The setting ensures all modifications are implemented in the least restrictive manner necessary to protect the person and provides support to reduce or eliminate the need for the modification in the most integrated setting and inclusive manner.
- Modifications are reviewed regularly and reduced or ended as soon as possible.
- The provider has and follows clear policies and procedures that outline how and when to pursue approval for a modification.
- The provider maintains an open line of communication with the person about modifications (and guardian, when applicable.)

ADMH-DDD Guidance and Tools:

HCBS Modifications Training for ID Waiver
HCBS Rights Modification Addendum ID Waiver Residential Service Recipients
ID Waiver HCBS Modification Decision - Making Tree
Medicaid HCBS Settings Rule-HCBS Modifications - Training for ID Waiver Support Coordinators & Providers
Provider Operational Guidelines Manual (02/03/22)

Source Documents/Other Tips, Tools and Ideas

1. https://www.maine.gov/dhhs/sites/maine.gov.dhhs/files/inline-files/Maine-HCBS-Provider-Manual-2021_0.docx
2. https://mn.gov/dhs/assets/102517-hcbs-best-practices-guide_tcm1053-318393.pdf
3. https://bhddh.ri.gov/sites/g/files/xkgbur411/files/documents/HCBS-Final-Rule---Guide-and-FAQ-Part-1-Jan2019.pdf

4. https://dss.sd.gov/docs/medicaid/hcbs/01.25.17_PowerPoint.pdf
5. https://www.medicaid.gov/Medicaid-CHIP-Program-Information/By-Topics/Long-Term-Services-and-Supports/Home-and-Community-Based-Services/Downloads/Exploratory-questions-re-settings-characteristics.pdf
6. https://www.medicaid.gov/medicaid-chip-program-information/by-topics/long-term-services-and-supports/home-and-community-based-services/downloads/exploratory-questions-non-residential.pdf
7. https://www.dmas.virginia.gov/media/1227/modification-of-rights.pdf
8. https://www.dmas.virginia.gov/media/4812/hcbs-modifications-explained.pdf

Checklist: Person-centered Plan Documentation of Modifications to HCBS Requirements

Policy, Procedures and Operational Guidelines: [Name of Agency]

1. Ensure that P&P Manual contains the specific requirement that any modification of the rights specified in the HCBS rule must be supported by a specific assessed need and documented in the person-centered plan.
2. Ensure the P&P Manual describes the expectation that providers ensure all modifications are implemented in the least restrictive manner necessary to protect the person and provide support to reduce or eliminate the need for the modification in the most integrated setting and inclusive manner.
3. Ensure that the P&P Manual or other operational guidelines include a procedure for documenting modification, including:
    a. Positive interventions and supports used prior to any modifications to the service delivery plan
    b. Less intrusive methods of meeting the need that have been tried but did not work
    c. Regular collection and review of data to measure the ongoing effectiveness of the modification
    d. Established time limits for periodic reviews to determine if the modification is still necessary or can be terminated
    e. An assurance that interventions and supports will cause no harm to the person
    f. Informed consent
4. Ensure that P&P Manual describes the specific procedure to obtain due process if a modification is required, in keeping with the description in the *Checklist for Person- Centered Plan Documentation of Modifications to HCBS Requirements.*
5. Ensure that P&P Manual requires provider staff are trained with regard to individuals' ability to have visitors of their choosing at any time.

- ✓ Does the Manual contain the expectation for each policy?
- ✓ Does the Manual describe the provider's specific procedures for ensuring each policy is implemented?

Check to confirm policy is complete	Yes	No
1. Contains		
2. Describes		
3. Includes		
4. Describes		
5. Requires		

Ensure that provider staff have been trained to competency for this requirement.

1. Is there training curriculum available for review?
2. Does the training material accurately reflect the requirement and what it should look like in practice?
3. Do the training rosters show that all staff have been trained in this requirement?

