

Request for Review and Approval of Policy or Procedure

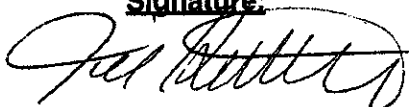





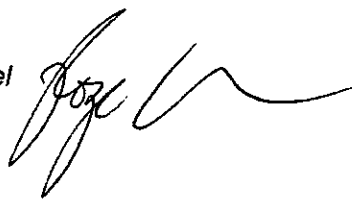

Title of Document: Heightened Scrutiny Evidence Package and Process ADM

Description: To Implement Heightened Scrutiny Evidence Collection and Analysis pursuant to HCBS requirements

Date of Request: February 22, 2017

Date of Proposed Issuance: March 1, 2017

Required Signoff:

	<u>Signature:</u>	<u>Date:</u>
Jill Pettinger <i>Deputy Commissioner</i> <i>Division of Service</i> <i>Delivery-State Operations</i>		2/22/2017
Joann Lamphere <i>Deputy Commissioner</i> <i>Division of Person-Centered Supports</i>		2-23-2017
Tamika Black <i>Deputy Commissioner</i> <i>Division of Quality Improvement</i>		2-24-17
Sharon Devine <i>Deputy Commissioner</i> <i>Division of Administration</i>		2/22/2017
Megan O'Connor <i>Deputy Commissioner</i> <i>Division of Service</i> <i>Delivery-State</i>		2/24/17
Kevin Valenchis <i>Deputy Commissioner</i> <i>Division of Enterprise Solutions</i>		2/22/17
Roger Bearden <i>Deputy Commissioner & General Counsel</i> <i>Counsel's Office</i>		2/27/17
Kerry A. Delaney <i>Acting Commissioner</i>		
Helene DeSanto <i>Acting Executive Deputy Commissioner</i>		


APPROVED
By canabujm at 9:00 am, Mar 07, 2017



Appendix A

MEMORANDUM

To: Provider Associations
Voluntary Provider Agency Executive Directors
DDSOO Directors
DDRO Directors
OPWDD Regulations E-Mailing List
Quality Improvement E-Mailing List


From: Megan O'Connor-Hebert, Deputy Commissioner, 
Division of Quality Improvement

JoAnn Lamphere, Deputy Commissioner,
Division of Person Centered Supports



Helene DeSanto, Deputy Commissioner,
Division of Service Delivery



Date: Roger Bearden, Deputy Commissioner and General Counsel 
October 13, 2015

Subject: **Communication to Providers on the Home and Community Based Settings (HCBS) Heightened Scrutiny Process and Requirements for certified settings where waiver services are delivered:**

- (a) Certified Individualized Residential Alternatives (IRA) and Community Residences (CR); and,
- (b) Day Habilitation.
- (c) Also applicable to Intermediate Care Facilities (ICFs) that convert to IRAs on/after March 17, 2014.

Suggested Distribution:

Executive Level Staff
Management Staff
Quality Assurance Staff

Purpose

The purpose of this communication is to inform providers about how OPWDD intends to proceed with its heightened scrutiny review for certified Individualized Residential Alternatives (IRAs), Community Residences (CRs), and Day Habilitation and the actions that providers must comply with for the review process. This communication also includes the following:

- A. Criteria for designating a setting as subject to “heightened scrutiny” in OPWDD’s service system (**Attachment A**);
- B. OPWDD’s process and timeline for determining whether a setting is subject to heightened scrutiny (**Attachment B**); and,
- C. The actions that OPWDD and providers must take when a setting is subject to heightened scrutiny (**Attachments B and C**).

Please note that sheltered workshops (i.e. certified Day Training) in their current iteration do not meet HCBS setting standards and will no longer be deemed approved waiver settings after the conclusion of the HCBS transition period.

This communication is based upon guidance to date from CMS and is subject to change, if necessary, in order to achieve compliance with the HCBS settings rules and CMS requirements.

Background:

The Centers for Medicare and Medicaid Services (CMS) is seeking to ensure that individuals receiving services through HCBS Medicaid waiver programs have full access to the greater community in which they live. On March 17, 2014, CMS issued final regulations regarding characteristics and requirements for settings in order to be considered “home and community based” for purposes of Medicaid (42 CFR 441.301, *et. seq*). The federal regulations can be found at the following link: <https://www.federalregister.gov/articles/2014/01/16/2014-00487/medicaid-program-state-plan-home-and-community-based-services-5-year-period-for-waivers-provider>.

On October 20, 2014, OPWDD issued Administrative Memorandum (ADM) #2014-04, “HCBS Preliminary Transition Plan Implementation”, applicable to OPWDD certified residential settings, which can be found on OPWDD’s website at: <http://www.opwdd.ny.gov/node/5760>. This ADM describes the quality principles and standards that were assessed for a sample of certified residential settings during the prior survey cycle (i.e. October 2014 through

September 2015). In accordance with OPWDD's Transition Plan, OPWDD intends to enforce compliance with the HCBS settings standards for existing non-compliant waiver settings beginning October 1, 2018, for both residential and non-residential settings and there is much to be accomplished before that time.

To be considered a HCBS setting, it must neither be institutional in nature nor isolate individuals from the broader community. It must be a home, or work place, that is well-integrated in the community. Federal regulations and guidance help to identify settings that are *presumed to be institutional or isolating and therefore, do not meet the requirements of HCBS Settings*. Settings that are presumed to be institutional or isolating are subject to "heightened scrutiny".

States may only include settings that are presumed to be institutional or isolating in nature in their HCBS program with the approval of CMS. CMS requires these presumed institutional settings to undergo "heightened scrutiny" to verify that they, in fact, do not isolate individuals from the broader community, are not institutional in nature, and meet HCBS settings standards. The state must first determine whether the site does meet and/or can meet the HCBS requirements; the state will then submit the basis for its determination (the "evidence package") to CMS. The following will assist the state with making its determination:

- **Attachment A** includes the criteria for designating a setting subject to heightened scrutiny in OPWDD's system;
- **Attachment B** includes the actions required of providers when a setting is subject to heightened scrutiny and the anticipated timeline; and,
- **Attachment C** includes preliminary information on the evidence package that providers operating heightened scrutiny settings will need to prepare.

In addition, the state must undergo a public input process for all residential and non-residential settings that are subject to heightened scrutiny. In accordance with CMS requirements¹, this public input process must:

- List the affected settings by name and location and identify the number of people served in each setting;
- Be widely disseminated with the intent of reaching HCBS participants, families and the community;
- Include any and all justifications from the state as to how the setting meets HCBS rules and is not institutional such as any reviewer reports, interview summaries, and other evidence;
- Provide sufficient detail such that the public has an opportunity to support or rebut the state's determination; and,

¹ see CMS HCBS Settings Questions and Answers dated June 26, 2015

- Provide responses to CMS from the public comments including explanations as to why the state is or is not changing its decision.

Once the public input process for heightened scrutiny is concluded, OPWDD must send evidence that each of the heightened scrutiny settings meets/will meet HCBS settings standards (if applicable) to CMS. According to its June 26, 2015 requirements document, CMS will review the information or documentation to ensure that all participants in the setting are afforded the degree of community integration required by the regulation and desired by the individual. The evidence must be sufficient to overcome the presumption that the site is institutional or isolating. If the setting withstands this "heightened scrutiny", it will be deemed home and community-based.

Timeframe and Actions Required:

During the October 2015 to September 2016 survey cycle, OPWDD will review certified IRAs, CRs, Day Habilitation and Day Training (except sheltered workshops subject to conversion or closure) to determine which settings will be subject to heightened scrutiny. For residential settings deemed subject to heightened scrutiny, OPWDD will also review HCBS settings standards to obtain baseline information that is necessary in order to track progress toward full HCBS settings compliance.

The product of this review process (10/2015 - 9/2016), will be a complete inventory of settings subject to heightened scrutiny and for residential settings, their current level of HCBS settings compliance. During the period October 2016 to February 2017, OPWDD will review all heightened scrutiny settings (including day settings) to determine the amount of progress made toward full HCBS compliance. OPWDD will also collect, review and verify evidence of compliance compiled and/or submitted by providers (see Attachment C) for heightened scrutiny settings. These evidence packages, including the site review documentation, will be made available for public comment, and submitted later to CMS.

Also effective 10/1/2016, the HCBS settings standards and person-centered planning and process standards will become routine elements of OPWDD's surveys with enforcement for non-compliance beginning October 1, 2018. Action will be taken by OPWDD, on a case-by-case basis, for any setting that OPWDD deems unlikely to comply with the HCBS settings standards prior to October 1, 2018.

Attachment A: Heightened Scrutiny Criteria²

A. Criteria for Determining Whether a Setting is Subject to the Heightened Scrutiny Process:

Any setting/site with one or more of the following characteristics will be subject to heightened scrutiny:

1. The setting/site is located in a building on the grounds of a public institution³;
2. The setting/site is located in a building that is also a publically or privately operated facility that provides inpatient institutional treatment⁴;
3. The setting/site is immediately adjacent to a public institution (i.e. the setting/site is next to and abuts the public institution);
4. The setting/site has been converted from an Intermediate Care Facility (ICF) on or after March 17, 2014;
5. The setting/site is part of a group of multiple settings co-located and operationally related such that the co-location and/or cluster serves to isolate and/or inhibit interaction with the broader community, including any of the following:
 - Setting/site is situated on a private campus where there are multiple group homes and/or facilities for people with intellectual and/or developmental disabilities (I/DD) on the same property (e.g., private campus, community, or village specifically for people with I/DD/disabilities; co-located sites such that people who participate do not leave the site/participate in the broader community and/or a large number of people with disabilities are congregated and this structure inhibits interaction with the broader community); and/or,
 - Other circumstances that meet the criteria (for multiple settings collocated and operationally related such that the co-location isolates people with disabilities and/or inhibits individuals from interacting with the broader community).
6. The setting/site's design, appearance and/or location appears to be institutional and/or isolating (includes one or more of the following criteria):
 - The setting/site is clustered (i.e. adjacent to, in close proximity to other settings/sites for people with disabilities) such that the cluster isolates people

² Source: <http://www.medicaid.gov/medicaid-chip-program-information/by-topics/long-term-services-and-supports/home-and-community-based-services/downloads/settings-that-isolate.pdf>

³ A public institution is an institution that is the responsibility of a governmental entity over which a governmental entity exercises control. OPWDD developmental centers, OMH psychiatric centers, institutions for mental diseases, prisons and addiction treatment centers and state run nursing homes are considered public institutions. A former developmental center (i.e. one that has been closed) is also considered a public institution. A public institution does not include: a medical institution (i.e. hospital including a VA hospital); child care institution; or publically-operated community residences, universities, libraries, and public schools.

⁴ Inpatient institutional treatment includes all settings listed under the definition of public institution as well as any private settings delivering inpatient treatment such as a private mental health facility delivering care.

with disabilities and/or inhibits individuals from interacting with the broader community;

- The setting is designed to provide people with disabilities multiple types of services and activities on the same site (e.g., housing, day services, medical, behavioral, therapeutic, and/or social and recreational activities); (i.e., people with disabilities have little to no interaction/experiences outside of the setting); resulting in limited autonomy and/or regimented services.
- People in the setting have limited if any interaction with the broader community (i.e. the setting is set up and operated in such a way that people with disabilities have limited to no interactions/experiences outside of the setting, regardless of the settings location); and/or,
- The setting/site under review appears to be more isolating than other settings in the same vicinity/neighborhood and/or CMS guidance has specifically mentioned the setting type as a setting presumed to isolate. For example:

- setting is a gated community;
- setting is a farmstead or disability specific farm community;
- setting is a residential school;
- setting has fencing, gates, or other structural items setting it apart from homes/settings in the vicinity;
- setting is labeled by signage as a setting for people with disabilities, thus not blending with the broader neighborhood/community;
- setting is close to a potentially undesirable location (e.g., dump, factory, across the street from a prison or other institutional setting, etc.) that is isolating and/or inhibits individuals from interacting with the broader community; and/or,
- setting has video camera surveillance.

Attachment B: OPWDD's Process for Determining if a Setting is Subject to the Heightened Scrutiny Process and the Timeline:

In late 2015/early 2016, OPWDD plans to provide agencies (through a separate communication) with a heightened scrutiny self-survey tool. Agencies will be asked to identify, to the best of their ability, which of their settings will be subject to heightened scrutiny. It is in the providers' interest to help OPWDD identify sites that may be subject to heightened scrutiny as soon as possible, so providers can have as much time as possible to prepare the evidence that will be necessary for submission to CMS. This provider self-survey will assist OPWDD with:

- Assessing the full scope of heightened scrutiny in the system;
- Developing its survey schedule for full review of heightened scrutiny settings; and,
- Collection and verification of evidence during the survey cycle beginning October 1, 2016.

OPWDD's Division of Quality Improvement (DQI) will inventory settings during routine site visits to determine whether a setting meets one of the criteria listed in Attachment A beginning 10/1/2015 through 9/30/2016. Residential settings triggering heightened scrutiny will also be reviewed for baseline HCBS settings compliance information if the setting wasn't previously reviewed for this information.

During the 10/1/2016 through 2/2017 period, all residential and non-residential settings deemed subject to heightened scrutiny will be reviewed to determine the status of HCBS compliance and evidence packages will be collected and/or verified. Survey results for this period will be included as evidence of HCBS compliance. If the provider is not in full compliance with HCBS settings standards at the time of this review, the provider will be required to submit a compliance work plan along with other documentation (see Attachment C for more detail) that describes steps the provider will take to fully comply with HCBS settings standards by October 1, 2018 and maintain compliance thereafter.

No formal deficiencies will be issued for HCBS settings standards until after October 1, 2018. Instead, DQI will provide quality recommendations to settings/providers through the routine Exit Conference process and on an Exit Conference Form regarding the results of the HCBS settings standards review.

Any ICFs that intend to convert to an IRA on or after January 1, 2016 must submit with their conversion proposal a HCBS Settings Compliance Work Plan (See Attachment C item 3) for review by OPWDD. Providers must receive OPWDD approval of this Work

Plan before the ICF can convert. In addition, ICFs that intend to convert to an IRA on or after January 1, 2016 may undergo the Heightened Scrutiny process at the time of conversion by submitting a heightened scrutiny evidence documentation package with the conversion proposal (See Attachment C for more detail). OPWDD approval of the evidence/documentation for Heightened Scrutiny is not required prior to conversion.

The following is a summary of the heightened scrutiny timeline and required action that applies to all residential and non-residential settings⁵ where waiver services are delivered.

TIMELINE IS LONGER IN EFFECT – SEE INFORMATIONAL LETTER FOR REVISED TIMELINE

Heightened Scrutiny Timeline	OPWDD Actions	Actions Required of Voluntary and state operated providers
Late 2015/early 2016	Distribute a provider self-survey; each agency will self-report potential heightened scrutiny settings including residential and day settings.	Complete provider self-survey within required timeframe.
October 1, 2015 through September 30, 2016	<p>OPWDD DQI completes routine on-site surveys of certified residential and non-residential settings and determines which ones are subject to heightened scrutiny.</p> <p>DQI reviews certified residential settings (IRAs and CRs) for baseline HCBS settings compliance for those settings that are deemed subject to the heightened scrutiny process.</p>	Continue to make progress towards full compliance with the HCBS settings rules and person-centered planning and process requirements
Spring/Summer 2016	Distribute specific information to provider agencies on developing evidence package.	Complete and submit information required for evidence package with copy remaining on site for verification by DQI.
October 1, 2016 through February 2017	<p>OPWDD DQI reviews HCBS settings compliance for all heightened scrutiny settings (residential and non-residential) and verifies provider self-survey/evidence information. Review information will be made public and becomes part of the evidence package</p> <p>Effective 10/1/16, HCBS settings standards become part of routine survey activity going forward for all settings where waiver services are delivered.</p>	Continue to make progress towards full compliance.
Summer/Fall 2017	OPWDD opens heightened scrutiny public input process	Continue to make progress towards full compliance.

⁵ Except Sheltered Work Shops as previously noted

Heightened Scrutiny Timeline	OPWDD Actions	Actions Required of Voluntary and state-operated providers
Winter 2017	OPWDD submits heightened scrutiny settings to CMS	Continue to make progress towards full compliance.
October 2018	OPWDD begins to enforce HCBS settings requirements	Full compliance required.

Attachment C: Required Evidence/Documentation for Settings Subject to Heightened Scrutiny:⁶

All settings that are determined to be subject to heightened scrutiny will be required to prepare, submit and maintain on-site information that verifies and validates that the heightened scrutiny setting does not isolate individuals from the broader community, is not institutional in nature, and meets/can meet HCBS settings standards no later than October 1, 2018 and will maintain compliance thereafter.

This information will become part of the evidence package that will be made public through the public input process and will be part of the submission to CMS.

The following describes the *preliminary* evidence/documentation that OPWDD expects to request from providers during the **Spring of 2016**. Further details will be provided as we implement the heightened scrutiny timeline.

1. HCBS Settings Evidence Narrative/Package (required for all heightened scrutiny settings)

The HCBS Settings Evidence Narrative/Package is a detailed written narrative/description describing the specific setting and its unique characteristics, activities, operational practices and other relevant “evidence” that indicates how the setting is or will be compliant with the HCBS Settings Standards by October 2018. It also describes how the setting overcomes the presumption that it is isolating and/or institutional in nature for all individuals residing therein.

OPWDD intends to develop a standardized questionnaire for providers to include in their evidence package. This document is based on CMS requirements issued June 26, 2015 and the CMS Exploratory Questions (see OPWDD website link at: http://www.opwdd.ny.gov/opwdd_services_supports/HCBS/hcbs-settings-toolkit) Providers are encouraged to include additional supporting evidence such as maps, pictures of the setting and/or other information that provides strong evidence that the setting is an HCBS setting.

⁶ Information in this attachment is derived from the CMS HCBS Settings Questions and Answers document dated June 26, 2015.

