

Instructions & Overview

The Self-Assessment is done through Survey Monkey.

Through Survey Monkey, DMAS will generate an email to the contact email provided for the 1/18/2017 Webinar registration and/or what is listed in the MMIS. The email will come from HCBScomments@dmas.virginia.gov.

Using the self-assessment link in the e-mail you receive, you can go in and out of the self-assessment. It will save your place. You can also go back and change responses up until the point you submit the survey.

Additional notes:

- If you inadvertently receive two emails, delete one and use only one link consistently in order to access your saved work.
- Stick to the same internet browser each time.
- DMAS still recommends that you walk through the materials prior and gather as much as you can in advance.

Through Survey Monkey, DMAS will generate several reminder emails to those who have not completed or have only partially completed the self-assessment.

During the SA you will be asked to upload “evidence” demonstrating compliance with HCBS requirements. Evidence can be uploaded as Word, PDF document or JPEG file.

- The maximum file size for each uploaded document is 16 megabytes
- Evidence for some questions may be duplicative. You do not need to upload the same evidence multiple times. Simply reference it in the text box that the evidence was uploaded, reference the question associated with the uploaded evidence and indicate how the evidence demonstrates compliance.
- Do not upload an entire policy and procedure manual. We are not able to search large documents for specific information. Upload only the pertinent information.
- Only one document can be uploaded per question. If you are submitting multiple pieces of evidence for one question they MUST be merged into one document/file. Multiple documents can be scanned into one document.

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

Number of people served	Enter the total number of people served in the setting that is included in this self-assessment.
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Questions	Instruction
<p>Question 1: The service setting is NOT 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 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: The service setting is NOT 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: The service setting is NOT in a gated/secure “community” 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>
<p>Question 4: The service setting is NOT 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>

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<p>Question 5: Do individuals have options for activities in the community and use community services/resources in lieu of onsite services (medical services, recreational activities, meals out, barber/haircut)?</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.</i> Evidence may include activity schedules, documentation of types and frequency of recreational activities taking place in the community, a list of options provided to individuals, examples of community services accessed, a listing of transportation and other supports provided to facilitate community engagement, etc...</p>
<p>Question 6: 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 you are assessing.</p> <p><i>Evidence of Compliance provides examples demonstrating that this statement is true.</i> Evidence may include a list of volunteer activities and organizations, partnerships with other community organizations, policies, training for volunteers, etc...</p>
<p>Question 7: Do individuals have the opportunity to access 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 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 8: Are individuals aware of or do they have access to materials and/or resources to become aware of activities occurring outside the 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 includes examples of materials and resources that are made available to individuals including schedule of events, brochures, internet search opportunities, sign-up sheets to participate in activities, etc...</p>
<p>Question 9: Do paid and unpaid staff receive training and continuing education related to the rights of individuals receiving services and member experience as outlined in HCBS rules?</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 training policies, training logs, example of training materials, training calendar, etc...</p>
<p>Question 10: Are provider policies outlining rights of individuals receiving services and member experience made available to individuals receiving services?</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 individuals.</p>

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<p>Question 11: Are provider policies on member experience and HCBS rules regularly reassessed for compliance and effectiveness and amended, as necessary?</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 documentation of reassessment of provider policies, training logs, revision date of policies and procedures, notification to staff of policy revisions, etc...</p>
<p>Question 12: 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> Evidence may consist of activity calendars, examples of community activities, policies on how individual preference to participate in activities is determined, etc...</p>
<p>Question 13: Do individuals receiving services, or a person of their choosing, have an active role in the development and update of their person-centered service plan?</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 etc...</p>
<p>Question 14: Does the setting ensure freedom from coercion and restraint?</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, staff training, policies and procedures, etc...</p>
<p>Question 15: How does the person centered service planning process ensure individuals' choices and preferences are honored and respected?</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>
<p>Question 16: Please describe your agency's approach to completing the self-assessment process.</p>	<p>Describe your approach, for example, did you convene meetings or conference calls? Were multiple people involved, e.g. a member of a stakeholder group, individual receiving services, family member, direct support staff, volunteers? How did you get to agreement on results of the self-assessment before submission?</p>