Name of Training:
Name of Trainer:
Date of Training:
Training Roster Available:

Provider Confirmation				
Name of Policy				
Policy Page and/or Number				
Date Policy Completed/Approved				
Approved By				

Setting Observations: [Address of Setting]	Individual Name(s)	Date
Observe to ensure that, if there are any approved modifications for any individuals in a setting, there is a corresponding plan in place to remove it that is consistent with the person-centered plan and due process policy described above. ✓ Review the person-centered plan. ✓ Review the HRC approval minutes for the approved plan to remove the modification. ✓ Review documentation to show that the setting keeps data and completes periodic reviews, as defined in the approved plan, to determine if a modification might be reduced or removed. Ensure that the determination is data-based and the rationale is clearly documented		
Interviews of People in Setting	**Individual Name(s)**	**Date**
Interview individuals with modifications, and guardians as applicable, to ensure they provided consent. Ask: ✓ If you are not allowed to (specify the modification), did staff tell you why and did you agree to it?		
Interview staff to ensure that, If any individual has an approved modification consistent with the due process policy, they know about it and the plan to remove it, and can describe their roles and responsibilities in implementing that plan.		
Notes:		

HCBS Requirement:

Optimizes, but does not regiment, individual initiative, autonomy, and independence in making life choices, including but not limited to, daily activities, physical environment, and with whom to interact.

42 C.F.R. § 441.301(c)(4)(iv)

What This Looks Like in Practice

- Support activities are flexible and work around the person's preferred schedule
- The provider supports individuals in life-informed "real" choices and autonomy
- The provider offers individuals actual experiences on which they can base future choices
- The provider creates plans for the appropriate balance between autonomy and safety
- Individuals have the right to refuse to participate in activities the rest of the individuals in the setting want to experience.
- Individuals do not have to follow one "set schedule" for all living in the setting
- Individuals are supported in planning their day-to-day activities and schedules (i.e., when to wake up, eat and go to bed)
- Providers are flexible when planning meetings and other activities so individuals can coordinate their schedules
- Individuals can ask for assistance if they would like to schedule appointments for services in the community or arrange for transportation
- The provider creates an activity calendar each week so individuals can make decisions about activities in which they would like to participate
- Individuals can help develop the week's grocery list for the week or activity options
- Individuals are encouraged to share ideas and make choices about setting activities based on their own personal preferences and interests

ADMH-DDD Guidance and Tools:

Provider Operational Guidelines Manual (02/03/22)

Source Documents/Other Tips, Tools, and Ideas

1. https://www.maine.gov/dhhs/sites/maine.gov.dhhs/files/inline-files/Maine-HCBS-Provider-Manual-2021_0.docx
2. https://mn.gov/dhs/assets/102517-hcbs-best-practices-guide_tcm1053-318393.pdf
3. https://bhddh.ri.gov/sites/g/files/xkgbur411/files/documents/HCBS-Final-Rule---Guide-and-FAQ- Part-1-Jan2019.pdf
4. https://dss.sd.gov/docs/medicaid/hcbs/01.25.17_PowerPoint.pdf
5. https://www.medicaid.gov/Medicaid-CHIP-Program-Information/By-Topics/Long-Term-Services- and-Supports/Home-and-Community-Based-Services/Downloads/Exploratory-questions-re-settings-characteristics.pdf
6. https://www.medicaid.gov/medicaid-chip-program-information/by-topics/long-term-services-and- supports/home-and-community-based-services/downloads/exploratory-questions-non- residential.pdf

Checklist: Optimizes, but does not regiment, individual initiative, autonomy, and independence in making life choices, including but not limited to, daily activities, physical environment, and with whom to interact.

Policy, Procedures and Operational Guidelines: [Name of Agency]

1. Ensure that P&P Manual contains the specific requirement that the setting optimizes, but does not regiment, individual initiative, autonomy, and independence in making life choices, including but not limited to, daily activities, physical environment, and with whom to interact.
2. Ensure the P&P Manual describes the expectation that individuals are able to exercise individual initiative, autonomy and independence consistent with their personal choices.
3. Ensure that the P&P Manual or other operational guidelines include a procedure for documenting individuals independence in making life choices
4. Ensure that P&P Manual describes the specific procedure to obtain due process if a modification is required, in keeping with the description in the *Checklist for Person- Centered Plan Documentation of Modifications to HCBS Requirements.*
5. Ensure that P&P Manual requires provider staff are trained with regard to individuals' ability to have individual initiative, autonomy, and independence in making life choices, including but not limited to, daily activities, physical environment, and with whom to interact.