2. Evidence Package/Documentation that heightened scrutiny settings support full access to the broader community for all participants such as community inclusion (required for all heightened scrutiny residential and non-residential settings):

As indicated in ADM 2014-04, the Habilitation Planning process is person-centered, person-directed, and must reflect what is important to the individual. Accordingly, the Habilitation Plan (or alternative documentation that becomes part of the habilitation/service plan) reflects the personally meaningful community inclusion/integration activities, the timing and desired frequency/duration of these activities, and the supports needed for the person to fully participate.

Settings subject to Heightened Scrutiny are required to maintain documentation demonstrating that individuals have activities and opportunities for full access to the broader community that are meaningful to them in accordance with their individualized preferences and priorities.

OPWDD intends to develop a HIPAA compliant summary template where providers can capture the essential community inclusion information for each individual in a setting. This template is expected to include a summary of the elements outlined below. Providers must ensure that identifying details are maintained and secured on-site for purposes of validation of the template information by DQI or other auditors/reviewers.

- (1) **Community Inclusion Activities** expressed by the individual as meaningful to him/her. If the individual is unable to communicate verbally, the provider must have evidence of a leisure time preference assessment, which includes discussion with the individual's advocates and/or people that know him/her best.
- (2) **Community Inclusion Documentation** that shows when these community inclusion activities have occurred, their frequency, duration, number of individuals with I/DD that participated (as well as other community inclusion opportunities the person may have engaged in, such as going to the bank, shopping, etc.) and any other pertinent information such as the person's response to the activities; who accompanied and supported the person during the activities (e.g., natural support advocate; mother; sister; etc.). See page 5 of ADM #2014-04, "HCBS Preliminary Transition Plan Implementation", <http://www.opwdd.ny.gov/node/5760> for additional information.
- (3) Evidence that a **review of the person's interests, priorities, and necessary supports** occurs at least twice per year, preferably every six months, or more frequently as a person's needs, preferences and/or capabilities require (this can take place as part of the ISP/Hab Plan review process as long as documentation includes the required components and this information is integrated into the person's Habilitation Plan goals/activities).

- (4) Efforts made to support and promote new experiences and experiential learning for individuals within the broader community and efforts to promote and support “full access to the broader community”.

Note: Special Consideration Regarding Individuals Who Are Medically Frail, Elderly/Aged, or Who have Extremely Challenging Behaviors: Please note that CMS has been very clear in their guidance on HCBS Settings that EVERY individual receiving residential or non-residential supports funded under the HCBS waiver, regardless of disability, shall have opportunities, consistent with their interests and choices, to fully participate in their community to the same extent as individuals without disabilities. Providers may not impose restrictions on individuals who express a desire to participate in their community unless such participation would jeopardize the health or safety of the individual or other individuals and this determination is based upon an individualized assessment. Such modifications must be properly reviewed during person-centered planning processes and incorporated into plans of support as safeguards, restrictions and/or modifications as applicable and documented in accordance with OPWDD’s Person-centered behavioral intervention regulations (633.16), regulations pertaining to individual rights (633.4), and/or the rights modification requirements of the HCBS settings and person- centered planning rules. Individuals who do not desire to avail themselves of opportunities to fully participate in the community shall not be required to do so. However, providers shall document all efforts to encourage this community participation.

3. Compliance Work Plan (required for settings subject to heightened scrutiny that do not yet fully meet the HCBS settings standards at the time of the review)

Settings that are subject to heightened scrutiny and **do not yet meet** HCBS settings standards at the time of review (during the survey period 10/1/2016 - 2/2017) will be required to develop a Compliance Work Plan outlining how the setting will achieve HCBS settings compliance by 10/1/2018. The work plan will be reviewed and verified by DQI. The plan must be submitted to quality@opwdd.ny.gov no later than 20 days after the on-site review and will become part of the evidence package.

The Compliance Work Plan must include the following:

- Action items, including timeframes to come into compliance with the HCBS settings requirements;
- Milestones with timelines;
- Responsible parties for implementing the action items;
- Method for tracking and monitoring the plan to ensure ongoing compliance (e.g., self-assessment and data collection activities); and
- Other evidence demonstrating progress toward full HCBS compliance.

OPWDD intends to develop a work plan template to assist providers with work plan submittal.



**Office for People With
Developmental Disabilities**

INFORMATIONAL LETTER

Transmittal:	17-INF-XX
To:	Voluntary Provider Executive Directors Developmental Disabilities State Operations Offices Directors Developmental Disabilities Regional Offices Directors
Issuing OPWDD Office:	Division of Person-Centered Supports Division of Quality Improvement Counsel's Office
Date:	March 1, 2017
Subject:	Home and Community Based Settings Heightened Scrutiny Provider Self-Report and Evidence Questionnaire
Suggested Distribution:	Executive Directors and Executive Staff Quality Assurance Staff HCBS Waiver Program Managers
Contact:	Casey Downey, Program Operations Specialist, Division of Person Centered Supports (DPCS), Home and Community Living, (518) 486-9863 heightened.scrutiny@opwdd.ny.gov
Attachments:	Appendix A: October 13, 2015 Communication to Providers on the Home and Community Based Settings (HCBS) Heightened Scrutiny Process and Requirements for certified settings where waiver services are delivered Appendix B: HCBS Settings Heightened Scrutiny Provider Evidence Questionnaire Self-Report Appendix B-1: Instructions and Content Guidance for OPWDD's HCBS Settings Heightened Scrutiny Self-Report Appendix C: How to register for a webinar covering instructions for how to complete the Heightened Scrutiny Provider Evidence Questionnaire Self-Report Append D: Home and Community-Based Services (HCBS) Settings Compliance Work Plan



**Office for People With
Developmental Disabilities**

Related ADMs/INFs	Releases Cancelled	Regulatory Authority	MHL & Other Statutory Authority	Records Retention
<p>October 13, 2015 Communication to Providers on the Home and Community Based Settings (HCBS) Heightened Scrutiny Process and Requirements for certified settings where waiver services are delivered</p>	<p>None</p>	<p>42 CFR §441.301 42 CFR §441.530 42 CFR §441.710 14 NYCRR §633.4 14 NYCRR Subpart 635-10 14 NYCRR Part 671</p> <p>Social Security Act §1915(c), §1915(i), §1915(k)</p>	<p>Mental Hygiene Law Sections 13.07, 13.09(b), and 16.00</p>	<p>6 Years from Date of Service: 18 NYCRR 504.3(a)</p>

Purpose:

The purpose of this Informational Letter is to communicate to Home and Community Based Services (HCBS) waiver providers the evidence questionnaire and timeframe/process for evidence submittal for each setting subject to heightened scrutiny that is identified by OPWDD, the Department of Health (DOH) and/or its contractors, or the provider agency.

This is a continuation of the information provided in the October 13, 2015, "Communication to Providers on the Home and Community Based Settings (HCBS) Heightened Scrutiny Process and Requirements for certified settings where waiver services are delivered". See **Appendix A** or <http://www.opwdd.ny.gov/node/6252>. The October 13, 2015 memo outlined the criteria for determining whether a setting is subject to heightened scrutiny. It also described the required evidence documentation for settings subject to heightened scrutiny and noted that OPWDD would develop a questionnaire for providers to include in their evidence package. Please note that all the content in Appendix A (October 2015 memo) remains substantively the same except for the timelines. The evidence questionnaire template is contained in **Appendix B**.

All HCBS Waiver Providers must complete Appendix B no later than May 5, 2017. The revised heightened scrutiny process timeline is included in this Informational Memo. OPWDD will hold several webinars on how to complete the evidence package. See **Appendix C** for times and dates and how to register for this webinar. **OPWDD highly recommends that agency Executive Directors and other applicable executive level staff plan to attend.**

Background:

The Centers for Medicare and Medicaid Services (CMS) is seeking to ensure that individuals receiving services through HCBS Medicaid waiver programs have full access to the greater community in which they live. On March 17, 2014, CMS issued final regulations regarding characteristics and requirements for settings in order to be considered "home and community based" for purposes of Medicaid (42 CFR 441.301, *et. seq.*). The federal regulations can be found at the following link: <https://www.federalregister.gov/documents/2014/01/16/2014-00487/medicaid-program-state-plan-home-and-community-based-services-5-year-period-for-waivers-provider>.

To be considered a HCBS setting, it must neither be institutional in nature nor isolate individuals from the broader community. It must be a home or work place that is well-integrated in the community. Federal regulations and guidance help to identify settings that are *presumed to be institutional or isolating and therefore, do not meet the requirements of HCBS Settings*. Settings that are presumed to be institutional or isolating are subject to "heightened scrutiny".

States may only include settings that are presumed to be institutional or isolating in nature in their HCBS program with the approval of CMS. CMS requires these presumed

institutional settings to undergo “heightened scrutiny” to verify that they, in fact, do not isolate individuals from the broader community, are not institutional in nature, and meet HCBS settings standards. The state must first determine whether the site does meet and/or can meet the HCBS requirements; the state will then submit the basis for its determination (the “evidence package”) to CMS.

Directions:

Appendix B, “HCBS Settings Heightened Scrutiny Evidence Questionnaire Self-Report” is a pdf print out of the evidence questionnaire template that the provider will use to report information for each heightened scrutiny setting electronically in FluidSurveys that can be accessed through the internet using the following link: <http://opwddnygov.fluidsurveys.com/s/HeightenedScrutiny/>

We strongly recommend that providers read all of the instructions in Appendix B prior to getting started. The following information is a summary of the instructions.

The Evidence Questionnaire Self-Report for each provider and setting subject to heightened scrutiny must be completed electronically in FluidSurveys no later than **May 5, 2017**.

- A. **All HCBS waiver providers:** Complete Section A, “Agency Information”, even if the provider does not believe they operate any heightened scrutiny settings.
- B. **For each waiver setting subject to heightened scrutiny,** the HCBS waiver provider must self-identify which residential and non-residential settings (excluding sheltered workshops that must close or convert) that trigger heightened scrutiny. **Providers must include:**

- Settings deemed heightened scrutiny by DQI surveyors via exit conference form or letter;

AND

- Settings not yet assessed by DQI where the provider self-identifies the site as requiring heightened scrutiny;

AND

- Settings the provider self-identifies that they believe should have been deemed heightened scrutiny by DQI surveyors but was not.

Then, complete 1 questionnaire for each of these settings.

1. Complete Section B through Section F of the Evidence Questionnaire Self-Report. Do not include names or other personal/confidential information protected by Federal and/or New York State Law when completing the survey.
2. Upload a site map of the setting that clearly identifies the setting by operating certificate number. Also identify other settings on the site map such as private residential homes, stores, businesses, parks, etc.

If a site was triggered for heightened scrutiny due to being clustered or collocated and/or is a campus setting, identify all settings on the site map that are collocated and/or clustered by agency, operating certificate and address.

Site maps can be obtained at <http://maps.google.com>. Once there, click the satellite button. Before uploading, save the image with the following naming convention: agency-OC#-sitemap.

3. Upload up to 5 pictures that depict the setting and the surrounding neighborhood. Do not include pictures or other identifying information for program participants. Before uploading, save the image with the following naming convention: agency-OC#-pic1of5 (e.g., opwddcapitaldistrict-012345678-pic1of3).
4. Section E-1 is to be completed for all settings that triggered heightened scrutiny. These questions are to be answered for all settings where waiver services are delivered. Questions in Section E-2 are specific to the type of setting (i.e., residential or day setting). Select "residential" for an assessment being completed for a residential setting and "non-residential" for an assessment being completed for a non-residential setting.
5. Upload the setting work plan that indicates how compliance with each standard will be achieved no later than October 1, 2018. The setting may use the work plan format that is located on the OPWDD HCBS Settings Toolkit under heightened scrutiny http://www.opwdd.ny.gov/opwdd_services_supports/HCBS/hcbs-settings-toolkit, or may use their own format as long as it includes the following:
 - ✓ Action items, including timeframes to come into compliance with the HCBS settings requirements;
 - ✓ Milestones for the action item timelines;
 - ✓ Responsible parties for implementing the action items;

- ✓ Method for tracking and monitoring the plan to ensure ongoing compliance (e.g., self-assessment and data collection activities); and
- ✓ Other evidence demonstrating progress toward full HCBS compliance.

Please note: The work plan submitted with the FluidSurveys may need to be revised/updated if any HCBS requirement/standard is identified by DQI as “not met” during the October 1, 2016 through September 30, 2017 survey cycle that did not include a corresponding set of action items on the work plan uploaded with the FluidSurveys. In this case, the provider of the setting is required to forward an updated work plan to heightened.scrutiny@opwdd.ny.gov no later than 20 business days after the DQI survey visit that includes action items for the standards/requirements that DQI identifies as “not met”.

6. Section G is a narrative that enables the heightened scrutiny setting provider to explain how the setting is home and community based including how the setting facilitates full access for each person to the broader community. OPWDD highly recommends that providers complete this section to demonstrate how the setting is community integrated and overcomes the presumption that it is institutional and/or isolating as this information will help OPWDD to make a case that the setting is HCBS eligible. Additionally, agencies should also provide evidence demonstrating that there is little or no interconnectedness of the administrative and fiscal operations of co-located or adjacent settings. If the space allocated in the FluidSurveys is not sufficient, the setting may upload additional information using this naming convention: Agency-OC#-addinfo.
7. Maintain a print out of the questionnaire, the work plan, and all supporting documentation evidencing its effective implementation at the site or access and verification by reviewers during the survey process or for other audits/reviews.

More detailed instructions are included in Appendix B within the FluidSurveys evidence questionnaire template. The webinars outlined in Appendix C will cover these instructions and any questions that providers have on these requirements and the process.

In the meantime, questions can be directed to heightened.scrutiny@opwdd.ny.gov or to Casey Downey, Program Operations Specialist, (518) 486-9863.

Next Steps, Additional Information, and Revised Timeline:

As indicated in the October 2015 Provider Communication Memo on Heightened Scrutiny (Appendix A), all settings subject to heightened scrutiny will be reviewed by DQI to:

- Determine the status of HCBS compliance;
- Verify the setting's evidence package; and
- Validate that the setting's HCBS compliance work plan is implemented and achieving intended results.

DQI will conduct this review during the 10/1/2017 survey cycle.

DQI Survey findings for this period will be included as a component of the evidence package to overcome the institutional presumption if the setting demonstrates compliance and/or conscientious implementation of its work plan as applicable.

If the provider is not in full compliance with HCBS settings standards and/or implementation of an effective work plan at the time of the DQI review, the setting's compliance work plan must be developed/ revised to include the action steps for each area of non-compliance that the provider will take to bring the setting into full compliance no later than October 1, 2018. This is a very important component of the evidence package, as CMS specifies in its June 26, 2015 memo that CMS 'will review the information to determine whether each and every one of the qualities of a home and community based setting outlined in 42 CFR 441.301(c)(4)/ 441.530(a) are met, whether the state can demonstrate that persons receiving services are not isolated from the greater community of individuals not receiving Medicaid HCBS, and whether CMS concludes that the information indicates that there is strong evidence the setting does not meet the criteria for a setting that has the qualities of an institution'¹. If the setting work plan previously uploaded to the FluidSurveys does not align with the areas of non-compliance identified by DQI, the provider must resubmit the work plan to: heightened.scrutiny@opwdd.ny.gov no later than 20 days after the DQI survey of the setting (beginning October 1, 2017).

Once evidence has been reviewed and accepted by OPWDD, settings supported by OPWDD as overcoming the institutional presumption will undergo a public input process after which OPWDD will send evidence to CMS for a final determination².

The following is a revised timeline and required action that applies to all residential and non-residential settings where HCBS waiver services are delivered.

¹ See CMS Memo dated June 26, 2015, page 2 <http://www.opwdd.ny.gov/node/6253>

² CMS will review the information or documentation to ensure that all participants in the setting are afforded the degree of community integration required by the regulation and desired by the individual. The evidence must be sufficient to overcome the presumption that the site is institutional or isolating. If the setting withstands this "heightened scrutiny", it will be deemed home and community-based.

Heightened Scrutiny Timeline	OPWDD Actions	Actions Required of Voluntary and state operated providers
October 1, 2015 through September 30, 2016	<p>OPWDD DQI completes routine on-site surveys of certified residential and non-residential settings and determines which ones are subject to heightened scrutiny.</p> <p>DQI reviews certified residential settings (IRAs and CRs) for baseline HCBS settings compliance for those settings that are deemed subject to the heightened scrutiny process.</p>	Continue to make progress towards full compliance with the HCBS settings rules and person- centered planning and process requirements
March 1, 2017	Distribute specific information to provider agencies on developing evidence package.	Complete and submit information required for evidence package with copy remaining on-site for verification by DQI.
October 1, 2017 through March 2018	<p>OPWDD DQI reviews HCBS settings compliance for all heightened scrutiny settings (residential and non-residential) and verifies provider self-survey/evidence information. Review information will be made public and becomes part of the evidence package</p> <p>Effective 10/1/16, HCBS settings standards become part of routine survey activity going forward for all settings where waiver services are delivered.</p>	Continue to make progress towards full compliance.
August through September 2018	OPWDD opens heightened scrutiny public input process	Continue to make progress towards full compliance.
October through December 2018	OPWDD submits heightened scrutiny settings to CMS	Continue to make progress towards full compliance.
October 2018	OPWDD begins to enforce HCBS settings requirements	Full compliance required.

Appendix C:

Dates/Times for Webinars Covering Instructions for How to Complete the Heightened Scrutiny Provider Evidence Questionnaire Self-Report

OPWDD will be hosting a series of webinars to provide an overview of the Heightened Scrutiny process, and instructions on completing the Heightened Scrutiny Provider Evidence Questionnaire Self-report. In addition, OPWDD will be hosting a series of Question and Answer webinars to address specific questions that providers may have regarding the Heightened Scrutiny process.

Dates for the webinars are noted below with a link to the WebEx registration.

Registration is required. Please note that you must use a telephone to access the audio portion of the webinars. You may submit questions in advance to the OPWDD Heightened Scrutiny mailbox at: heightened.scrutiny@opwdd.ny.gov.

Please Note: Due to limited availability, please coordinate within your agency to view the webinars together. This will help to limit the number of registrants and phone lines used, therefore allowing a greater number of registrants.

