

ADHC Self-Assessment Companion Guide - Instructions & Overview

The following sections contain instructions to provide guidance for completing the self-assessment. Each instruction is preceded by a short description of the corresponding question.

Provider Information	Instruction
Provider information & Contact person	Complete all information
Questions	Instruction
<p>Question 1: Is the new setting in which HCBS services will be provided located in a building that is also a publically or privately operated facility that provides inpatient institutional treatment (e.g. NF, IMD, ICF/IID, hospital)?</p>	<p>A YES response indicates agreement with the statement.</p> <p><u>Nursing Facility (NF)</u> – a Medicaid Nursing Facility – (42 CFR 488.301)</p> <p><u>IMD Facility</u> - Defined as a hospital, nursing facility, or other institution of more than 16 beds that is primarily engaged in providing diagnosis, treatment or care of persons with mental diseases, including medical attention, nursing care and related services. (42 CFR 435.1010)</p> <p><u>ICF/IID</u> – Intermediate Care Facility for Individuals with Intellectual Disability means an institution (or distinct part of an institution) that is primarily for the diagnosis, treatment, or rehabilitation of individuals with intellectual disability or with related conditions. (42 CFR 435.1010)</p> <p><u>Hospital</u> - Hospital is primarily engaged in providing, by or under the supervision of physicians, to inpatients (A) diagnostic services and therapeutic services for medical diagnosis, treatment, and care of injured, disabled, or sick persons, or (B) rehabilitation services for the rehabilitation of injured, disabled, or sick persons. (SEC. 1861. [42 U.S.C. 1395x])</p>
<p>Question 2: Is the new setting in which HCBS services will be provided located in a building on the grounds of, or immediately adjacent to a public institution?</p>	<p>A YES response indicates agreement with the statement.</p> <p>Settings that are located on the same or contiguous property to an institution or are sharing space with an institutional setting such as a Virginia State Training Center, community-based ICF/IID, Virginia State Psychiatric Hospital, Nursing Facility. <i>Public institution</i> (42 CFR 435.1010) means an institution that is the responsibility of a governmental unit or over which a governmental unit exercises administrative control.</p>
<p>Question 3: Is the new setting in which HCBS services will be provided in a gated/secure “community” solely for people with disabilities?</p>	<p>A YES response indicates agreement with the statement.</p> <p>Gated communities are settings that are isolated from the community at large, may be a residential community, housing estate or boarding school that is disability specific containing controlled entrances.</p>

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<p>Question 4: Is the new setting in which HCBS services will be provided co-located and or clustered with on a street or property?</p>	<p>A YES response indicates agreement with the statement.</p> <p>Co-located and/or clustered settings may be isolated from the broader community and include multiple services within different settings.</p>
<p>Question 5: Is the new setting in which HCBS services will be provided located in a farmstead or disability-specific community?</p>	<p>A YES response indicates agreement with the statement.</p> <p>A farmstead or disability specific community is often described as a life sharing community for individuals with disabilities. These settings typically encompass both a home and work environment along with recreational and social activities occurring at the setting.</p>
<p>Question 6: Do you have policies outlining HCBS specific rights of individuals receiving services?</p>	<p>A YES response indicates this statement is true of the service setting you are assessing.</p> <p><i>Evidence of Compliance provides examples demonstrating that this statement is true. As evidence attach policies outlining rights of individual receiving services and how that information is made available to individuals.</i></p>
<p>Question 7: Do paid staff and volunteers receive training and education on the rights of individuals receiving HCBS and member experience as outlined in HCBS rules?</p>	<p>A YES response indicates this statement is true of the service setting you are assessing.</p> <p><i>Evidence of Compliance provides examples demonstrating that this statement is true. As evidence, attach policies outlining rights of individual receiving services and requirement for staff training/education, training for volunteers, etc...</i></p>
<p>Question 8: As a provider of Medicaid HCBS, how will you ensure freedom from coercion and restraint?</p>	<p>A YES response indicates this statement is true of the service setting you are assessing.</p> <p><i>Evidence of Compliance provides examples demonstrating that this statement is true. Evidence may consist of, staff training, policies and procedures, etc...</i></p>
<p>Question 9: Does the person centered service planning process ensure individuals' choices and preferences are honored and respected?</p>	<p>A YES response indicates this statement is true of the service setting(s) you are assessing.</p> <p>Describe your person centered service planning process and how choice and preferences are honored. Examples of evidence may consist of policies and procedures, staff training, forms and documentation, etc...</p>

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<p>Question 10: Do individuals have the opportunity to regularly access/integrate within the community as part of their service in the ADHC setting?</p>	<p>A YES response indicates this statement is true of the service setting(s) you are assessing.</p> <p><i>Evidence of Compliance provides examples demonstrating that this statement is true.</i> Evidence may include activity calendars, community activities and frequency, policies on how individual preference to participate in activities is determined, a listing of transportation and other supports provided to facilitate community engagement, etc...</p>
<p>Question 11: Are policies outlining the HCBS rights for the individuals receiving the services and also available to staff and volunteers?</p> <p>Does the setting engage with the broader community?</p>	<p>A YES response indicates this statement is true of the service setting(s) you are assessing.</p> <p><i>Evidence of Compliance provides examples demonstrating that this statement is true.</i> As evidence, attach policies outlining rights of individual receiving services and how that information is made available to staff, volunteers, and individuals.</p>
<p>Question 12: Will relationships with member/people not receiving Medicaid HCBS be fostered?</p>	<p>A YES response indicates this statement is true of the service setting(s) you are assessing.</p> <p><i>Evidence of Compliance provides examples demonstrating that this statement is true.</i> Evidence may consist of a description of how this is achieved, a policy, activity calendar, community outing, etc...</p>
<p>Question 13: Will individuals receiving services, or a person of their choosing, have an active role in the development and update of their person-centered plan of care? In other words, will Medicaid and non-Medicaid members be able to participate in the same activities together?</p>	<p>A YES response indicates this statement is true of the service setting(s) you are assessing.</p> <p><i>Evidence of Compliance provides examples demonstrating that this statement is true.</i> Evidence may consist of an overview of the service planning process, policies and procedures, verification from individuals/families of their participation, and evidence that the individual had an active role in development of the plan of care, etc...</p>
<p>Question 14: Does the ADHC setting have partnerships with other community organizations and volunteers?</p>	<p>A YES response indicates this statement is true of the service setting(s) you are assessing.</p> <p><i>Evidence of Compliance provides examples demonstrating that this statement is true.</i> A list of partnering organizations, MOUs, etc...</p>
<p>Question 15: Will individuals have access to materials and/or resources to become aware of activities occurring outside the setting? How will individuals access information for community outings and events?</p>	<p>A YES response indicates this statement is true of the service setting(s) you are assessing.</p> <p><i>Evidence of Compliance provides examples demonstrating that this statement is true.</i> Evidence includes examples such as: brochures, calendar of events, information board, internet access, sign-up sheets to participate in community activities, materials and resources that are made available to individuals, etc...</p>

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<p>Question 16: Will the individuals have the ability to choose their activities and menu options?</p>	<p>A YES response indicates this statement is true of the service setting(s) you are assessing.</p> <p><i>Evidence of Compliance provides examples demonstrating that this statement is true.</i> Evidence includes examples such as: provide a copy of the monthly activity calendar, and a copy of a monthly lunch/snack menu with alternative options listed for both the activity calendar and the menu.</p>
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