- ✓ Does the Manual contain the expectation for each policy?
- ✓ Does the Manual describe the provider's specific procedures for ensuring each policy is implemented?

Check to confirm policy is complete	Yes	No
1. Contains		
2. Describes		
3. Includes		
4. Describes		
5. Requires		

Ensure that provider staff have been trained to competency for this requirement.

1. Is there training curriculum available for review?
2. Does the training material accurately reflect the requirement and what it should look like in practice?
3. Do the training rosters show that all staff have been trained in this requirement?

Name of Training:
Name of Trainer:
Date of Training:
Training Roster Available:

Provider Confirmation				
Name of Policy				
Policy Page and/or Number				
Date Policy Completed/Approved				
Approved By				

Setting Observations: [Address of Setting]	Individual Name(s)	Date
Observe to ensure that, the setting optimizes, but does not regiment, individual initiative, autonomy, and independence in making life choices, including but not limited to, daily activities, physical environment, and with whom to interact. ✓ Individuals can help develop the week's grocery list for the week or activity options. ✓ The provider creates an activity calendar each week so individuals can make decisions about activities in which they would like to participate ✓ Individuals do not have to follow one "set schedule" for all living in the setting		
Interviews of People in Setting	**Individual Name(s)**	**Date**
Interview individuals to ensure they have individual initiative, autonomy, and independence in making life choices Ask: ✓ Can you to pick who you spend time with? ✓ Can you decide when to wake up or go to bed? ✓ Can you go on outings when you want to?		
Interview staff to ensure that they recognize an individual's right to making life choices, including but not limited to, daily activities, physical environment, and with whom to interact.		
Notes:		

HCBS Requirement:

42 C.F.R. § 441.301(c)(4)(ii):

The setting is selected by the individual from among setting options including non-disability specific settings. The setting options are identified and documented in the person-centered plan and are based on the individual's needs and preferences.

What This Looks Like in Practice

- Individuals know how to make a request for a new setting and/or changes to current services and supports
- Individuals and their support team have opportunities for feedback and input regarding settings, services and service providers
- The case manager/care coordinator provides individuals with information about identifying, choosing and changing settings in a manner or format they can understand
- Individuals are encouraged to ask questions about their setting options
- Individuals are able to visit or view a setting as part of their informed decision-making process; and
- If an individual wants to change their setting choice(s), their case manager/care coordinator supports them in that process.

ADMH-DDD Guidance and Tools:

HCBS Modifications Training for ID Waiver
HCBS Rights Modification Addendum ID Waiver Residential Service Recipients ID Waiver
HCBS Modification Decision - Making Tree
Medicaid HCBS Settings Rule-HCBS Modifications - Training for ID Waiver Support Coordinators & Providers
Provider Operational Guidelines Manual (02/03/22)

Source Documents/Other Tips, Tools and Ideas

1. https://www.maine.gov/dhhs/sites/maine.gov.dhhs/files/inline-files/Maine-HCBS-Provider-Manual-2021_0.docx
2. https://mn.gov/dhs/assets/102517-hcbs-best-practices-guide_tcm1053-318393.pdf
3. https://bhddh.ri.gov/sites/g/files/xkgbur411/files/documents/HCBS-Final-Rule---Guide-and-FAQ- Part-1-Jan2019.pdf
4. https://dss.sd.gov/docs/medicaid/hcbs/01.25.17_PowerPoint.pdf
5. https://www.medicaid.gov/Medicaid-CHIP-Program-Information/By-Topics/Long-Term-Services- and-Supports/Home-and-Community-Based-Services/Downloads/Exploratory-questions-re-settings-characteristics.pdf
6. https://www.medicaid.gov/medicaid-chip-program-information/by-topics/long-term-services-and- supports/home-and-community-based-services/downloads/exploratory-questions-non- residential.pdf
7. https://www.dmas.virginia.gov/media/1227/modification-of-rights.pdf
8. https://www.dmas.virginia.gov/media/4812/hcbs-modifications-explained.pdf

Checklist: The setting is selected by the individual from among setting options including non-disability specific settings. The setting options are identified and documented in the person-centered plan and are based on the individual's needs and preferences.