Date of Webinar : Overview of HCBS and HS Questionnaire	Time	Link to Registration
Monday, March 27 th , 2017	9:30 am – 11:30 am	Event address to register: https://meetny.webex.com/meetny/onstage/g.php?MTID=ec83a6ee091a26d2934a20d810971b81f
Thursday, March 30 th , 2017	1:00 pm – 3:00 pm	Event address to register: https://meetny.webex.com/meetny/onstage/g.php?MTID=eb78b4732b0f682f828df8779f8cfdd80
Date of Webinar: Q and A HS process	Time	Link to Registration
Monday, April 3 rd , 2017	1:30 pm – 2:30 pm	Event address to register: https://meetny.webex.com/meetny/onstage/g.php?MTID=e265ab92b0bc75811c3937140c2b58aac
Wednesday, April 5 th , 2017	2:30 pm – 3:30 pm	Event address to register: https://meetny.webex.com/meetny/onstage/g.php?MTID=e507ce044c0d78e8319a7a0788dbc0c9d

Please email heightened.scrutiny@opwdd.ny.gov if registration has been restricted for you due to capacity limitations. Additional training dates will be developed if need be.



Heightened Scrutiny

Page 1

HCBS Settings Heightened Scrutiny Provider Evidence Questionnaire Self-Report

GENERAL INSTRUCTIONS

1. All HCBS Waiver providers must complete Section A. "Agency Information".
2. The HCBS Waiver provider must self-identify which residential and non-residential settings (excluding sheltered workshops that must close/convert) trigger heightened scrutiny and then complete 1 questionnaire per each of these settings (Sections B-G). Providers must include:

- Settings deemed heightened scrutiny by DQI surveyors via exit conference form or letter;

AND:

- Settings not yet assessed by DQI where the provider self-identifies the site as requiring heightened scrutiny;

AND:

- Settings the provider self-identifies that they believe should have been deemed heightened scrutiny by DQI surveyors but were not.

OPWDD will later reconcile DQI's list of heightened scrutiny settings with questionnaires received from providers to ensure all heightened scrutiny sites have been identified.

Information submitted comprises the Heightened Scrutiny "Evidence Package" and will be subject to validation by New York State. The Evidence Package may be made publically available during the required public input process and therefore providers should not include names or any other personal/confidential information protected by Federal or State Law on people supported through the setting.

In addition to the questionnaire, the following information is required for the Evidence Package and will be uploaded to FluidSurveys.

3. **SITE MAP (Section D):** A site map of the location of the heightened scrutiny setting must be uploaded to FluidSurveys. Site maps can be obtained at <http://maps.google.com> (once there click the satellite button). **It is recommended that you copy and paste this link into a separate browser as you may be redirected away from this survey.** Identify all settings on the site map by agency, OC#, address, and certified capacity. Identify the settings that are collocated and/or clustered with the heightened scrutiny setting as well by agency, OC#, address and certified capacity. Other locations should also be identified such as private homes, grocery stores, parks, banks, etc. **Before uploading, save the image with the following naming convention for the specific heightened scrutiny setting that is the subject of the survey: Agency-OC#-sitemap.**
4. **PICTURES (Section D):** Upload to the FluidSurveys up to 5 pictures that depict the setting and surrounding neighborhood. Do not include pictures of people you support. **Before uploading, save the image with the following naming convention: Agency-OC#-pic_of_ (e.g., OPWDD-12345678-pic1of5).**
5. **QUESTIONNAIRE (Section E-1 and E-2):** Section E-1 is to be completed for all settings that triggered heightened scrutiny. These questions are to be answered for all settings where waiver services are delivered. Questions in Section E-2 are specific to the type of setting (i.e., residential or day setting). Select "residential" for an assessment being completed for a residential setting and "non-residential" for an assessment being completed for a non-residential setting.
6. **WORK PLAN (Section F):** A work plan must be provided for any heightened scrutiny setting that is not in full compliance

with the HCBS settings rules. Even one response of “No” indicates that a work plan is needed. Upload to the FluidSurveys the setting’s work plan that shows how full compliance with the HCBS settings requirements and standards will be achieved no later than October 1, 2018. **Before uploading, save the work plan with the following naming convention: Agency-OC#-wp.**

7. **NARRATIVE (Section G):** Include narrative information that clearly demonstrates how the setting meets the Home and Community Based Settings requirements and overcomes the presumption that it is institutional and/or isolating. Focus the response on how the setting provides full access for EACH PERSON served through the setting to the broader community including opportunities to seek employment, 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 not receiving HCBS services. Additionally, agencies should also provide evidence demonstrating that there is little or no interconnectedness of the administrative and fiscal operations of co-located or adjacent settings. If the space provided in the questionnaire is not sufficient, consolidate all additional information into one file/format and upload to the FluidSurveys. **Before uploading, save the additional information with the following naming convention: Agency-OC#-addinfo.**

INSTRUCTIONS ON USING THIS SURVEY:

It is recommended that you copy and paste the links below into a separate browser as you may be redirected away from this survey.

GATHER INFORMATION NEEDED: It is recommended that before proceeding with the electronic survey in FluidSurveys, you gather all the necessary information on the settings that trigger heightened scrutiny as defined by the October 2015 Provider Communication Memo on heightened scrutiny that can be found at: <http://www.opwdd.ny.gov/node/6252> Information needed on the agency and each setting includes, but is not limited to, the following:

- Agency Corporate ID and agency contact person and contact information
- Agency accreditations if any and whether the agency is designated as a full COMPASS agency
- Operating Certificate numbers for each HS setting
- Contact person and contact information for each HS setting should additional information be needed
- Addresses for each HS setting and county where each HS setting is located
- Certified capacity of each HS setting
- Number of people served through each HS setting
- The specific HS triggers for each HS setting (see <http://www.opwdd.ny.gov/node/6252>)
- Whether the setting is co-located and/or clustered with other settings and the Agency, OC#s, certified capacities of the other settings
- Characteristics of each HS setting (e.g., whether public transportation is available, building type, location type, etc.)
- HS Setting Site Map - Site maps can be obtained at <http://maps.google.com> (once there click the satellite button).
- HS setting pictures
- HS setting Work Plan (an optional template can be found on the HCBS Settings Toolkit at: http://www.opwdd.ny.gov/opwdd_services_supports/HCBS/hcbs-settings-toolkit under “Heightened Scrutiny”)

USE BACK OR NEXT BUTTON: When moving through the survey on-line, if you need to go back or forward to a page, use the “Back” or “Next” button on the bottom of the survey page.

SAVE AND CONTINUE OPTION: Within this survey, you are given the opportunity to “Save and Continue” (see button at the bottom of every survey page). This will allow you to save your survey and to continue your survey at a later date. When you click “Save and Continue” you will see a URL that you can bookmark to continue the survey later. **We highly recommend that you bookmark this URL so that you can continue your survey at a later date.** Or, you can enter your email address and click “Email me this link”. FluidSurveys will then automatically email you the survey link (which you also have bookmarked as mentioned above) for you to use to continue where you left off. This email will come from heightened.scrutiny@opwdd.ny.gov via FluidSurveys. **NOTE:** Please be sure to check your spam and junk folders if you do not receive an automatic email from FluidSurveys. OPWDD is not able to generate another “Save and Continue” email if the “Save and Continue” email is not automatically received due to being blocked by your agency. **Should you not receive your “Save and Continue” email from FluidSurveys and do not bookmark your URL, you will have to restart your survey from the beginning.**

SUBMITTING THE SURVEY AND DOWNLOADING/PRINTING IT: Before you click the “SUBMIT” button at the end of each survey, please review your answers as you will not be able to change the responses to your survey unless you contact Casey Downey at 518-486-9863 or email heightened.scrutiny@opwdd.ny.gov. Once you click the “Submit” button at the end of the survey, you will have the chance to download/print your survey response.

STARTING ANOTHER SURVEY: To start another survey for a particular heightened scrutiny setting, you will have to type the survey link back into your browser to take the survey again by using this link: <http://opwddny.gov.fluidsurveys.com/s/HeightenedScrutiny/>

FOR QUESTIONS AND TROUBLESHOOTING CONTACT:

Casey Downey, OPWDD, Program Operations Specialist, 518-486-9863 or email heightened.scrutiny@opwdd.ny.gov.

Thank you for your time in completing this important survey.

A. Agency Information:

NOTE: All questions are required for your first survey. For all subsequent surveys, only questions #1, #2, #2a, and #5 are required.

1) Provider Agency Name:

ANSWER REQUIRED FOR EVERY SURVEY COMPLETED

Type here

1a) Agency contact person's FIRST name:

ONLY REQUIRED ON FIRST SURVEY SUBMISSION

Type here

1b) Agency contact person's LAST name:

ONLY REQUIRED ON FIRST SURVEY SUBMISSION

Type here

1c) Agency contact person's phone number (XXX-XXX-XXXX):

ONLY REQUIRED ON FIRST SURVEY SUBMISSION

Type here

1d) Agency contact person's e-mail address:

ONLY REQUIRED ON FIRST SURVEY SUBMISSION

Type here

(CorpID)

2) Agency Corporate ID (5 characters):

ANSWER REQUIRED FOR EVERY SURVEY COMPLETED

Type here

2a) Re-enter Agency Corporate ID (5 characters):

ANSWER REQUIRED FOR EVERY SURVEY COMPLETED

Type here

3) Is the agency accredited by a certifying body?

ONLY REQUIRED ON FIRST SURVEY SUBMISSION

Yes No

3a) What agency accreditation(s)?

ONLY REQUIRED ON FIRST SURVEY SUBMISSION

CQL

Other, please specify...

Type here

Other, please specify...

Type here

Other, please specify...

Type here

3b) CQL Accreditation Type

ONLY REQUIRED ON FIRST SURVEY SUBMISSION

Quality Assurances

Person Centered Excellence

Person Centered Excellence with Distinction

4) Is the agency a full COMPASS agency?

ONLY REQUIRED ON FIRST SURVEY SUBMISSION

Yes No

5) Does the agency have any sites that trigger Heightened Scrutiny?

ANSWER REQUIRED FOR EVERY SURVEY COMPLETED

If no, you will be sent to the survey completion page.

Yes No

(sites)

5a) If the agency has sites that trigger heightened scrutiny:

ONLY REQUIRED ON FIRST SURVEY SUBMISSION

Enter a numeric value only (no decimals or fractions). If none, enter 0.

Number of certified residential settings that trigger heightened scrutiny:	Type here
Number of certified day habilitation settings that trigger heightened scrutiny:	Type here
Number of certified day training settings (that are not sheltered workshops) that trigger heightened scrutiny:	Type here
Number of other settings that trigger heightened scrutiny:	Type here

(sum of sites)

The total settings operated by your agency that trigger heightened scrutiny is (sum of the above):

{{ sites.0 + sites.1 + sites.2 + sites.3 }}

5b) Specify the type of other settings that triggered heightened scrutiny:

ONLY REQUIRED ON FIRST SURVEY SUBMISSION

Type here

B. Demographic Information for Heightened Scrutiny Site:

All questions are required

Complete sections B-F for **EACH** setting that triggers heightened scrutiny.

1) Type of Certified Setting - Only 1 answer based on O.C. #:

Supervised IRA or CR

Supportive IRA or CR

Day Habilitation

Day Training (Site based Prevocational Setting other than Sheltered Work Shop)

Other, please specify...

Type here

2) Site Address:

Type here

2a) Site City:

Type here

2b) Site Zip:

Type here

3c) Site County:

Albany

Allegany

Bronx

Broome

Cattaraugus

Cayuga

Chautauqua

Chemung

Chenango

Clinton

Columbia

Cortland

Delaware

- Dutchess
- Erie
- Essex
- Franklin
- Fulton
- Genesee
- Greene
- Hamilton
- Herkimer
- Jefferson
- Lewis
- Kings
- Livingston
- Madison
- Monroe
- Montgomery
- Nassau
- New York
- Niagara
- Oneida
- Onondaga
- Ontario
- Orange
- Orleans
- Oswego
- Otsego
- Putnam
- Queens
- Rensselaer
- Richmond
- Rockland
- St. Lawrence

- Saratoga
- Schenectady
- Schoharie
- Schuyler
- Seneca
- Steuben
- Suffolk
- Sullivan
- Tioga
- Tompkins
- Ulster
- Warren
- Washington
- Wayne
- Westchester
- Wyoming
- Yates

Please Note: The OC number is an 8-digit number. Historically, the OC number had only 7-digits. With the transition to the 7 to 8 digit OC, the OC numbers remain unchanged with the exception of a 0 being inserted as the 5th digit. All OC's should be formatted as:

XXXX0XXX

(OpCert)

3) Operating Certificate Number (8 digits):

Type here

4) Re-enter Operating Certificate Number (8 digits):

Type here

5) Certified Capacity:

Type here

5b) Number of people enrolled in the program who use the setting:

Type here

(Name)

6) Contact person's FIRST name:

Type here

6b) Contact person's LAST name:

Type here

7) Contact phone number (format: XXX-XXX-XXXX):

Type here

8) Contact e-mail:

Type here

C. Heightened Scrutiny (HS) Triggers: Indicate what Heightened Scrutiny trigger(s) apply to your site/setting you are completing the survey for.

More information on the HS triggers can be found at:

<http://www.opwdd.ny.gov/node/6252>

(NOTE: If you click on this link, you may be taken away from this survey. Please copy and paste this link into a separate browser).

All questions are required

1. The setting/site is located in a building on the grounds of a public institution. (A public institution is an institution that is the responsibility of a governmental unit or over which a governmental unit exercises administrative control. The following is NOT a public institution for purposes of heightened scrutiny: Medical institutions, child care institutions, universities, hospitals, schools, public libraries or other similar settings.)

Yes No

2. The setting/site is located in a building that is also a publically or privately operated facility that provides inpatient institutional treatment.

Yes No

3. The setting/site is immediately adjacent to a public institution (i.e. the setting/site is next to and abuts the public institution, see definition in 1.).

Yes No

4. The setting/site has been converted from an Intermediate Care Facility (ICF) on or after March 17, 2014.

Yes No

4a. If yes to #4, indicate date of conversion (MM/DD/YYYY):

Type here

5. The setting/site is part of a group of multiple settings co-located and operationally related such that the co-location and/or cluster appears to isolate and/or inhibit interaction with the broader community, including any of the following:

5a. Setting/site is situated on a **PRIVATE CAMPUS** where there are multiple group homes and/or facilities for people with intellectual and/or developmental disabilities (I/DD) on the same property (**NOTE: Private campus settings will automatically trigger heightened scrutiny**); and/or

Yes No

5b. Setting is co-located with multiple settings for people with intellectual and/or developmental disabilities (I/DD) that are operationally related such that the co-location may isolate people with disabilities and/or inhibit individuals from interacting with the broader community.

Yes No

5c. How many settings/programs are clustered, co-located, or on a private campus?

Type here

5d. How many people are served in the clustered, co-located, or private campus settings/programs?

Type here

6. The setting/sites design, appearance, and/or location appears to be institutional and/or isolating (includes one or more of

D. Setting Location:
All questions are required

1) Setting Location Type:

- Rural
- Suburban
- Urban

2) Is public transportation available?

Yes No

2a) If public transportation is available, does the setting provide contact information, access to, and training on the use of public transportation, and are transportation schedules and phone numbers available in a convenient location for people supported to access?

Yes No

2b) If public transportation is not available, are other resources provided for the person to access the broader community?

Yes No

3) Building type:

- Single Family Home
- Multi-Family Home
- Apartment Building
- Day Facility - Single Building
- Day Facility - Part of a strip mall, business park, or other commercial/integrated location
- Day Facility - Part of a cluster or co-location on same property with other facilities only serving people with I/DD
- Other, please specify...

(home)

3a. Multi-Family Home: Number of total units

3b. Multi-Family Home: Number of designated units for people served by OPWDD/HCBS Waiver Services

(apartment)

3a. Apartment Building: Number of total units

3b. Apartment Building: Number of designated units for people served by OPWDD/HCBS Waiver Services

Type here

Site Map (Naming Convention: Agency-OC#-Sitemap):

A site map of the location of the heightened scrutiny setting must be uploaded to FluidSurveys. Site maps can be obtained at <http://maps.google.com> (once there click the satellite button). **It is recommended that you copy and paste this link into a separate browser as you may be redirected away from this survey.** Identify all settings on the site map by agency, OC#, address, and certified capacity. Identify the settings that are collocated and/or clustered with the heightened scrutiny setting as well by agency, OC#, address and certified capacity. Other locations should also be identified such as private homes, grocery stores, parks, banks, etc. **Before uploading, save the image with the following naming convention for the specific heightened scrutiny setting that is the subject of the survey: Agency-OC#-sitemap.**

Choose a file to upload No file selected

Upload up to 5 pictures that depict the setting and surrounding area if necessary to assisting the heightened scrutiny process. At least one picture is required.

BE SURE YOUR UPLOADS ARE SAVED WITH THE NAMING CONVENTION OF AGENCY-OC#-PICXOFX (EX. OPWDD-12345678-PIC1OF4)

Picture 1

Required

Choose a file to upload No file selected

Picture 2

Choose a file to upload No file selected

Picture 3

Choose a file to upload No file selected

Picture 4

Choose a file to upload No file selected

Picture 5

Choose a file to upload No file selected

E-1. PERSON CENTERED HABILITATION PLANNING AND SERVICE DELIVERY:

All questions are required

1) Peoples' Habilitation Plans are developed and updated using a person centered planning process that reflects their dreams, interests, preferences, strengths, capacities, and informed choices; consequently their Plans drive activities and supports that are meaningful to each person.

Yes No

1a) Specify the work plan action items.

Check all that apply and attach detailed Work Plan in Section F.