Policy, Procedures and Operational Guidelines: [Name of Agency]

1. Ensure that P&P Manual contains the specific requirement that the setting is selected by the individual from among setting options including non-disability specific settings. The setting options are identified and documented in the person-centered plan and are based on the individual's needs and preferences.
2. Ensure the P&P Manual describes the expectation that providers ensure that individuals are given choices of non-disability specific settings
3. Ensure that the P&P Manual or other operational guidelines include a procedure for documenting that a choice of a non-disability specific setting was provided
4. Ensure that P&P Manual describes the specific procedure to obtain due process if a modification is required, in keeping with the description in the *Checklist for Person- Centered Plan Documentation of Modifications to HCBS Requirements.*
5. Ensure that P&P Manual requires provider staff are trained with regard to individuals choice of setting options including non-disability specific settings.

- ✓ Does the Manual contain the expectation for each policy?
- ✓ Does the Manual describe the provider's specific procedures for ensuring each policy is implemented?

Check to confirm policy is complete	Yes	No
1. Contains		
2. Describes		
3. Includes		
4. Describes		
5. Requires		

Ensure that provider staff have been trained to competency for this requirement.

1. Is there training curriculum available for review?
2. Does the training material accurately reflect the requirement and what it should look like in practice?
3. Do the training rosters show that all staff have been trained in this requirement?

Name of Training:
Name of Trainer:
Date of Training:
Training Roster Available:

Provider Confirmation				
Name of Policy				
Policy Page and/or Number				
Date Policy Completed/Approved				
Approved By				

Setting Observations: [Address of Setting]	Individual Name(s)	Date
Observe to ensure that, the setting is selected by the individual from among setting options including non-disability specific settings. The setting options are identified and documented in the person-centered plan and are based on the individual's needs and preferences ✓ Review the person-centered plan. ✓ Review documentation to show that the support coordinator provides individuals with information about identifying, choosing and changing settings in a manner or format they can understand		
Interviews of People in Setting	**Individual Name(s)**	**Date**
Interview individuals, and guardians as applicable, to ensure they are given a choice of settings and services to include non-disability specific settings. Ask: ✓ Do you know how to make a request for a new setting and/or changes to current services and supports? ✓ Do you know your support coordinators name?		
Interview staff to ensure that, they are aware that the individual can select a setting from among setting options including non-disability specific settings and are based on the individual's needs and preferences.		
Notes:		

HCBS Requirement:

Facilitates individual choice regarding services and supports, and who provides them.

42 C.F.R. § 441.301(c)(4)(v)

What This Looks Like in Practice

- Individuals are free to choose who provides the services they receive and where they receive those services
- Individuals are not coerced or forced to obtain services in a particular setting. They may instead choose to go out into the community for the same services
- If an individual's identified needs allow for them to receive services one-on-one with a provider, that choice should always be available and not modified to suit the provider's need.

ADMH-DDD Guidance and Tools:

HCBS Modifications Training for ID Waiver
HCBS Rights Modification Addendum ID Waiver Residential Service Recipients ID Waiver HCBS
Modification Decision - Making Tree
Medicaid HCBS Settings Rule-HCBS Modifications - Training for ID Waiver Support Coordinators & Providers
Provider Operational Guidelines Manual (02/03/22)

Source Documents/Other Tips, Tools and Ideas

1. https://www.maine.gov/dhhs/sites/maine.gov.dhhs/files/inline-files/Maine-HCBS-Provider-Manual- 2021_0.docx
2. https://mn.gov/dhs/assets/102517-hcbs-best-practices-guide_tcm1053-318393.pdf
3. https://bhddh.ri.gov/sites/g/files/xkgbur411/files/documents/HCBS-Final-Rule---Guide-and-FAQ- Part-1-Jan2019.pdf
4. https://dss.sd.gov/docs/medicaid/hcbs/01.25.17_PowerPoint.pdf
5. https://www.medicaid.gov/Medicaid-CHIP-Program-Information/By-Topics/Long-Term-Services- and-Supports/Home-and-Community-Based-Services/Downloads/Exploratory-questions-re-settings- characteristics.pdf
6. https://www.medicaid.gov/medicaid-chip-program-information/by-topics/long-term-services-and- supports/home-and-community-based-services/downloads/exploratory-questions-non- residential.pdf

Checklist: Facilitates individual choice regarding services and supports, and who provides them.