Review and revise service/habilitation plans using a person centered methodology (include description information in Section F)

Train setting staff on person centered planning rights and honoring choices

Train staff responsible for the writing and coordination of service/habilitation plans

Train individuals supported on their rights and how to make informed choices

Train families and/or advocates on the rights of individuals and how to make informed choices

Reorganize and/or reallocate staffing and or increase resources to ensure sufficient staffing to address people's preferences

Increase access to activites and options that are of interest to people supported

Reorganize and/or reallocate transportation resources to ensure sufficient transportation needs are met

Modification to physical environment

Increase in access to/options for technology (i.e. installation of another phone line, purchase of a computer/cell phone, access to the internet)

Develop and implement strategies to engage natural resources for people supported in the setting

Develop and implement strategies to engage the community for community inclusion options for people supported

Update/Revise policies and procedures applicable to the setting

Train supervisors, administrators, and decision makers within the organization in person-centered organizational practices and coaching

Other, please specify

Type here

2) People make informed choices related to home, work, relationships, recreational activities, social roles, etc.

Yes No

2a) Specify the work plan action items.

Check all that apply and attach detailed Work Plan in Section F.

Train staff on how to help people make informed choices

Train individuals supported on their rights and how to make informed choices

Train families and/or advocates on the rights of individuals and how to make informed choices

- Reorganize and/or reallocate staffing resources and/or staffing patterns to help support people's informed choices
- Increase in transportation/transportation options to support informed choices
- Reorganize and/or reallocate transportation resources to ensure sufficient transportation needs are met to honor informed choices
- Develop and implement experiential learning strategies with people supported
- Increase in access to/options for technology (i.e. installation of another phone line, purchase of a computer/cell phone, access to the internet)
- Develop and implement strategies to engage natural resources for people supported in the setting
- Develop and implement strategies to engage the community for community inclusion options for people supported
- Update/Revise policies and procedures applicable to the setting
- Train people supported to self advocate
- Train supervisors, administrators, and decision makers within the organization in person-centered organizational practices and coaching
- Other, please specify...

3) Each person's Habilitation Plans incorporates the meaningful and individualized community based activities that the person wants including desired frequency and supports needed.

Yes
 No

3a) Specify the work plan action items.

Check all that apply and attach detailed Work Plan in Section F.

- Train staff on community activities and resources and how to help people choose and experience new things
- Train staff on how to utilize and assist with use of other transportation options
- Train individuals supported on options available for meaningful community based activities
- Train families and/or advocates on options available for meaningful community based activities
- Reorganize and/or reallocate staffing resources to help facilitate and support people's choice of meaningful activities
- Increase in transportation/transportation options
- Reorganize and/or reallocate transportation resources to ensure transportation to meaningful activities
- Develop and implement strategies to engage natural resources for people supported in the setting
- Develop and implement strategies to engage the community for community inclusion options for people supported
- Update/Revise policies and procedures applicable to the setting
- Train supervisors, administrators, and decision makers within the organization in person-centered organizational practices and coaching
- Other, please specify...

4) Each person's Plan reflects the risk factors and the positive safeguarding measures in place to minimize them including individualized back up plans and strategies when needed (that contribute to the person's ability to engage in meaningful activities).

Yes
 No

4a) Specify the work plan action items.

Check all that apply and attach detailed Work Plan in Section F.

- Train staff on dignity of risk and positive safeguarding
- Train individuals supported on their right to make informed choices and have dignity of risk
- Train individuals one on one about how to address his/her own personal risk factors
- Train families and/or advocates on the rights of the individual to make informed choices and have dignity of risk
- Implement the strengths and risks inventory tool or other tools to help generate meaningful conversations with people regarding possible risk areas and to employ decision making in deciding what risks are tolerable and what risks are nonnegotiable and possibly require a rights modification
- Reorganize and/or reallocate staffing resources to ensure dignity of risk and positive safeguarding
- Reorganize and/or reallocate transportation resources
- Use of appropriate technology to honor dignity of risk and ensure positive safeguards
- Develop and implement strategies to engage natural resources for people supported in the setting
- Update/Revise policies and procedures applicable to the setting
- Train supervisors, administrators, and decision makers within the organization in person-centered organizational practices and coaching
- Other, please specify...

5) Each person's Plan reflects cultural considerations and is written in plain person-centered language that is understandable to him/her (e.g., written in preferred language including Braille if necessary).

Yes No Na

5a) Specify the work plan action items.

Check all that apply and attach detailed Work Plan in Section F.

- Train staff on use of plain language, cultural competency, and communicating with each person effectively
- Train individuals supported on their right to understand information
- Train families and/or advocates on the rights of the individuals to understand information
- Increase in access to/options for technology that can facilitate communication (i.e. installation of another phone line, purchase of a computer/cell phone, access to the internet)
- Update/Revise policies and procedures applicable to the setting
- Train supervisors, administrators, and decision makers within the organization in person-centered organizational practices and coaching
- Other, please specify...

6) Each person directs their planning process and chooses who participates. The planning process is timely and occurs in the location and at a time that is convenient for each person. Each person is made aware that he/she may request a plan change. Plan changes requested are made within reasonable time frames.

Yes No

6a) Specify the work plan action items.

Check all that apply and attach detailed Work Plan in Section F.

- Train people to self advocate
- Train staff in people's person centered planning rights and how to help people exercise those rights
- Train individuals supported on their person centered planning rights
- Train individuals on how to direct the planning process and make informed choices
- Train families and/or advocates on the rights of the individual to direct the planning process and make informed choices
- Engage and empower direct support professional to participate in planning process with people they support when desired by the person
- Update/Revise policies and procedures applicable to the setting
- Train supervisors, administrators, and decision makers within the organization in person-centered organizational practices and coaching
- Other, please specify...

7) The planning process includes strategies for solving conflicts or disagreements and includes clear conflict of interest guidelines for all involved.

Yes No

7a) Specify the work plan action items.

Check all that apply and attach detailed Work Plan in Section F.

- Train staff on strategies for solving conflicts and disagreements effectively
- Train individuals supported on strategies for solving conflicts and disagreements effectively
- Train individuals supported on their rights and where to go to receive help addressing conflicts and disagreements
- Train individuals supported on how to make an anonymous complaint
- Update/Revise policies and procedures applicable to conflicts of interest and disagreements
- Other, please specify...

8) Each person's supports are individualized and do not rely solely on activities in large groups.

Yes No

8a) Specify the work plan action items.

Check all that apply and attach detailed Work Plan in Section F.

- Train staff on how to facilitate and support individualized options that are meaningful to each person
- Implement strategies and processes to learn about what is meaningful to each person and facilitate these activities and corresponding needed supports
- Reorganize and/or reallocate and/or increase staffing resources to help facilitate and support activities that are meaningful to each person
- Reorganize and/or reallocate and/or increase transportation resources to help facilitate individualized activities meaningful to each person

Train staff and individuals on how to use technologies such as the internet to identify options that may be of interest to people supported

Develop and implement strategies to engage natural resources for people supported in the setting

Develop and implement strategies to engage the community for community inclusion options for people supported

Train supervisors, administrators, and decision makers within the organization in person-centered organizational practices and coaching

Other, please specify...

Type here

9) Opportunities for decision making are part of each person's everyday routine.

Yes

No

9a) Specify the work plan action items.

Check all that apply and attach detailed Work Plan in Section F.

Facilitate opportunities for each person to experience alternatives before making decisions

Train staff on how to facilitate and support individualized decision making as part of each person's everyday routine

Train Individuals supported on making everyday decisions in their lives

Train families and/or advocates on the individuals right to make everyday decisions in their lives

Implement strategies and processes to increase each person's level of autonomy

Train supervisors, administrators, and decision makers within the organization in person-centered organizational practices and coaching

Other, please specify...

Type here

10) When a person expresses dissatisfaction with supports, services, living situation, roommate, etc. setting staff supports the person to make life and situational changes as he/she chooses.

Yes

No

10a) Specify the work plan action items.

Check all that apply and attach detailed Work Plan in Section F.

Develop and implement an ongoing process to learn about each person's satisfaction with supports, services, living arrangement/roommate, etc. and take action as needed based on what is learned

Train staff on listening skills including observing nonverbal cues and other ways to learn what people like and do not like

Train individuals supported on their rights and options

Train families and/or advocates on the rights and options of the individual

Increase in access to/options for technology (i.e. installation of another phone line, purchase of a computer/cell phone, access to the internet)

Develop and implement strategies to engage natural resources for people supported in the setting

Develop and implement strategies to engage the community for community inclusion options for people supported

Train staff on helping people to identify the changes that they want to make to increase their happiness and satisfaction

Implement strategies to help people choose their roommates and make changes as needed

☐ Update/Revise policies and procedures applicable to the setting

☐ Train supervisors, administrators, and decision makers within the organization in person-centered organizational practices and coaching

☐ Other, please specify...

Type here

FULL ACCESS TO THE COMMUNITY:

All questions are required

11) Each person is encouraged and supported to have full access to the broader community based on his/her interests/preferences/priorities for meaningful activities to the same degree as others in the community.

Yes No

11a) Specify the work plan action items.

Check all that apply and attach detailed Work Plan in Section F.

Train staff on techniques used to facilitate and support each person to participate in scheduled/unscheduled community activities in the same manner as people not receiving HCBS (e.g. shop, attend religious services, appointments, lunch/activities with family and friends, etc.) in the community as they choose

Individualize supports according to each person's interests and preferences

Train staff in how to work with people to maximize full access to the community

Train individuals supported on their rights to have full access to the community and how to make informed choices in this area

Train families and/or advocates on the rights of the individual to have full access to the community and how to make informed choices in this area

Provide access to the materials and supports that will assist people in gaining competencies and participating fully in preferred activities

Reorganize and/or reallocate and/or increase staffing resources to ensure sufficient staffing to support full access to the community based on each person's needs and preferences

Reorganize and/or reallocate and/or increase transportation resources to ensure sufficient transportation to facilitate and support full access to the community

Increase in access to/options for technology (i.e. installation of another phone line, purchase of a computer/cell phone, access to the internet) to facilitate and support full access to the community for each person

Develop and implement strategies to engage natural resources to maximize full access to the community for each person

Develop and implement strategies to engage the community for community inclusion options for each person supported

Develop and implement strategies to encourage spontaneity in choice of activities

Develop and implement actions that help connect people with relatives, friends, community members, etc..

Update/Revise policies and procedures applicable to the setting

Train supervisors, administrators, and decision makers within the organization in person-centered organizational practices and coaching

Other, please specify...

Type here

12) Setting staff provides ongoing/regular options for community integration and utilization in lieu of on-site services?

Yes No

12a) Specify the work plan action items.

Check all that apply and attach detailed Work Plan in Section F.

- Individualize supports according to each person's interests and preferences
- Train staff in how to work with people to maximize full access to the community
- Train individuals supported on their rights to have full access to the community and how to make informed choices in this area
- Train families and/or advocates on the rights of the individual to have full access to the community and how to make informed choices in this area
- Provide access to the materials and supports that will assist people in gaining competencies and participating fully in preferred activities
- Reorganize and/or reallocate and/or increase staffing resources to ensure sufficient staffing to support full access to the community based on each person's needs and preferences
- Reorganize and/or reallocate and/or increase transportation resources to ensure sufficient transportation to facilitate and support full access to the community
- Increase in access to/options for technology (i.e. installation of another phone line, purchase of a computer/cell phone, access to the internet) to facilitate and support full access to the community for each person
- Develop and implement strategies to engage natural resources to maximize full access to the community for each person
- Develop and implement strategies to engage the community for community inclusion options for each person supported
- Develop and implement strategies to encourage spontaneity in choice of activities
- Develop and implement actions that help connect people with relatives, friends, community members, etc..
- Staff communicate and provides materials to people to ensure that they are aware of activities occurring in the community in order to help them make informed choices to participate and provide for support of these activities
- Update/Revise policies and procedures applicable to the setting
- Train supervisors, administrators, and decision makers within the organization in person-centered organizational practices and coaching
- Other, please specify...

13) Except in cases of documented and appropriate rights modifications, each person is able to come and go from the setting at any time.

Yes No

13a) Specify the work plan action items.

Check all that apply and attach detailed Work Plan in Section F.

- Train staff on people's right to come and go at any time and appropriate rights modifications implementation
- Train individuals supported on their rights to come and go at any time and how to be safe in doing so
- Train families and/or advocates on the rights of the individual to come and go at any time and how to be safe in doing so
- Modify the physical environment in ways that can help facilitate and support this right for people
- Increase in access to/options for technology that can help facilitate this right
- Implement management strategies to ensure there are no inappropriate rights restrictions and practices that inappropriately restrict freedom of movement
- Update/Revise policies and procedures applicable to the setting
- Train supervisors, administrators, and decision makers within the organization in person-centered organizational practices and coaching

Other, please specify...

Type here

14) Except in cases of documented and appropriate rights modifications, each person in the setting is afforded the degree of community integration desired by the person.

Yes No

14a) Specify the work plan action items.

Check all that apply and attach detailed Work Plan in Section F.

- Individualize supports according to each person's interests and preferences
- Train staff in how to work with people to maximize full access to the community
- Train individuals supported on their rights to have full access to the community and how to make informed choices in this area
- Train families and/or advocates on the right of the individual to have full access to the community and how to make informed choices in this area
- Provide access to the materials and supports that will assist people in gaining competencies and participating fully in preferred activities
- Reorganize and/or reallocate and/or increase staffing resources to ensure sufficient staffing to support full access to the community based on each person's needs and preferences
- Reorganize and/or reallocate and/or increase transportation resources to ensure sufficient transportation to facilitate and support full access to the community
- Increase in access to/options for technology (i.e. installation of another phone line, purchase of a computer/cell phone, access to the internet) to facilitate and support full access to the community for each person
- Develop and implement strategies to engage natural resources to maximize full access to the community for each person
- Develop and implement strategies to engage the community for community inclusion options for each person supported
- Develop and implement strategies to encourage spontaneity in choice of activities
- Develop and implement actions that help connect people with relatives, friends, community members, etc..
- Update/Revise policies and procedures applicable to the setting
- Train supervisors, administrators, and decision makers within the organization in person-centered organizational practices and coaching

Other, please specify...

Type here

RIGHTS:

All questions are required

15) Except in cases of documented and appropriate rights modifications, each person has access to food and can eat when/where/and with whom they choose (in the same manner as people who do not receive HCBS).

Yes No

15a) Specify the work plan action items.

Check all that apply and attach detailed Work Plan in Section F.

- Person centered planning to determine preferences and desired choices for when, where, and with whom to eat
- Staff training (for all those working within the setting)
- Train individuals supported on their rights
- Train families and/or advocates on the rights of individuals
- Increases and/or changes in staffing patterns
- Modification to physical environment to ensure access to food
- Train supervisors, administrators, and decision makers within the organization in person-centered organizational practices and coaching
- Other, please specify...

16) Personal information is kept private; assistance with personal care is done in private; and each person is afforded privacy in the same manner as people not receiving HCBS (e.g. people knock and receive permission before accessing private space).

Yes No

16a) Specify the work plan action items.

Check all that apply and attach detailed Work Plan in Section F.

- Use person centered planning to determine preferences for privacy, personal care, assistance, and location
- Staff training (for all those working within the setting) to support privacy and privacy choices
- Train individuals supported on their right to privacy
- Train families and/or advocates on the right to privacy of the individual
- Review/oversight of physical environment to ensure personal information, both written and verbal, is kept private
- Update/Revise policies and procedures applicable to the setting on privacy of personal information
- Other, please specify...

17) Except in cases of documented and appropriate rights modifications, each person chooses who to interact with and when.

Yes No

17a) Specify the work plan action items.

Check all that apply and attach detailed Work Plan in Section F.

- Use of a Person Centered Planning methodology to determine preferences and choices including how often and the kind of interaction
- Staff training (for all those working within the setting) to support interactions
- Train individuals supported on their rights
- Train families and/or advocates on the rights of the individual
- Reorganize and/or reallocate and/or increase/change of staffing resources to ensure sufficient support
- Increase in transportation/transportation options to support interactions
- Reorganize and/or reallocate transportation resources to support interactions
- Increase in access to/options for technology (i.e. installation of another phone line, purchase of a computer/cell phone, access to the internet) in order to facilitate interactions
- Develop and implement strategies to engage natural resources for people supported in the setting to include relationships outside the setting
- Develop and implement strategies to engage the community for community inclusion options for people supported
- Train supervisors, administrators, and decision makers within the organization in person-centered organizational practices and coaching
- Other, please specify...

18) Each person has a means to secure personal belongings.

Yes
 No

18a) Specify the work plan action items.

Check all that apply and attach detailed Work Plan in Section F.

- Use of a Person Centered Planning methodology to ensure preferences and choice for location to secure personal belongings
- Staff training (for all those working within the setting) to provide support
- Train individuals supported on their right to secure personal belongings
- Train families and/or advocates on the rights of individuals to secure personal belongings
- Modification to physical environment to ensure means to secure personal belongings
- Update/Revise policies and procedures applicable to the setting
- Other, please specify...

19) Except in cases of documented and appropriate rights modifications, each person is allowed visitors of their choice at any time.

Yes
 No

19a) Specify the work plan action items.

Check all that apply and attach detailed Work Plan in Section F.

- Use of a Person Centered Planning methodology to determine preferences and choice of visitors including times
- Staff training (for all those working within the setting) to support visitations
- Train individuals supported on their right to have visitors at any time
- Train families and/or advocates on the rights of individuals to have visitors at any time
- Modification to physical environment if needed to provide private space for visits
- Increase in access to/options for technology (i.e. installation of another phone line, purchase of a computer/cell phone, access to the internet) to facilitate arranging visits if preferred
- Update/Revise policies and procedures applicable to the setting for visitors at the setting
- Train supervisors, administrators, and decision makers within the organization in person-centered organizational practices and coaching
- Other, please specify...

20) Except in cases of documented and appropriate rights modifications, each person accesses the setting and personal space (if applicable) in the same manner as people who do not receive HCBS (e.g., for residential, people have keys to their units and can lock their bedroom doors with only appropriate staff having keys if they so choose and/or alternative means are offered for those who cannot use keys); and each person has freedom of movement within the setting (and are not restricted to one room or designated area).

Yes
 No

20a) Specify the work plan action items.

Check all that apply and attach detailed Work Plan in Section F.