Policy, Procedures and Operational Guidelines: [Name of Agency]

1. Ensure that P&P Manual contains the specific requirement that the agency facilitates individual choice regarding services and supports, and who provides them.
2. Ensure the P&P Manual describes the expectation that providers ensure individual choice regarding services and supports, and who provides them.
3. Ensure that the P&P Manual or other operational guidelines include a procedure for documenting individual choice regarding services and supports, and who provides them.
4. Ensure that P&P Manual describes the specific procedure to obtain due process if a modification is required, in keeping with the description in the *Checklist for Person- Centered Plan Documentation of Modifications to HCBS Requirements.*
5. Ensure that P&P Manual requires provider staff are trained with regard to ensuring individual choice regarding services and supports, and who provides them.

- ✓ Does the Manual contain the expectation for each policy?
- ✓ Does the Manual describe the provider's specific procedures for ensuring each policy is implemented?

Check to confirm policy is complete	Yes	No
1. Contains		
2. Describes		
3. Includes		
4. Describes		
5. Requires		

Ensure that provider staff have been trained to competency for this requirement.

1. Is there training curriculum available for review?
2. Does the training material accurately reflect the requirement and what it should look like in practice?
3. Do the training rosters show that all staff have been trained in this requirement?

Name of Training:
Name of Trainer:
Date of Training:
Training Roster Available:

Provider Confirmation				
Name of Policy				
Policy Page and/or Number				
Date Policy Completed/Approved				
Approved By				

Setting Observations: [Address of Setting]	Individual Name(s)	Date
Observe to ensure that, individual choice regarding services and supports, and who provides them is offered by the setting. ✓ Review the person-centered plan. ✓ Review documentation to show that the support coordinator provides individuals with information about identifying, choosing, and changing settings in a manner or format they can understand		
Interviews of People in Setting	**Individual Name(s)**	**Date**
Interview individuals, and guardians as applicable, to ensure they provided consent. Ask: ✓ Do you know how to make a request for a new setting and/or changes to current services and supports? ✓ Do you know your support coordinators name?		
Interview staff to ensure that, they are aware that the individual can select services and supports, and who provides them based on the individual's needs and preferences.		
Notes:		

HCBS Requirement:

The setting is integrated in and supports full access of individuals receiving Medicaid HCBS to the greater community, including opportunities to seek employment and work in competitive integrated settings, engage in community life, control personal resources, and receive services in the community, to the same degree of access as individuals no receiving Medicaid HCBS.

42 C.F.R. § 441.301(c)(4)(i)

What This Looks Like in Practice:

- An individual's needs, desires, and choice to work is identified and the individual is able to make decisions through an informed choice process, which includes having actual community experiences on which to base decisions
- Individuals have opportunities to explore, seek and experience employment, including work in a competitive integrated setting if desired
- The Residential Provider assists with attending employment related meetings, reporting wages to SSA, getting ready for work before a shift, asking for time-off as required by the employer, etc.
- Ensure individuals have opportunities and supports they need to be fully included in their community, individually and in small groups, as desired.
- Identify, develop, and make available information on transportation options for community access.
- Assist individuals with developing meaningful relationships with other members of the community.
- Ensure individuals have services, resources, and supports to help them explore or maintain meaningful activities.

ADMH-DDD Guidance and Tools:

HCBS Modifications Training for ID Waiver
HCBS Rights Modification Addendum ID Waiver Residential Service Recipients ID Waiver HCBS Modification Decision - Making Tree
Medicaid HCBS Settings Rule-HCBS Modifications - Training for ID Waiver Support Coordinators & Providers
Provider Operational Guidelines Manual (02/03/22)