- Use of a Person Centered Planning methodology to determine choice and preferences for access to the setting and personal space
- Staff training (for all those working within the setting) to support access
- Train individuals supported on their rights to have help on locking mechanisms
- Train individuals on their right to have freedom of movement within a setting
- Train individuals on their right to access the setting and personal space
- Train families and/or advocates on the individuals right to have freedom of movement within a setting
- Train families and/or advocates on the right of the individual to access the setting and personal space
- Reorganize and/or relocate staffing to ensure freedom of movement
- Modification to physical environment if needed to include locking mechanism to setting and personal space and/or removal of barriers or obstructions that restrict movement within the setting
- Update/Revise policies and procedures applicable to the setting to include process to offer individuals locking mechanisms to the setting and personal space and freedom of movement and access
- Train supervisors, administrators, and decision makers within the organization in person-centered organizational practices and coaching
- Other, please specify...

21) Except in cases of documented and appropriate rights modifications, each person is permitted to have a personal cell phone, computer, or other device for private communication at any time.

Yes
 No

21a) Specify the work plan action items.

Check all that apply and attach detailed Work Plan in Section F.

- Use of a Person Centered Planning methodology to determine choices and preferences for communication as well as an assessment for accessible technology or device
- Staff training (for all those working within the setting) to support communication choices
- Train individuals supported on their rights to communication devices and privacy
- Train families and/or advocates on the right of the individual to communication devices and privacy
- Ensure sufficient staffing to support choice and preferences for communication methods
- Update/Revise policies and procedures applicable to the setting
- Train supervisors, administrators, and decision makers within the organization in person-centered organizational practices and coaching
- Other, please specify...

22) There are no blanket rules, policies, procedures, or practices that limit individual rights, independence, choices, or autonomy.

Yes No

22a) Specify the work plan action items.

Check all that apply and attach detailed Work Plan in Section F.

- Staff training (for all those working within the setting) to uphold rights
- Train individuals supported on their right to independence and autonomy
- Train families and or advocates on the rights of individuals to independence and autonomy
- Higher level staff perform unannounced visits to the setting to observe and ensure practices and staff competencies
- Update/Revise policies and procedures applicable to the setting
- Train supervisors, administrators, and decision makers within the organization in person-centered organizational practices and coaching
- Other, please specify...

23) Except in cases of documented and appropriate rights modifications, each person is not prohibited from engaging in any legal activity.

Yes No

23a) Specify the work plan action items.

Check all that apply and attach detailed Work Plan in Section F.

- Use of a Person Centered Planning methodology to determine choices and preferences for activities and to ensure all legal activities are supported
- Staff training on rights (for all those working within the setting) to support choices of legal activities

- Train individuals supported on their right to participate in legal activities
- Train families and/or advocates on the right of the individuals to participate in legal activities
- Update/Revise policies and procedures applicable to the setting on rights
- Train supervisors, administrators, and decision makers within the organization in person-centered organizational practices and coaching
- Other, please specify...

24) Except in cases of documented and appropriate rights modifications, each person has access to and control of their personal resources.

Yes
 No

24a) Specify the work plan action items.

Check all that apply and attach detailed Work Plan in Section F.

- Use of a Person Centered Planning methodology to determine choices and preferences on how personal resources are accessed and controlled
- Staff training (for all those working within the setting) on how individuals can control their resources
- Support individuals to access their personal resources
- Train families and/or advocates on the right of individuals to access their personal resources
- Increase in access to/options for technology (i.e. installation of another phone line, purchase of a computer/cell phone, access to the internet) as needed to support access to and control of resources
- Engage natural resources for people supported in the setting for education on resource management
- Update/Revise policies and procedures applicable to the setting
- Train supervisors, administrators, and decision makers within the organization in person-centered organizational practices and coaching
- Other, please specify...

25) Each person is free from coercion, restraint, and inappropriate restrictions and interventions.

Yes
 No

25a) Specify the work plan action items.

Check all that apply and attach detailed Work Plan in Section F.

- Use of a Person Centered Planning methodology to ensure choices and preferences as well as to document appropriately any restrictions and/or interventions
- Staff training (for all those working within the setting) on right of individuals supported including methods to offer a variety of choices to people supported in all activities and community settings
- Train individuals supported on their rights to be free from coercion, restraint, and inappropriate restrictions and interventions
- Train families and/or advocates on the rights of individuals to be free from coercion, restraint, and inappropriate restrictions and interventions
- Update/Revise policies and procedures applicable to the setting on policies for rights restrictions and interventions
- Train supervisors, administrators, and decision makers within the organization in person-centered organizational practices and coaching

Other, please specify...

Type here

26) Any rights modifications align with requirements including documentation of an individualized and assessed need; justification for the modification; documentation of previous positive and less intrusive methods, collection and review of data, established time limits for periodic review of the modification, and obtaining the informed consent of the person.

Yes No

26a) Specify the work plan action items.

Check all that apply and attach detailed Work Plan in Section F.

- Use of a Person Centered Planning methodology including choices and preferences, as well as the documentation on the justification of the limits for periodic review of any rights modification
- Staff training (for all those working within the setting) on rights modifications that are based on assessed need
- Train individuals supported on their rights to be free from coercion, restraint, and inappropriate restrictions and interventions
- Train families and/or advocates on the rights of individuals to be free from coercion, restraint, and inappropriate restrictions and interventions
- Update/Revise policies and procedures applicable to the setting on policies for rights modifications and interventions
- Train supervisors, administrators, and decision makers within the organization in person-centered organizational practices and coaching
- Other, please specify...
Type here

PHYSICAL SETTING:

All questions are required

27) Except in cases of documented and appropriate rights modifications, each person has full unrestricted access to spaces in the setting in the same manner as people who do not receive HCBS (e.g. All bathrooms at the location, break rooms, kitchen with cooking space in the home; laundry in the home, etc.)

Yes No

27a) Specify the work plan action items.

Check all that apply and attach detailed Work Plan in Section F.

- Use of a Person Centered Planning methodology that includes choice and preferences for activities and/or use of all living spaces at setting
- Staff training (for all those working within the setting)
 - Train individuals supported on their right to full unrestricted access to living spaces
 - Train families and/or advocates on the rights of individuals to full unrestricted access to living spaces
- Increases and/or changes in staffing patterns to support access
- Reorganize and/or reallocate staffing resources to ensure sufficient staffing needs are met to support individuals right to full access to living spaces
- Modification to physical environment to provide full access to living spaces to ensure site is physically accessible and free of obstruction
- Update/Revise policies and procedures applicable to the setting
- Other, please specify...

28) The setting reflects each person’s needs and preferences including the presence of any physical modifications if necessary. For example, for people who need supports to move about the setting as they choose and to fully utilize setting features, the setting provides grab bars, bathroom seats, ramps, etc.

Yes No

28a) Specify the work plan action items.

Check all that apply and attach detailed Work Plan in Section F.

- Use of a Person Centered Planning methodology that identifies the individuals needs and preferences for modifications to support full utilization of the setting including creative adaptive solutions
- Train staff to support modifications
- Train individuals supported on their right for full utilization of the setting
- Train families and/or advocates on the rights of individuals to full utilization of the setting
- Increases and/or changes in staffing patterns
- Reorganize and/or reallocate staffing resources to ensure sufficient staffing needs are met in order to support full utilization of the setting
- Modification to physical environment to support full utilization of the setting including creative adaptive solutions

Increase in access to/options for technology if needed to support full access and utilization

Other, please specify...

Type here

29) The setting is physically accessible and there are no obstructions such as steps, lips on doorways, narrow hallways, etc. limiting mobility in the setting or if they are present there are environmental adaptations such as a stair lift or elevator to ameliorate the obstruction.

Yes No

29a) Specify the work plan action items.

Check all that apply and attach detailed Work Plan in Section F.

Use of a Person Centered Planning methodology to determine needs and preferences for environmental adaptations as needed to fully access the site

Train staff on requirements and methods to keep the setting physically accessible for people receiving services

Train individuals supported on their right to full accessibility of the site

Train families and/or advocates on the rights of individuals to full accessibility of the site

Modification to physical environment to ensure that the setting is fully accessible

Update/Revise policies and procedures applicable to the setting to include periodic reviews of the physical setting to ensure full accessibility and lack of obstruction

Other, please specify...

Type here

STAFFING AND COMPETENCIES:

All questions are required

30) Paid and unpaid staff receive training and continuing education related to the rights of people receiving services, supporting informed choice and decision making, and the HCBS settings rules.

Yes No

30a) Specify the work plan action items.

Check all that apply and attach detailed Work Plan in Section F.

- Staff training, initial and ongoing (for all those working within the setting) on rights, informed choice, decision making, and HCBS settings rules
- Train individuals supported on their rights including the HCBS setting rules
- Update/Revise policies and procedures applicable to the setting to include related staff training with providers to train paid and unpaid staff
- Train supervisors, administrators, and decision makers within the organization in person-centered organizational practices and coaching
- Other, please specify...

31) The setting has implemented DSP competencies and the evaluation process.

Yes No

31a) Specify the work plan action items.

Check all that apply and attach detailed Work Plan in Section F.

- Staff training (for all those working within the setting) and documentation of implementation of DSP competencies and evaluating process
- Train individuals supported on agency practice related to DSP competencies
- Update/Revise policies and procedures applicable to the setting
- Supervisors, administrators, and decision makers are trained on DSP competencies and the evaluation process
- Other, please specify...

32) There is sufficient staffing and/or resources (e.g., volunteers and natural supports) to address each person's needs and individualized Plan priorities for community inclusion and integration activities outside of the setting.

Yes No

32a) Specify the work plan action items.

Check all that apply and attach detailed Work Plan in Section F.

- Use of a Person Centered Planning methodology that documents each person's needs and prioritizing for community inclusion and integration
- Staff training (for all those working within the setting) on each persons individual plan to promote community inclusion and integration
- Train individuals supported on their right to community inclusion and integration

Train families and/or advocates on the rights of the individuals to community inclusion and integration

Increases and/or changes in staffing patterns

Reorganize and/or reallocate staffing resources to support each person's needs and priorities for community inclusion and integration

Increase in transportation/transportation options to ensure sufficient transportation needs are met

Reorganize and/or reallocate transportation resources to ensure sufficient transportation needs are met

Develop and implement strategies to engage natural resources for people supported in the setting

Develop and implement strategies to engage the community for community inclusion options for people supported

Train supervisors, administrators, and decision makers within the organization in person-centered organizational practices and coaching

Other, please specify...

Type here

E-2. Type of Setting

Setting Specific Questions

What type of setting is being assessed on this Self-Report?

- Residential
- Non-Residential

Provider-Owned or Controlled Residential Settings

The following questions are only pertinent for Self-Reports completed for residential settings

33) Each person has his/her own bedroom or shares a room with a choice of roommate(s).

Yes No

33a) Specify the work plan action items.

- Train setting staff on person centered planning rights, how to help people make informed choices and honoring choices
- Train staff responsible for the writing and coordination of service/habilitation plans
- Train individuals supported on their rights, how to make informed choices and how to self-advocate
- Train families and/or advocates on the rights of individuals and how to make informed choices
- Engage and empower direct support professionals to participate in planning process with people they support when desired by the person
- Modification to physical environment
- Update/Revise policies and procedures applicable to the setting
- Train supervisors, administrators, and decision makers within the organization in person-centered organizational practices and coaching
- Other, please specify...

34) Each person who needs assistance to dress are dressed in their own clothes appropriate to the time of day and personal preferences.

Yes No

34a) Specify the work plan action items.

- Review and revise service/habilitation plans using a person centered methodology
- Train staff on use of plain language, cultural competency, and communicating with each person effectively
- Engage and empower direct support professionals to participate in planning process with people they support when desired by the person
- Use person centered planning to determine preferences for privacy, personal care, assistance, and location
- Reorganize and/or reallocate staffing and or increase resources to ensure sufficient staffing to address people's preferences
- Develop and implement strategies to engage natural resources for people supported in the setting
- Update/Revise policies and procedures applicable to the setting
- Train supervisors, administrators, and decision makers within the organization in person-centered organizational practices and coaching
- Other, please specify...

35) Each person is dressed in clothes that fit, are clean, and are appropriate to the time of day, weather, and preferences.

Yes No

35a) Specify the work plan action items.

- Review and revise service/habilitation plans using a person centered methodology
- Train staff on use of plain language, cultural competency, and communicating with each person effectively
- Engage and empower direct support professionals to participate in planning process with people they support when desired by the person
- Use person centered planning to determine preferences for privacy, personal care, assistance, and location
- Reorganize and/or reallocate staffing and or increase resources to ensure sufficient staffing to address people's preferences
- Develop and implement strategies to engage natural resources for people supported in the setting
- Update/Revise policies and procedures applicable to the setting
- Train supervisors, administrators, and decision makers within the organization in person-centered organizational practices and coaching
- Other, please specify...

36) Each person who needs assistance with grooming are groomed as they desire.

Yes No

36a) Specify the work plan action items.

- Review and revise service/habilitation plans using a person centered methodology
- Train setting staff on person centered planning rights, how to help people make informed choices and honoring choices
- Train individuals supported on their rights, how to make informed choices and how to self-advocate
- Train families and/or advocates on the rights of individuals
- Engage and empower direct support professionals to participate in planning process with people they support when desired by the person
- Use person centered planning to determine preferences for privacy, personal care, assistance, and location
- Reorganize and/or reallocate staffing and or increase resources to ensure sufficient staffing to address people's privacy preferences
- Update/Revise policies and procedures applicable to the setting
- Train supervisors, administrators, and decision makers within the organization in person-centered organizational practices and coaching
- Other, please specify...

37) Each person has privacy in their sleeping or living unit.

Yes No

37a) Specify the work plan action items.

- Review and revise service/habilitation plans using a person centered methodology
- Staff training (for all those working within the setting) to support privacy and privacy choices
- Train staff responsible for the writing and coordination of service/habilitation plans

Train individuals supported on their rights, how to make informed choices and how to self-advocate

Train individuals supported on their right to privacy

Train families and/or advocates on the rights of individuals and the right to privacy

Engage and empower direct support professionals to participate in planning process with people they support when desired by the person

Use person centered planning to determine preferences for privacy

Modification to physical environment

Update/Revise policies and procedures applicable to the setting

Train supervisors, administrators, and decision makers within the organization in person-centered organizational practices and coaching

Other, please specify...

Type here

38) Homes/units have entrance doors lockable by the person, with only appropriate staff having keys to doors.

Yes

No

38a) Specify the work plan action items.

Review and revise service/habilitation plans using a person centered methodology

Staff training (for all those working within the setting) to support access, privacy and privacy choices

Train individuals supported on their rights to have locking mechanisms and their right to access the setting and personal space

Train individuals supported on their right to privacy

Train families and/or advocates on the individual's right to have freedom of movement within a setting and to access the setting and personal space

Train families and/or advocates on the rights of individuals and the right to privacy

Engage and empower direct support professionals to participate in planning process with people they support when desired by the person

Use person centered planning to determine personal preferences

Modification to physical environment if needed to include locking mechanism to setting and/or removal of barriers or obstructions that restrict movement within the setting

Update/Revise policies and procedures applicable to the setting to include process to offer individuals locking mechanisms to the setting and freedom of movement and access

Train supervisors, administrators, and decision makers within the organization in person-centered organizational practices and coaching

Other, please specify...

Type here

39) Bedrooms have entrance doors lockable by the person, with only appropriate staff having keys to doors.

Yes

No

39a) Specify the work plan action items.

Review and revise service/habilitation plans using a person centered methodology

- Staff training (for all those working within the setting) to support access, privacy and privacy choices
- Train individuals supported on their rights to have locking mechanisms and their right to access the setting and personal space
- Train individuals supported on their right to privacy
- Train families and/or advocates on the individual's right to have freedom of movement within a setting and to access the setting and personal space
- Train families and/or advocates on the rights of individuals and the right to privacy
- Engage and empower direct support professionals to participate in planning process with people they support when desired by the person
- Use person centered planning to determine personal preferences
- Modification to physical environment if needed to include locking mechanism to bedroom and/or removal of barriers or obstructions that restrict movement within the setting
- Update/Revise policies and procedures applicable to the setting to include process to offer individuals locking mechanisms to the bedroom and freedom of movement and access
- Train supervisors, administrators, and decision makers within the organization in person-centered organizational practices and coaching
- Other, please specify...

40) Each person selected the residential setting from among setting options including non-disability specific settings.

Yes No

40a) Specify the work plan action item.

- Train staff on how to help people make informed choices
- Train individuals supported on their rights and how to make informed choices
- Train families and/or advocates on the rights of individuals and how to make informed choices
- Train people supported to self advocate
- Train supervisors, administrators, and decision makers within the organization in person-centered organizational practices and coaching
- Update/revise policies and procedures
- Other, please specify...

41) Except in cases of documented and appropriate rights modifications, each person has access to food at anytime.

Yes No

41a) Specify the work plan action item.

- Person centered planning to determine preferences and desired outcomes for when, where, and with whom to eat
- Staff training (for all those working within the setting)
- Train individuals supported on their rights
- Train families and/or advocates on the rights of individuals

Increases and/or changes in staffing patterns

Modification to physical environment

Train supervisors, administrators, and decision makers within the organization in person-centered organizational practices and coaching

Other, please specify...

Type here

42) Each person has the freedom and support to control their own schedules and activities.

Yes No

42a) Specify the work plan action item.

Train staff on techniques used to facilitate and support each person to participate in scheduled/unscheduled community activities in the same manner as people not receiving HCBS (e.g. shop, attend religious services, appointments, lunch/activities with family and friends, etc.) in the community as they choose

Individualize supports according to each person's interests and preferences

Train staff in how to work with people to maximize full access to the community

Train individuals supported on their rights to have full access to the community and how to make informed choices in this area

Train families and/or advocates on the rights of the individual to have full access to the community and how to make informed choices in this area

Provide access to the materials and supports that will assist people in gaining competencies and participating fully in preferred activities

Reorganize and/or reallocate and/or increase staffing resources to ensure sufficient staffing to support full access to the community based on each person's needs and preferences

Reorganize and/or reallocate and/or increase transportation resources to ensure sufficient transportation to facilitate and support full access to the community

Increase in access to/options for technology (i.e. installation of another phone line, purchase of a computer/cell phone, access to the Internet) to facilitate and support full access to the community for each person

Develop and implement strategies to engage natural resources to maximize full access to the community for each person

Develop and implement strategies to engage the community for community inclusion options for each person supported

Develop and implement strategies to encourage spontaneity in choice of activities

Develop and implement actions that help connect people with relatives, friends, community members, etc.:

Update/Revise policies and procedures applicable to the setting

Train supervisors, administrators, and decision makers within the organization in person-centered organizational practices and coaching

Other, please specify...

Type here

43) Except in cases of documented and appropriate rights modifications, each person is able to have visitors of their choosing at any time.

Yes No

43a) Specify the work plan action item.

- Use of a Person Centered Planning methodology to determine preferences and choice of visitors including times
- Staff training (for all those working within the setting) to support visitations
- Train individuals supported on their right to have visitors at any time
- Train families and/or advocates on the rights of individuals to have visitors at any time
- Modification to physical environment if needed to provide private space for visits
- Increase in access to/options for technology (i.e. installation of another phone line, purchase of a computer/cell phone, access to the internet) to facilitate arranging visits if preferred
- Update/Revise policies and procedures applicable to the setting for visitors at the setting
- Train supervisors, administrators, and decision makers within the organization in person-centered organizational practices and coaching
- Other, please specify...

44) The setting is physically accessible to each person.

Yes No

44a) Specify work plan action item.

- Use of a Person Centered Planning methodology that identifies the individuals needs and preferences for modifications to support full utilization of the setting including creative adaptive solutions
- Train staff to support modifications
- Train individuals supported on their right for full utilization of the setting
- Train families and/or advocates on the rights of individuals to full utilization of the setting
- Increases and/or changes in staffing patterns
- Reorganize and/or reallocate staffing resources to ensure sufficient staffing needs are met in order to support full utilization of the setting
- Modification to physical environment to support full utilization of the setting including creative adaptive solutions
- Increase in access to/options for technology if needed to support full access and utilization
- Other, please specify...

45) Each person has the freedom to furnish and decorate their sleeping or living units within the lease or other agreement.

Yes No

45a) Specify work plan action item.

- Train setting staff on person centered planning rights, how to help people make informed choices and honoring choices
- Train staff responsible for the writing and coordination of service/habilitation plans
- Train individuals supported on their rights, how to make informed choices and how to self-advocate
- Train families and/or advocates on the rights of individuals and how to make informed choices
- Increase access to activities and options that are of interest to people supported

Update/Revise policies and procedures applicable to the setting

Train supervisors, administrators, and decision makers within the organization in person-centered organizational practices and coaching

Implement/develop a lease agreement for people served in the setting

Use of a Person-Centered Planning methodology to determine choice and preferences

Other, please specify...

Type here

46) Each person has a legally enforceable agreement for the unit or dwelling where the individual resides that affords eviction protections and appeal rights.

Yes

No

46a) Specify a work plan action item.

Train individuals supported on their rights

Train families and/or advocates on the rights of individuals

Update/Revise policies and procedures applicable to the setting

Implement/develop a lease agreement for people served in the setting

Train supervisors, administrators, and decision makers within the organization in person-centered organizational practices and coaching

Other, please specify...

Type here

Non-Residential Settings

The following questions are only pertinent for Self-Reports completed for non-residential settings

47) The setting affords a variety of meaningful non-work activities that are responsive to the goals, interests and needs of each person. The physical environment supports a variety of peoples' goals and needs (for example, the setting provides indoor and outdoor gathering spaces; the setting provides for larger group activities as well as solitary activities; the setting provides for stimulating as well as calming activities).

Yes No

47a) Specify the work plan action item.

- Review and revise service/habilitation plans using a person centered methodology
- Train staff on how to help people make informed choices and how to work with people to maximize full access to the community
- Train staff on activities and resources and how to help people choose and experience new things
- Train individuals supported on their rights and how to make informed choices and to self-advocate
- Train families and/or advocates on the rights of individuals to make informed choices and on options available for meaningful activities
- Individualize supports according to each person's interests and preferences
- Provide access to the materials and supports that will assist people in gaining competencies and participating fully in preferred activities
- Reorganize and/or reallocate staffing resources to help facilitate and support people's choice of meaningful activities and to help support people's informed choices
- Increase in access to/options for technology (i.e. installation of another phone line, purchase of a computer/cell phone, and access to the internet)
- Develop and implement strategies to encourage spontaneity in choice of activities
- Develop and implement strategies to engage natural resources for people supported in the setting
- Develop and implement strategies to engage the community for community inclusion options for people supported
- Update/Revise policies and procedures applicable to the setting
- Train supervisors, administrators, and decision makers within the organization in person-centered organizational practices and coaching
- Other, please specify...

48) The setting provides information on each person's rights.

Yes No

48a) Specify the work plan action item.

- Train individuals supported on their rights and how to make informed choices and to self-advocate
- Train families and/or advocates on the rights of individuals
- Train staff on the rights of individuals and best practices in distributing this information

Update/Revise policies and procedures applicable to the setting

Train supervisors, administrators, and decision makers within the organization in person-centered organizational practices and coaching

Develop materials to assist people in understanding their rights

Other, please specify...

Type here

49) The setting affords opportunities for each person to have knowledge of or access to information regarding age-appropriate activities including competitive work, shopping, attending religious services, medical appointments, dining out, etc. outside of the setting, and who in the setting will facilitate and support access to these activities.

Yes No

49a) Specify the work plan action item.

Review and revise service/habilitation plans using a person centered methodology

Train staff on how to help people make informed choices, dignity of risk and positive safeguarding, and how to work with people to maximize full access to the community

Train staff on activities and resources and how to help people choose and experience new things

Train individuals supported on their rights and how to make informed choices, their right to have dignity of risk, and how to address his/her own personal risk factors

Train families and/or advocates on the rights of individuals and on the rights of the individual to make informed choices and have dignity of risk

Train families and/or advocates on options available for meaningful activities

Develop and implement strategies to engage the community for community inclusion options for people supported

Update/Revise policies and procedures applicable to the setting

Train supervisors, administrators, and decision makers within the organization in person-centered organizational practices and coaching

Provide access to the materials and supports that will assist people in gaining competencies and participating fully in preferred activities

Other, please specify...

Type here

50) Each person chose the setting among other setting options. Setting options offered include non-disability-specific settings, such as competitive employment in an integrated public setting, volunteering in the community, or engaging in general non-disabled community activities such as those available at a YMCA.

Yes No

50a) Specify the work plan action item.

Review and revise service/habilitation plans using a person centered methodology

Train setting staff on person centered planning rights, how to help people make informed choices and honoring choices

Train staff responsible for the writing and coordination of service/habilitation plans

Train individuals supported on their rights, how to make informed choices and how to self-advocate

Train families and/or advocates on the rights of individuals and how to make informed choices

Develop and implement strategies to engage the community for community inclusion options for people supported

- Update/Revise policies and procedures applicable to the setting
- Train supervisors, administrators, and decision makers within the organization in person-centered organizational practices and coaching
- Provide access to the materials and supports that will assist people in gaining competencies and participating fully in preferred activities
- Other, please specify...

51) The setting allows the opportunity for each person to choose to combine more than one service delivery setting or type of HCBS in any given day/week (e.g. combine day habilitation with community habilitation).

Yes
 No

51a) Specify the work plan action item.

- Review and revise service/habilitation plans using a person centered methodology
- Train setting staff on person centered planning rights, how to help people make informed choices and honoring choices
- Train staff responsible for the writing and coordination of service/habilitation plans
- Train individuals supported on their rights, how to make informed choices and how to self-advocate
- Train families and/or advocates on the rights of individuals and how to make informed choices
- Update/Revise policies and procedures applicable to the setting
- Train supervisors, administrators, and decision makers within the organization in person-centered organizational practices and coaching
- Reorganize and/or reallocate and/or increase staffing resources to ensure sufficient staffing to support full access to the community based on each person's needs and preferences
- Other, please specify...

52) Each person is afforded opportunities to choose with whom to do activities in the setting or outside the setting (i.e., people are not assigned only to be with a certain group of people).

Yes
 No

52a) Specify the work plan action item.

- Train staff on how to facilitate and support individualized options that are meaningful to each person
- Implement strategies and processes to learn about what is meaningful to each person and facilitate these activities and corresponding needed supports
- Reorganize and/or reallocate and/or increase staffing resources to help facilitate and support activities that are meaningful to each person
- Reorganize and/or reallocate and/or increase transportation resources to help facilitate individualized activities meaningful to each person
- Train individuals supported on their rights
- Train families and/or advocates on the rights of the individual
- Develop and implement strategies to engage natural resources for people supported in the setting to include relationships outside the setting
- Develop and implement strategies to engage the community for community inclusion options for people supported
- Train supervisors, administrators, and decision makers within the organization in person-centered organizational practices and coaching

Other, please specify...

Type here

F. Work Plan:

Question is required

Please attach your work plan. Utilize naming convention: agency-OC#-wp (ex. opwdd-12345678-wp).

Ensure the work plan addresses each area within this survey that is not yet compliant. Even one response of "No" indicates that a work plan is needed. Also note that any HCBS setting standard that DQI surveyors identify as "Not Met" during the survey cycle beginning October 1st, 2016 will require corresponding work plan action items no later than 20 days after the DQI survey. **Revised/amended work plans should be e-mailed to heightened.scrutiny@opwdd.ny.gov. Include agency name, OC# of the setting, and site address for the revised/amended work plan in the email subject line.**

Work Plan:

Choose a file to upload

Choose File No file selected

G. NARRATIVE INFORMATION THAT DEMONSTRATES HOW THE SETTING IS HOME AND COMMUNITY-BASED AND OVERCOMES THE PRESUMPTION THAT IT IS INSTITUTIONAL AND/OR ISOLATING:

In your response, consider how the setting provides full access for EACH PERSON to the broader community including opportunities to seek employment, 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 not receiving HCBS. Additionally, agencies should provide evidence demonstrating that there is little or no interconnectedness of the administrative and fiscal operations of facilities that provide inpatient treatment OR settings located on the grounds or immediately adjacent to a public institution. Also focus on how the setting ensures HCBS setting compliance.

For settings that are in a publically or privately-owned facility that provides inpatient treatment OR in a building located on the grounds of or immediately adjacent to a public institution, please provide information and documentation showing that the HCBS setting is not operationally interrelated with the facility setting, such as:

- Interconnectedness between the facility and the setting in question, including administrative or financial interconnectedness, does not exist or is minimal;
- To the extent any facility staff are assigned occasionally or on a limited basis to support or back up the HCBS staff, the facility staff are cross-trained to meet the same qualifications as the HCBS staff;
- Participants in the setting in question do not have to rely primarily on transportation or other services provided by the facility setting, to the exclusion of other options;
- The proposed HCBS setting and facility have separate entrances and signage;
- The setting is integrated in the community to the extent that a person or persons without disabilities in the same community would consider it a part of their community and would not associate the setting with the provision of services to persons with disabilities.

1) Provider Response:

Type here

OPTIONAL: If the space provided above is not adequate, include additional information in an uploaded format. Additional information may also include how EACH person within the setting is provided access to the broader community based on their personal choices. If multiple documents are required for upload, please consolidate them into 1 format that can be uploaded. When including an attachment here, please utilize naming convention as follows:

agency-OC#-addinfo
(ex. opwdd-12345678-addinfo)

Optional Upload:

Additional Information

Choose a file to upload

Choose File No file selected

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Click the "Submit" button below to submit your survey. Do not "X" out of your survey until you submit your survey.

Thank you {{ Name }} for completing this important survey! If you need to change your responses after you submit your survey, please contact Casey Downey at (518) 486-9863 or e-mail heightened.scrutiny@opwcd.ny.gov

On the next page, you will be allowed to download and print your survey. Please download and print this survey and keep on site and accessible. Thank you.

Appendix B-1: Instructions and Content Guidance for OPWDD's HCBS Settings Heightened Scrutiny Self-Report

GENERAL INFORMATION AND INSTRUCTIONS:

1. ALL HCBS Waiver providers must complete Section A. "Agency Information".
2. The HCBS Waiver provider must self-identify which residential and non-residential settings (excluding sheltered workshops that must close/convert) trigger heightened scrutiny and then complete 1 questionnaire per each of these settings (sections B-G). Providers must include:
 - Settings deemed heightened scrutiny by DQI surveyors via exit conference form or letter;

AND:

 - Settings not yet assessed by DQI where the provider self-identifies the site as requiring heightened scrutiny;

AND:

 - Settings the provider self-identifies that they believe should have been deemed heightened scrutiny by DQI surveyors but was not.

OPWDD will later reconcile DQI's list of heightened scrutiny settings with questionnaires received from providers to ensure all heightened scrutiny sites have been identified.

Information submitted comprises the Heightened Scrutiny "Evidence Package" and will be subject to validation by New York State. The Evidence Package may be made publically available during the required public input process and therefore providers should not include names or any other personal/confidential information protected by Federal or State Law on people supported through the setting.

In addition to the questionnaire, the following information is required for the Evidence Package and will be uploaded to FluidSurveys.

3. **SITE MAP (Section D):** A site map of the location of the heightened scrutiny setting must be uploaded to FluidSurveys. Site maps can be obtained at <http://maps.google.com> (once there click the satellite button). It is recommended that you copy and paste the link into a separate browser as you may be redirected away from this survey. Identify all settings on the site map by agency, OC#, address, and certified capacity. Identify the settings that are collocated and/or clustered with the heightened scrutiny setting as well by agency, OC#, address, and certified capacity. Other locations should also be identified such as private homes, grocery stores, parks, banks, etc. **Before uploading, save the image with the following naming convention for the specific heightened scrutiny setting that is the subject of the survey: agency-OC#-sitemap.**
4. **PICTURES (Section D):** Upload to FluidSurveys up to 5 pictures that depict the setting and surrounding neighborhood. Do not include pictures of people you support. **Before uploading, save the image with the following naming conventions: Agency-OC#-pic_of_ (e.g., OPWDD-12345678-pic1of5).**

Appendix B-1: Instructions and Content Guidance for OPWDD's HCBS Settings Heightened Scrutiny Self-Report

- QUESTIONNAIRE (Section E-1 and E-2):** Section E-1 is to be completed for all settings that triggered heightened scrutiny. These questions are to be answered for all settings where waiver services are delivered. Questions in Section E-2 are specific to the type of setting (i.e., residential or day setting). Select "residential" for an assessment being completed for a residential setting and "non-residential" for an assessment being completed for a non-residential setting.
- WORK PLAN (Section F):** A work plan must be provided for any heightened scrutiny setting that is not in full compliance with the HCBS settings rules. Even one response of "No" indicates that a work plan is needed. Upload to FluidSurveys the setting's work plan that shows how full compliance with the HCBS settings requirements and standards will be achieved no later than October 1, 2018. **Before uploading, save the work plan with the following naming convention: Agency-OC#-wp.**
- NARRATIVE (SECTION G):** Include narrative information that clearly demonstrates how the setting meets the Home and Community Based settings requirements and overcomes the presumption that it is institutional and/or isolating. Focus the response on how the setting provides full access for EACH PERSON served through the setting to the broader community including opportunities to seek employment, 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 not receiving HCBS services. Additionally, agencies should provide evidence demonstrating that there is little or no interconnectedness of the administrative and fiscal operations of facilities that provide inpatient treatment OR settings located on the grounds or immediately adjacent to a public institution.

If the space provided in the questionnaire is not sufficient, consolidate all additional information into one file/format and upload to FluidSurveys. **Before uploading, save the additional information with the following naming convention: Agency-OC#-addinfo.**

INSTRUCTIONS ON USING FLUIDSURVEYS

It is recommended that you copy and paste the links below into a separate browser as you may be redirected away from this survey.

GATHER INFORMATION NEEDED:

It is recommended that before proceeding with the electronic survey in FluidSurveys, you gather all the necessary information on the settings that trigger heightened scrutiny as defined by the October 2015 Provider Communication Memo on heightened scrutiny that can be found at: <http://opwdd.ny.gov/node/6252>.

Information needed on the agency and each setting includes, but is not limited to, the following:

- Agency Corporate ID, Agency contact person, and contact information
- Agency accreditations if any and whether the agency is designated as a full COMPASS agency
- Operating Certificate numbers for each HS setting
- Contact person and contact information for each HS setting should additional information be needed
- Addresses for each HS setting and county where each HS setting is located
- Certified capacity of each HS setting

Appendix B-1: Instructions and Content Guidance for OPWDD's HCBS Settings Heightened Scrutiny Self-Report

- Number of people served through each HS setting
- The specific HS triggers for each HS setting (see <http://www.opwdd.ny.gov/node/6252>)
- Whether the setting is collocated and/or clustered with other settings and the Agency, OC#'s, certified capacities of the other settings
- Characteristics of each HS setting (e.g., whether public transportation is available, building type, location type, etc.)
- HS Setting Site Map: Site maps can be obtained at <http://maps.google.com> (once there click the satellite button)
- HS Setting pictures
- HS Setting Work Plan (an optional template can be found on the HCBS Settings Toolkit at: http://www.opwdd.ny.gov/opwdd_services_supports/HCBS/hcbs-settings-toolkit under "Heightened Scrutiny")

USE BACK OR NEXT BUTTON: When moving through the survey on-line, if you need to go back or forward to a page, use the "Back" or "Next" button on the bottom of the survey page.

SAVE AND CONTINUE OPTION: Within this survey, you are given the opportunity to "Save and Continue" (see button at the bottom of the survey page). This will allow you to save your survey and to continue your survey at a later date. When you click "Save and Continue" you will see a URL that you can bookmark to continue the survey later. **We highly recommend that you bookmark this URL so that you can continue your survey at a later date.** Or, you can enter your email address and click "Email me this link". FluidSurveys will then automatically email you the survey link (which you also have bookmarked as mentioned above) for you to use to continue where you left off. This email will come from heightened.scrutiny@opwdd.ny.gov via FluidSurveys. NOTE: Please be sure to check your spam and junk folders if you do not receive an automatic email from FluidSurveys. OPWDD is not able to generate another "Save and Continue" email if the "Save and Continue" email is not automatically received due to being blocked by your agency. **Should you not receive your "Save and Continue" email from Fluid and do not bookmark your URL, you will have to restart your survey from the beginning.**

DONE BUTTON, SUBMITTING THE SURVEY AND DOWNLOADING IT: Before you click the "DONE" button at the end of each survey, please review your answers as you will not be able to change the responses to your survey unless you contact Casey Downey at 518-486-9863 or email heightened.scrutiny@opwdd.ny.gov. Once you click the "Submit" button at the end of the survey, you will have the chance to download your survey response.