Source Documents/Other Tips, Tools and Ideas

7. https://www.maine.gov/dhhs/sites/maine.gov.dhhs/files/inline-files/Maine-HCBS-Provider-Manual- 2021_0.docx
8. https://mn.gov/dhs/assets/102517-hcbs-best-practices-guide_tcm1053-318393.pdf
9. https://bhddh.ri.gov/sites/g/files/xkgbur411/files/documents/HCBS-Final-Rule---Guide-and-FAQ- Part-1-Jan2019.pdf
10. https://dss.sd.gov/docs/medicaid/hcbs/01.25.17_PowerPoint.pdf
11. https://www.medicaid.gov/Medicaid-CHIP-Program-Information/By-Topics/Long-Term-Services- and-Supports/Home-and-Community-Based-Services/Downloads/Exploratory-questions-re-settings- characteristics.pdf
12. https://www.medicaid.gov/medicaid-chip-program-information/by-topics/long-term-services-and- supports/home-and-community-based-services/downloads/exploratory-questions-non- residential.pdf

Checklist: The setting is integrated in and supports full access of individuals receiving Medicaid HCBS to the greater community, including opportunities to seek employment and work in competitive integrated settings, engage in community life, control personal resources, and receive services in the community, to the same degree of access as individuals not receiving Medicaid HCBS.

Policy, Procedures and Operational Guidelines: [Name of Agency]

1. Ensure that P&P Manual contains the specific requirement that the agency facilitates integration and supports full access of individuals to the greater community, including opportunities to see employment and work in competitive integrated settings, engage in community life, to the same degree of access as individuals not receiving Medicaid HCBS
2. Ensure the P&P Manual describes the expectation that providers ensure individual integration and supports full access to the greater community, including opportunities to see employment and work in competitive integrated settings, and engage in community life,
3. Ensure that the P&P Manual or other operational guidelines include a procedure for documenting individual integration and supports full access to the greater community, including opportunities to see employment and work in competitive integrated settings, and engage in community life,
4. Ensure that P&P Manual describes the specific procedure to obtain due process if a modification is required, in keeping with the description in the *Checklist for Person- Centered Plan Documentation of Modifications to HCBS Requirements.*
5. Ensure that P&P Manual requires provider staff are trained with regard to ensuring individual integration and supports full access to the greater community, including opportunities to see employment and work in competitive integrated settings, and engage in community life,

- ✓ Does the Manual contain the expectation for each policy?
- ✓ Does the Manual describe the provider's specific procedures for ensuring each policy is implemented?

Check to confirm policy is complete	Yes	No
1. Contains		
2. Describes		
3. Includes		
4. Describes		
5. Requires		

Ensure that provider staff have been trained to competency for this requirement.

1. Is there training curriculum available for review?
2. Does the training material accurately reflect the requirement and what it should look like in practice?
3. Do the training rosters show that all staff have been trained in this requirement?

Name of Training:
Name of Trainer:
Date of Training:
Training Roster Available:

Provider Confirmation				
Name of Policy				
Policy Page and/or Number				
Date Policy Completed/Approved				
Approved By				

Setting Observations: [Address of Setting]	Individual Name(s)	Date
Observe to ensure that, individual choice regarding services and supports, and who provides them is offered by the setting. ✓ Review the person-centered plan. ✓ Review documentation to show that the that the agency facilitates integration and supports full access of individuals to the greater community, including opportunities to see employment and work in competitive integrated settings, engage in community life, to the same degree of access as individuals not receiving Medicaid HCBS. • The individual can contact a natural support for transportation. • Information about bus schedules or phone numbers for taxi services is posted • The individual is assisted in using community transportation • Assisting the individual to access Benefit Counseling Services. • Assisting the individual to report wages to the Social Security Administration. • Assisting the individual to have and access employment and add transportation information into the individual's phone (if the individual has a cell phone)		
Interviews of People in Setting	**Individual Name(s)**	**Date**
Interview individuals, and guardians as applicable, to ensure they provided consent. Ask: ✓ Do you have a job? ✓ How do you get to your job? ✓ Would you like to have a job? ✓ Do you know how to make a request for looking for a job? ✓ How do you go places to do the things that you want to do? ✓ Do you know who to ask if you want to go somewhere?		
Interview staff to ensure that, they are aware that individuals, receiving HCBS Services are integrated into and have full access to the greater community, including opportunities to seek employment and work in competitive integrated settings, engage in community life, to the same degree of access as individuals not receiving Medicaid HCBS.		
Notes:		