STARTING ANOTHER SURVEY: To start another survey for a particular heightened scrutiny setting, you will have to type the survey link back into your browser to take the survey again by using the link:
<http://opwddnygov.fluidsurveys.com/s/HeightenedScrutiny/>

SECTION A:

AGENCY INFORMATION

All agencies, regardless of heightened scrutiny status must complete Section A. If the agency believes there are no settings under their auspices that are subject to a HS review, they do not need to complete the rest of the Self-Report.

If agencies have multiple settings that trigger Heightened Scrutiny, one survey must be completed for each Heightened Scrutiny site. Section A only has to be completed once in its entirety. For each subsequent survey completed, only questions 1, 2, 2a, and 5 are required within Section A.

Appendix B-1: Instructions and Content Guidance for OPWDD's HCBS Settings Heightened Scrutiny Self-Report

All questions on the Self-Report must have a response. For agencies that have more than 1 setting which has triggered HS, the answer to question number 4 in Section A will be the same on each individual Self-Report.

SECTION B:

DEMOGRAPHIC INFORMATION

Information in this section is setting specific. Ensure all questions are completed and accurate. Misinformation could result in the inability to submit information to CMS for final Heightened Scrutiny determination.

SECTION C:

HEIGHTENED SCRUTINY TRIGGERS

There are 6 Heightened Scrutiny Triggers which are located in Section C of the Self-Report. Per CMS HCBS Settings regulations, 441.301 (c) (5) Home and Community-Based Settings do **not** include the following:

- (i) a nursing facility,
 - (ii) an institution for mental diseases,
 - (iii) an intermediate care facility for individuals with intellectual disabilities,
 - (iv) a hospital, and/or
 - (v) any other locations that have qualities of an institutional setting, as determined by the secretary.
- Any setting that is located in a building that is also publicly or privately operated facility that provides inpatient institutional treatment, or
 - In a building on the grounds of, or *immediately adjacent* to, a public institution, or
 - **Any other setting that has the effect of isolating individuals receiving Medicaid HCBS from the broader community of individuals not receiving Medicaid HCBS** will be presumed to be a setting that has qualities of an institution, unless the Secretary determines *through heightened scrutiny*, based on information presented by the State or other parties, that the setting does not have the qualities of an institution and that the setting does have qualities of home and community-based settings.

According to the regulations, CMS “presumes” certain settings (as described in 441.301(c) (5) (v) above) have institutional qualities because these settings tend to isolate and segregate persons with disabilities, **and as a result, cannot be considered HCBS settings.** (A presumption, however, is not the last word. A state can attempt to overcome a presumption. In settings with such a risk of isolation, HCBS will be allowed only if the state can show that the setting does not have institutional qualities and instead has HCBS qualities.)¹

A residence that is located **on the grounds** of the Developmental Center campus property or in a facility that provides inpatient institutional treatment is not considered to be a Home and Community Based Setting according to CMS regulations, without a heightened scrutiny process.

NOTE: A private campus setting is automatically subject to Heightened Scrutiny.

¹ Just Like Home, An Advocates Guide to State Transitions

Appendix B-1: Instructions and Content Guidance for OPWDD's HCBS Settings Heightened Scrutiny Self-Report

DEFINITIONS

Immediately adjacent: The setting is next to and abuts the public institution.

Public Institution: A public institution is an institution that is the responsibility of a governmental entity over which a governmental entity exercises control. OPWDD developmental centers, OMH psychiatric centers, institutions for mental diseases, prisons and addiction treatment centers and state run nursing homes are considered public institutions. A former developmental center (i.e. one that has been closed) is also considered a public institution. A public institution does not include: a medical institution (i.e. hospital including a VA hospital); child care institution; or publically-operated community residences, universities, libraries, and public schools.

Campus - The setting is situated where there are multiple group homes and/or facilities only for people who have disabilities and/or receive Medicaid HCBS **on the same provider's property** (e.g., a private community, campus or village specifically for people with I/DD and/or people who receive Medicaid HCBS).

Section C – Question 6

Question 6 is triggered for HCBS non-compliance when a setting is not necessarily isolating by location, but by appearance and setting practices. Isolation can occur due to multiple factors but most frequently appears to occur when person-centered planning is either not present or not effective. If community integration is **not** meaningful to the individual, the activity could still be considered isolating for a person. Additionally, large group outings can also create social isolation while in the community. Careful consideration of the needs, wants, and desires of **EACH** person at the setting is essential to ensuring full integration in the community to the degree chosen by the person. Without various person-centered elements being present in both the planning process and during the delivery of services, isolation even without intent could occur.

SECTION D:

SETTING LOCATION

In this section, demographic information on the setting that triggered Heightened Scrutiny is collected. This section includes site specific demographic information. **Site maps are required for all settings that have triggered heightened scrutiny.**

SITE MAP: A site map of the location of the heightened scrutiny setting must be uploaded to FluidSurveys. Site maps can be obtained at <http://maps.google.com> (once there click the satellite button). It is recommended that you copy and paste the link into a separate browser as you may be redirected away from this survey. Identify all settings on the site map by agency, OC#, address, and certified capacity. Identify the settings that are collocated and/or clustered with the heightened scrutiny setting as well by agency, OC#, address, and certified capacity. Other locations should also be identified such as private homes, grocery stores, parks, banks, etc. **Before uploading, save the image with the following naming convention for the specific heightened scrutiny setting that is the subject of the survey: agency-OC#-sitemap.**

Also within this section an agency may upload up to 5 pictures to depict the setting and surrounding area to assist in the heightened scrutiny review process. **At least 1 picture of the setting is required.** Do not include pictures or identifying information of program participants.

Appendix B-1: Instructions and Content Guidance for OPWDD's HCBS Settings Heightened Scrutiny Self-Report

SECTION E-1:

ANSWER THE FOLLOWING BASED ON PRACTICES AND POLICIES

DEFINITIONS

Person-Centered Planning: 14 NYCRR Section 636-1.2 Person-Centered Planning Process²

Informed Choice: "Guidance and Instructions for OPWDD'S HCBS Settings Assessment", October 2014, pg. 9³

HOW TO COMPLETE THIS SECTION

All settings triggered for heightened scrutiny must complete every question within section E-1. Please read each statement carefully to ensure all parts of the statement are understood as some may have multiple parts.

"Currently implemented and reflected in policies and procedures" column:

FOR "YES" ANSWERS

- If the statement is currently implemented **AND** reflected in policies/procedures, select "Yes". When "yes" is selected, that question is done and you may go on to the next question

FOR "NO" ANSWERS

- **A work plan action item which will bring that requirement into compliance by 10/1/18 is expected for all requirements that are not in full compliance.**
- For all requirements that are not currently reflected in policies/procedures, a work plan action item(s) must be selected that will remediate that area of non-compliance. **Please select all that apply.** If none of the action items are applicable, please select "Other" and provide a brief explanation. The work plan action items from FluidSurveys should also align with the agencies work plan.
- DQI surveyors will be validating setting evidence and work plans during the on-site review beginning Fall 2016.

QUESTION GUIDANCE

Questions within Section E-1 can be clarified utilizing the "Guidance and Instructions for OPWDD's HCBS Settings Assessment" that can be found at <http://www.opwdd.ny.gov/sites/default/files/documents/HEIGHTENEDSCRUTINY.pdf>. Use the following reference chart as a guide for clarification:

² <http://www.opwdd.ny.gov/sites/default/files/documents/person-centered-planning-text.pdf>

³ <http://www.opwdd.ny.gov/sites/default/files/documents/HEIGHTENEDSCRUTINY.pdf>

Appendix B-1: Instructions and Content Guidance for OPWDD's HCBS Settings Heightened Scrutiny Self-Report

Self-Report Question	Annotated Guidance	HCBS & HS Review Question	HCBS & HS Review Guidance Page
http://www.opwdd.ny.gov/sites/default/files/documents/HEIGHTENEDSCRUTINY.pdf			
PERSON CENTERED HABILITATION PLANNING AND SERVICE DELIVERY			
E-1: Peoples' Habilitation Plans are developed and updated using a person centered planning process that reflects their dreams, interests, preferences, strengths, capacities, and informed choices; consequently their Plans drive activities and supports that are meaningful to each person.	People are offered and provided concrete and varied life experiences to make informed and meaningful choices . The Hab Plan is reflective of current desires and needs and people are afforded the support to participate in activities that are meaningful to them. Planning also includes acknowledging what training and skills are needed for the person to be able to access their community interests with more independence. The person's planning focuses on positive safeguarding when possible and may not necessarily result in risk elimination.	6-1; 6-2	45-47; 47-49
E-2: People make informed choices related to home, work, relationships, recreational activities, social roles, etc.	People are offered and provided with concrete and varied life experiences to make informed and meaningful choices . Social support networks of the person's choosing should be present. Also, opportunities for creative alternatives and flexible approaches that can meet the person's needs and expectations.	6-1	45-47
E-3: Each person's Habilitation Plans incorporates the meaningful and individualized community based activities that the person wants including desired frequency and supports needed.	Hab plans or alternative documentation reflects community related interests and priorities that are important to the person, including desired frequency and supports needed for the person to engage in these activities. For example, Sam would like to attend the senior center in Albany at least once per week on Saturday mornings to participate in playing checkers. Sam needs one-to-one staff support while at the senior center to ensure appropriate social interaction with other players; And/or ; Habilitation plans and documentation reflect related activities that will enhance the ability of people to participate in community activities and interests (such as training in using public transportation, training on becoming more independent with finances, etc. All individuals are to have full access to the community to the degree that he/she wants regardless of disability.	6-2	47-49
E-4: Each person's Plan reflects the risk factors and the positive safeguarding measures in place to minimize them including	The person's planning focuses on positive safeguarding and does not necessarily result in risk elimination. This results in assisting the person to choose options that will help keep them as safe as	6-2	47-49

Appendix B-1: Instructions and Content Guidance for OPWDD’s HCBS Settings Heightened Scrutiny Self-Report

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individualized back up plans and strategies when needed (that contribute to the person’s ability to engage in meaningful activities).	possible and manage the challenges and associated risks inherent in a community integrated life. Through this dialogue, it is also helpful to consider the consequences to the individual of not taking the risk of enhanced community participation.		
E-5: Each person’s Plan reflects cultural considerations and is written in plain person-centered language that is understandable to him/her (e.g., written in preferred language including Braille if necessary).	The habilitation plan, IPOP, and other corresponding documentation is written using People-First Language. People-First Language emphasizes the person, not the disability. By placing the person first, the disability is no longer the primary, defining characteristic for a person. Please also note: There may also be instances where the values and beliefs of family members of a person may conflict with the person’s own beliefs. It is important that the program and staff ultimately respect the wishes of the person, and the wishes of the person should be their primary concern.	3-9; 6-3	22-23; 50
E-6: Each person directs their planning process and chooses who participates. The planning process is timely and occurs in the location and at a time that is convenient for each person. Each person is made aware that he/she may request a plan change. Plan changes requested are made within reasonable time frames.	True person-centered planning is person-driven, guided, and shaped by the person at the center of the plan. The program cannot be quick to make decisions for people without engaging them and ensuring they have an active role in making their own choices to the highest degree possible. Meetings occur at times and locations that are convenient for the person and at times of their choice. There is evidence that the person has been made aware that they can request a plan change at any time and the person knows how to. Requests for changes are done within a reasonable time frame.	3-12; 6-1	25-26; 45-47
E-7: The planning process includes strategies for solving conflicts or disagreements and includes clear conflict of interest guidelines for all involved.	A person centered planning process is required. The provider must have strategies that address conflicts or disagreements in the planning process. For example, should family members not agree with the choice of the person, the provider agency must have a process in addressing the conflict.	Person-Centered Planning Regulations – 14 NYCRR Part 636 ⁴	
E-8: Each person’s supports are individualized and do not rely	Staff demonstrate a willingness to offer choice and accommodate individualized preferences or	3-8	20-22

⁴ <http://www.opwdd.ny.gov/sites/default/files/documents/person-centered-planning-text.pdf>

Appendix B-1: Instructions and Content Guidance for OPWDD's HCBS Settings Heightened Scrutiny Self-Report

Self-Report Question	Annotated Guidance	HCBS & HS Review Question	HCBS & HS Review Guidance Page
http://www.opwdd.ny.gov/sites/default/files/documents/HEIGHTENEDSCRUTINY.pdf			
solely on activities in large groups.	requests regarding daily activities. Staffing is sufficient and flexible to accommodate, optimize, and support individualized preferences or requests. People are aware that they may exercise their right to refuse to participate in an activity if they choose.		
E-9: Opportunities for decision making are part of each person's everyday routine.	There is evidence that the program actively promotes individual choice, autonomy, and decision-making. The program is <u>not</u> quick to make decisions for people without engaging them and ensuring that they have an active role in making their own choices to the highest degree possible.	3-12	25-26
E-10: When a person expresses dissatisfaction with supports, services, living situation, roommate, etc. setting staff supports the person to make life and situational changes as he/she chooses.	The program has a clear and timely process and overall system established to addresses instances of dissatisfaction. Any issues or concerns people may have with the goals, content, and overall focus of their habilitation plans should be addressed by the program. If a person is not satisfied, other options whether or not they are currently available or need to be developed and arranged should be presented to the individual.	3-1; 6-4	13; 51
FULL ACCESS TO THE COMMUNITY			
E-11: Each person is encouraged and supported to have full access to the broader community based on his/her interests/preferences/priorities for meaningful activities to the same degree as others in the community.	Supports and services do not segregate or isolate people from their own neighborhoods. People should be encouraged and supported to interact with others who do not have disabilities. People participate in scheduled and unscheduled activities. The service plan identifies the person's choices for meaningful community inclusion activities and the desired frequency/duration of these activities.	2-1	8-10
E-12: Setting staff provides ongoing/regular options for community integration and utilization in lieu of on-site services.	On-site services do not take the place of appropriate person-centered and individualized planning to ensure full community access to the community for all persons based on their needs, preferences, and interests despite their level ability.	2-1;2-2;2-3	8-12
E-13: Except in cases of documented and appropriate rights modifications, each person is able to come and go from the setting at any time.	There are not restrictions based on blanket rules of a person's ability to come and go from a setting (i.e., Everyone has to be home by 6). Any modifications to an individual's rights are individualized based on person-centered planning and documented in the person-centered service plan including required modification elements.	3-8; 4-6	20-22;32-35

Appendix B-1: Instructions and Content Guidance for OPWDD's HCBS Settings Heightened Scrutiny Self-Report

Self-Report Question	Annotated Guidance	HCBS & HS Review Question	HCBS & HS Review Guidance Page
http://www.opwdd.ny.gov/sites/default/files/documents/HEIGHTENEDSCRUTINY.pdf			
E-14: Except in cases of documented and appropriate rights modifications, each person in the setting is afforded the degree of community integration desired by the person.	The person's priorities and preferences for community engagement are identified in their written plan and are provided as described. There should be specific and recent examples of these engagements. There are no obstructions that serve to isolate the person and obstacles to access are addressed in a timely manner. People have access both to transportation and staff support to assist in their community integration when desired. Any modifications to an individual's rights are documented in the person-centered service plan.	2-1;2-2;2-3;4-6	8-12;32-35
RIGHTS			
E-15: Except in cases of documented and appropriate rights modifications, each person has access to food and can eat when/where/and with whom they choose (in the same manner as people who do not receive HCBS).	The person has access to food either through storing the food in their room, where they store their personal belongings, getting food from the refrigerator, pantry, and/or being supported, as needed, to obtain food at any time consistent with similar settings for people without disabilities. The staff supports the person to budget, purchase, and store food that they choose so that it is available to the person at any time. People are able to eat their meals at times, locations, and with whom they choose. People are not coerced to come to the table. Routines should be related to schedules, interests, and requests of the people receiving services, rather than staff preference or staff schedules. Any modifications to an individual's rights are documented in the person-centered service plan and include required modification elements.	4-6;4-11;4-12	32-35;39-41
E-16: Personal information is kept private; assistance with personal care is done in private; and each person is afforded privacy in the same manner as people not receiving HCBS (e.g. people knock and receive permission before accessing private space).	Personal information, including diet orders, bowel management, medical appointments, etc., are discreetly available only to relevant staff. Staff assist people with care needs in private. Staff also knock and receives permission before entering the person's space (bedroom/bathroom, etc.). Conversations regarding private issues, be it with the individual or other staff, are not conducted in front of other people.	4-8;4-9	36-38
E-17: Except in cases of documented and appropriate	People are given the choice of when and with whom to interact. There are no blanket rules or	3-12; 4-4; 4-10	25-26; 30-31; 38-39

Appendix B-1: Instructions and Content Guidance for OPWDD's HCBS Settings Heightened Scrutiny Self-Report

Self-Report Question	Annotated Guidance	HCBS & HS Review Question	HCBS & HS Review Guidance Page
http://www.opwdd.ny.gov/sites/default/files/documents/HEIGHTENEDSCRUTINY.pdf			
rights modifications, each person chooses who to interact with and when.	inappropriate rights modifications limiting their ability to this choice. People are provided with opportunities to join community groups and organizations. Any modifications to an individual's rights are documented in the person-centered service plan and include required modification elements.		
E-18: Each person has a means to secure personal belongings.	People have a place and mechanism for securing their personal belongings. This may include keys to a locker or a room. Modifications are provided for people who may need an alternative means of securing belongings that allows them maximum independence. Providing a place to secure belongings "upon request" is not sufficient.	3-4;4-9	16;36-38
E-19: Except in cases of documented and appropriate rights modifications, each person is allowed visitors of their choice at any time.	There are no blanket rules restricting the person from having visitors of their choosing at any time. For residential settings, the person receives encouragement and support from staff to have visitors (such as assistance in scheduling visits). People report that they are satisfied with their ability to receive visitors at any time or there is good evidence that the person has made the decision and is not interested in people visiting at this time, but understands they could if they wanted to. Any modifications to an individual's rights are appropriately documented in the person-centered plan. For non-residential settings, there is evidence of community interaction and visitors being present at regular frequencies. Visitors greet/acknowledge individuals receiving services with familiarity. Visiting hours are unrestricted and the setting encourages interaction with the public. Any modifications to an individual's rights are documented in the person-centered service plan and include required modification elements.	4-6;4-10	32-35;38-39
E-20: Except in cases of documented and appropriate rights modifications, each person accesses the setting and personal space (if applicable) in the same manner as people who	People should have full and independent access to all areas and routine spaces of the setting without restrictions or barriers. People are supported in accessing areas such as the break rooms, kitchens/kitchenettes, laundry, cupboards/closets for supplies, areas where their personal possessions	3-6; 3-7; 4-6	16; 19-20; 32-35

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Self-Report Question	Annotated Guidance	HCBS & HS Review Question	HCBS & HS Review Guidance Page
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do not receive HCBS (e.g., for residential, people have keys to their units and can lock their bedroom doors with only appropriate staff having keys if they so choose and/or alternative means are offered for those who cannot use keys); and each person has freedom of movement within the setting (and are not restricted to one room or designated area).	are stored, and use of appliances consistent with access in similar settings for people who are not disabled. There are no blanket rules that limit or interfere with access for people. People receive keys and/or more independent access when requested. It is inappropriate for a provider to dismiss the option of someone having key/independent access because the facility considers them to be "not capable". The setting provides environmental supports and adaptations to assist people to use and access their environment. The setting should not limit autonomy or create a staff dependent situation in order for the person to exercise their autonomy. Any modifications to an individual's rights are documented in the person-centered service plan and include required modification elements.		
E-21: Except in cases of documented and appropriate rights modifications, each person is permitted to have a personal cell phone, computer, or other device for private communication at any time.	People are permitted to have personal communication devices such as cell phones and computers. People are encouraged and supported to use them for private communication at any time. Any modifications to an individual's rights are appropriately documented in the person-centered plan.	4-6	32-35
E-22: There are no blanket rules, policies, procedures, or practices that limit individual rights, independence, choices, or autonomy.	Examples of "rules" or limiting policies depending upon setting and circumstances: <ul style="list-style-type: none"> • Set times when parts of the setting may be accessed • Phone use times (this includes personal cell phone use when used) • Meal times • Rules regarding when someone may leave the setting • Visitation rules and restrictions The agency does not have unwritten rules or routines that would limit an individual's rights.	4-4	30-31
E-23: Except in cases of documented and appropriate rights modifications, each person is not prohibited from engaging in any legal activity.	The setting does not prohibit the rights of people to participate in legal activities of their choosing. Staff should not restrict or limit choices based on their value judgements or beliefs. Provider policies and procedures or rules do not bar people's engagement	4-5; 4-6	32-35

Appendix B-1: Instructions and Content Guidance for OPWDD's HCBS Settings Heightened Scrutiny Self-Report

Self-Report Question	Annotated Guidance	HCBS & HS Review Question	HCBS & HS Review Guidance Page
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	in legal activities. Any modifications to an individual's rights are documented in the person-centered service plan and include required modification elements.		
E-24: Except in cases of documented and appropriate rights modifications, each person has access to and control of their personal resources.	The person is provided needed supports to spend their personal allowance on activities/personal interests/goods that are meaningful to him/her. People have checking or savings accounts with their name and control over the funds. The person has access to their funds when they choose and their funds are available to them in a timely manner. Any modifications to an individual's rights are documented in the person-centered service plan and include required modification elements.	4-6; 4-13	32-35
E-25: Each person is free from coercion, restraint, and inappropriate restrictions and interventions.	All restrictions and interventions are documented in the person-centered service plan (or behavior support plan). When restraints, restrictions, or interventions are present all the required documentation is present in the person's plan.	4-6; 6-1	32-35; 45-47
E-26: Any rights modifications align with requirements including documentation of an individualized and assessed need; justification for the modification; documentation of previous positive and less intrusive methods, collection and review of data, established time limits for periodic review of the modification, and obtaining the informed consent of the person.	<p>Required elements are:</p> <ul style="list-style-type: none"> • Identification of a specific and individualized assessed need; • Documentation of positive interventions and supports used prior; • A clear description of the condition that is directly proportionate to the specific assessed need; • 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; • Informed consent of the individual; • An assurance that the interventions and supports will cause no harm to the individual. 	4-6	32-35
PHYSICAL SETTING			
E-27: Except in cases of documented and appropriate rights modifications, each person	People have access to and are supported to access all areas of the setting including areas where their possessions are stored, use of appliances (i.e.	3-7; 4-6	19-20; 32-35

Appendix B-1: Instructions and Content Guidance for OPWDD's HCBS Settings Heightened Scrutiny Self-Report

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has full unrestricted access to spaces in the setting in the same manner as people who do not receive HCBS (e.g. All bathrooms at the location, break rooms, kitchen with cooking space in the home; laundry in the home, etc.)	microwave to heat up lunch). If needed, equipment is adapted due to a person's physical characteristics. This applies if it is the settings features or operations that lead to dependence. It does not apply if people require staff assistance due to clinical needs that must be addressed with inclusion of access limitations, either temporarily or permanent. Any modifications to an individual's rights are documented in the person-centered service plan and include required modification elements.		
E-28: The setting reflects each person's needs and preferences including the presence of any physical modifications if necessary. For example, for people who need supports to move about the setting as they choose and to fully utilize setting features, the setting provides grab bars, bathroom seats, ramps, etc.	People are supported to function as independently as possible within their environment and/or supported toward independence and/or as needed. If barriers are in place due to the needs of one or a few, the residents who can have free access are accommodated in effective ways (e.g. provided a key, physical barrier is specific only to the person clinically restricted, etc.).	3-7	19-20
E-29: The setting is physically accessible and there are no obstructions such as steps, lips on doorways, narrow hallways, etc. limiting mobility in the setting or if they are present there are environmental adaptations such as a stair lift or elevator to ameliorate the obstruction.	The provider ensures full physical access to the setting. Environmental modifications are present when needed.	3-7	19-20
STAFFING AND COMPETENCIES			
E-30: Paid and unpaid staff receive training and continuing education related to the rights of people receiving services, supporting informed choice and	Support (paid and unpaid) staff have a knowledge of HCBS settings rules. Staff demonstrate through their performance and interactions that they have an understanding of people's rights and how to support	Direct Support Professional Core Competencies ⁵	

⁵ http://www.opwdd.ny.gov/sites/default/files/documents/NYS_Core_Competencies_and_NADSP%20Code_of_Ethics%20-%20Complete_Text.pdf

Appendix B-1: Instructions and Content Guidance for OPWDD's HCBS Settings Heightened Scrutiny Self-Report

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decision making, and the HCBS settings rules.	informed choices and decision making. Training of staff is documented.		
E-31: The setting has implemented DSP competencies and the evaluation process.	Staff are aware of the DSP competencies and demonstrate the competencies in their job performance. The provider has an evaluation process for ensuring implementation of the DSP competencies.	Direct Support Professional Core Competencies	
E-32: There is sufficient staffing and/or resources (e.g., volunteers and natural supports) to address each person's needs and individualized Plan priorities for community inclusion and integration activities outside of the setting.	Staff and the provider agency demonstrate a willingness to offer choices and accommodate individualized preferences or requests regarding activities. Staffing is sufficient and flexible to accommodate, optimize, and support individual choice. There is evidence of planned and unplanned activities for people. People within the setting are not coerced or made to participate in activities that are not of interest to them.	3-8	20-22

SECTION E-2:

ANSWER THE FOLLOWING BASED ON PRACTICES AND POLICIES

Questions in Section E-2 are dependent on the type of setting (i.e. residential or day setting) for which the assessment is being completed. Select "residential" for an assessment being completed for a residential setting and "non-residential" for an assessment being completed for a non-residential setting.

When completing these questions, ensure that the areas being assessed are in place for all people served within the setting.

SECTION F:

WORK PLAN

In this section, providers who have a heightened scrutiny trigger **must attach a work plan** for remediation of aspects of the HCBS rule that were found to be non-compliant. It is **HIGHLY RECOMMENDED** to use the template located on the OPWDD website. It can be found at http://www.opwdd.ny.gov/opwdd_services_supports/HCBS/hcbs-settings-toolkit. Work plans must identify the following:

- Area(s) of non-compliance;
- Milestones that will bring the agency in the non-compliant area into compliance;
- The projected date of compliance; and
- Who is responsible for the remediation.

Appendix B-1: Instructions and Content Guidance for OPWDD's HCBS Settings Heightened Scrutiny Self-Report

All areas of the HCBS rule **MUST** be in compliance by October 1, 2018. This work plan will be validated by OPWDD during the 2016-2017 survey cycle.

Please note: For settings subject to heightened scrutiny, a work plan is required when the setting does not yet meet HCBS settings standards at the time of completion of the heightened scrutiny self-report and/or if DQI surveyors note any requirements as "not met" during the survey cycle beginning October 1, 2016. The work plan submitted initially with FluidSurveys may need to be revised/updated if any HCBS requirement/standard is identified by DQI as "not met" during the October 1, 2016 survey cycle that did not include a corresponding set of action items on the work plan uploaded with FluidSurveys. In this case, the provider of the setting is required to forward an updated work plan to heightened.scrutiny@opwdd.ny.gov no later than 20 business days after the DQI survey visit that includes action items for the standards/requirements that DQI identifies as "not met".

SECTION G:

ADDITIONAL NARRATIVE INFORMATION THAT DEMONSTRATES HOW THE SETTING IS HOME AND COMMUNITY-BASED

Section G gives agencies an opportunity to highlight procedures and practices that demonstrate the setting is Home and Community-Based which may not have been touched upon in other parts of the Self-Report. Responses within this section must reflect how **EACH PERSON** within the setting is supported to have full access to the broader community (do not include personally identifiable information on people supported such as names). Areas to consider would be opportunities to seek employment, work in competitive integrated settings, engage in community life, control of personal resources, and receive services in the community to the same degree of access as people not receiving Medicaid HCBS and other aspects of the HCBS settings rules.

For settings that are in a publically or privately-owned facility that provides inpatient treatment OR in a building located on the grounds of or immediately adjacent to a public institution, please provide information and documentation showing that the HCBS setting is not operationally interrelated with the facility setting, such as:

- Interconnectedness between the facility and the setting in question, including administrative or financial interconnectedness, does not exist or is minimal.
- To the extent any facility staff are assigned occasionally or on a limited basis to support or back up the HCBS staff, the facility staff are cross-trained to meet the same qualifications as the HCBS staff;
- Participants in the setting in question do not have to rely primarily on transportation or other services provided by the facility setting, to the exclusion of other options;
- The proposed HCBS setting and facility have separate entrances and signage;
- The setting is integrated in the community to the extent that a person or persons without disabilities in the same community would consider it a part of their community and would not associate the setting with the provision of services to persons with disabilities.

Agencies may also submit additional information through the Optional Upload function found in this section. If multiple documents are required for upload, please consolidate them into 1 format that can be uploaded. When including an attachment, please utilizing naming convention agency-OC#-addinfo.

Appendix B-1: Instructions and Content Guidance for OPWDD's HCBS Settings Heightened Scrutiny Self-Report

FOR QUESTIONS AND TROUBLESHOOTING CONTACT:

Casey Downey, OPWDD, Program Operations Specialist, 518-486-9863 or email
heightened.scrutiny@opwdd.ny.gov.

Appendix D: Home and Community-Based Services (HCBS) Settings Compliance Work Plan

HCBS Areas to Address:

Section E-1 of the Heightened Scrutiny Self-Assessment

- Person Centered Habilitation Planning and Service Delivery
- Full Access to the Community
- Rights
- Physical Setting
- Staffing Competencies

Section E-2 of the Heightened Scrutiny Self-Assessment

- Residential Only
- Non-Residential Only

Other:

- Include any additional action items that may not be reflected within the rest of the template. This can be done within the sub-sections or in the "Other" sub-section. Include other pages as necessary.

Complete the table below by **describing each activity your agency will take to address the HCBS Settings requirements** in each category for which the setting is not yet compliant. Add additional lines to your plan document as needed to allow for multiple steps under one activity. **Item Numbers align with the standards that are not met on the HCBS Settings Heightened Scrutiny Provider Evidence Questionnaire Self Report.**

BEFORE SUBMITTING, PLEASE ENSURE THE WORK PLAN HAS BEEN SIGNED BY THE AN AUTHORIZED AGENCY REPRESENTATIVE.

Appendix D: Home and Community-Based Services (HCBS) Settings Compliance Work Plan

Compliance Work Plans are to be uploaded with the FluidSurveys HCBS Settings Heightened Scrutiny Provider Questionnaire Self Report.

Future revisions of the Work Plan are to be sent to heightened.scrutiny@opwdd.ny.gov. Providers need to include the agency name, OC# for the Work Plan setting, and address of setting in the email subject line.

Appendix D: Home and Community-Based Services (HCBS) Settings Compliance Work Plan

Item Number	Action Item	Responsible Staff Positions	Progress To Date/Milestones Met as of: _____ (date)	Target Completion Date	Date Completed
1.	Person Centered Habilitation and Service Delivery				<input type="checkbox"/>
2.					<input type="checkbox"/>
3.					<input type="checkbox"/>
4.					<input type="checkbox"/>
5.					<input type="checkbox"/>
6.					<input type="checkbox"/>
7.					<input type="checkbox"/>
8.					<input type="checkbox"/>
9.					<input type="checkbox"/>
10.					<input type="checkbox"/>
PCHS – Other 1.					<input type="checkbox"/>
PCHS – Other 2.					<input type="checkbox"/>

Appendix D: Home and Community-Based Services (HCBS) Settings Compliance Work Plan

Item Number	Action Item	Responsible Staff Positions	Progress To Date/Milestones Met as of: _____ (date)	Target Completion Date	Date Completed
	PCHS – Other 3.				<input type="checkbox"/>
	Full Access to the Community				
11.					<input type="checkbox"/>
12.					<input type="checkbox"/>
13.					<input type="checkbox"/>
14.					<input type="checkbox"/>
	FAC – Other 1.				<input type="checkbox"/>
	FAC – Other 2.				<input type="checkbox"/>
	FAC – Other 3.				<input type="checkbox"/>
	Rights				
15.					<input type="checkbox"/>
16.					<input type="checkbox"/>
17.					<input type="checkbox"/>
18.					<input type="checkbox"/>
19.					<input type="checkbox"/>

Appendix D: Home and Community-Based Services (HCBS) Settings Compliance Work Plan

Item Number	Action Item	Responsible Staff Positions	Progress To Date/Milestones Met as of: _____ (date)	Target Completion Date	Date Completed
20.					<input type="checkbox"/>
21.					<input type="checkbox"/>
22.					<input type="checkbox"/>
23.					<input type="checkbox"/>
24.					<input type="checkbox"/>
25.					<input type="checkbox"/>
26.					<input type="checkbox"/>
R – Other 1.					<input type="checkbox"/>
R – Other 2.					<input type="checkbox"/>
R – Other 3.					<input type="checkbox"/>
Physical Setting					
27.					<input type="checkbox"/>
28.					<input type="checkbox"/>
29.					<input type="checkbox"/>
PS – Other 1.					<input type="checkbox"/>

Appendix D: Home and Community-Based Services (HCBS) Settings Compliance Work Plan

Item Number	Action Item	Responsible Staff Positions	Progress To Date/Milestones Met as of: _____ (date)	Target Completion Date	Date Completed
PS – Other 2.					<input type="checkbox"/>
PS – Other 3.					<input type="checkbox"/>
Staffing and Competencies					
30.					<input type="checkbox"/>
31.					<input type="checkbox"/>
32.					<input type="checkbox"/>
SC – Other 1.					<input type="checkbox"/>
SC – Other 2.					<input type="checkbox"/>
SC – Other 3.					<input type="checkbox"/>
E-2: Residential Only					
33.					<input type="checkbox"/>
34.					<input type="checkbox"/>
35.					<input type="checkbox"/>
36.					<input type="checkbox"/>
38.					<input type="checkbox"/>

Appendix D: Home and Community-Based Services (HCBS) Settings Compliance Work Plan

Item Number	Action Item	Responsible Staff Positions	Progress To Date/Milestones Met as of: _____ (date)	Target Completion Date	Date Completed
39.					<input type="checkbox"/>
40.					<input type="checkbox"/>
41.					<input type="checkbox"/>
42.					<input type="checkbox"/>
43.					<input type="checkbox"/>
44.					<input type="checkbox"/>
45.					<input type="checkbox"/>
46.					<input type="checkbox"/>
E-2: Non-Residential Only					
47.					<input type="checkbox"/>
48.					<input type="checkbox"/>
49.					<input type="checkbox"/>
50.					<input type="checkbox"/>
51.					<input type="checkbox"/>
52.					<input type="checkbox"/>

Appendix D: Home and Community-Based Services (HCBS) Settings Compliance Work Plan

Item Number	Action Item	Responsible Staff Positions	Progress To Date/Milestones Met as of: _____ (date)	Target Completion Date	Date Completed
Other					
53.					<input type="checkbox"/>
54.					<input type="checkbox"/>
55.					<input type="checkbox"/>
56.					<input type="checkbox"/>
57.					<input type="checkbox"/>
58.					<input type="checkbox"/>
59.					<input type="checkbox"/>
60.					<input type="checkbox"/>
61.					<input type="checkbox"/>
62.					<input type="checkbox"/>

Appendix D: Home and Community-Based Services (HCBS) Settings Compliance Work Plan

ATTESTATION

I attest that the information and responses that have been provided for this HCBS Settings Compliance Work Plan are accurate and are reflective of agency policy, site, and service delivery practices in accordance with the HCBS Settings requirements at the time of my signature.

Authorized Agency Representative Signature: _____

Print Name: _____

Title: _____

Date: _____

Contact Information: _____

