Adult Day/Structured Day Settings

(Enter Provider Name Here)

You have informed the Office of Long-Term Living (OLTL) that your agency wishes to go through the Heightened Scrutiny Review Process. This means that OLTL has identified areas in which you do not comply with the Federal Home and Community-Based Services (HCBS) Final Rule that defines settings in which Medicaid waiver funds cannot be used. The Heightened Scrutiny Review Process offers you the opportunity to provide OLTL with your policies and other documents that show you are currently following the spirit of the Rule, and/or that you can and will make appropriate changes prior to (date) in order to come into compliance with the rule.
Please indicate which category your setting falls into
Setting(s) is located in a building that is also a publicly or privately-operated facility that provides inpatient institutional treatment.
Setting(s) is in a building located on the grounds of, or immediately adjacent to, a public institution.
Setting(s) has the effect of isolating individuals receiving Medicaid HCBS from the broader community of individuals not receiving Medicaid HCBS.

Policies/Documents required by ALL providers

Below are required documents (policies, procedures, handbooks, etc.) that should have already been provided to OLTL. If you have not provided them, you may be asked to do so by OLTL during their onsite review. OLTL will also be reviewing person-centered service plans (PCSP) and interviewing participants and members of your staff as part of the on-site review.

HIPAA privacy policy- 42 CFR 441.301(c)(4)(iii)
Complaint policy to include anonymous complaints - 42 CFR
441.301(c)(4)(iii)
Prohibition of coercion/restraint document - 42 CFR 441.301(c)(4)(iii)
Visitation document - 42 CFR 441.301(c)(4)(vi)(D)
Staff to address participants appropriately document - 42 CFR
441.301(c)(4)(iii)

Specific to Adult Day Providers

Providers may also be asked to produce policies, communications or documentation that the following practices are in place:

- 1. Participants have an opportunity to choose off-site, meaningful activities in an integrated community setting [42 CFR 441.301(c)(4)(iv)].
- Participants are provided with information about age-appropriate activities outside of the setting and opportunities to access those activities [42 CFR 441.301(c)(4)(i)].
- 3. Participants have access to food at any time [42 CFR 441.301(c)(4)(vi)(C)].
- 4. If the site is on the grounds of a hospital or institution, provide a description of how administrative functions, staff training and personnel are interconnected between the institutional setting and the services in question.

(For OLTL use only)

Onsite Reviews

Prior to the visit, review the documents provided by the agency. During the visit, cross check what is in the policies and what you are actually seeing. Make notations of any discrepancies where policies do not reflect what is actually in place.

Observations:

Note if participants are actively engaged in activities while you are there. Is there interaction with the staff? With other participants?

Is there any participant-protected health or personal information visible (such as a list of participant medications posted on the bulletin board for everyone to see, participant files observed in unlocked cabinets, etc.)?

OLTL Onsite Interviews of Participants and Staff at Adult Day/Structured Day Providers

<u>Questions for Participants</u> (or guardians if participant is unable to participate in the interview).

Participants are to be interviewed outside the presence of staff and informed that what they say will not be shared with staff or other participants – (review PCSPs prior to interviews):

- 1. Did you choose to use this agency for your services were you given the names of other agencies to choose from?
 - a. Ask, but also check PCSP does it indicate the participant had choice of Adult Day/Structured Day providers?
- 2. Review PCSP If there are any participant preferences listed that would apply in the Adult Day/Structured Day environment, such as food preferences, activity preferences, etc., ask if those preferences are being honored.

- 3. Do you know how to file a complaint if you are unhappy with your services here?
- 4. Have you ever been restrained or forced to do something you didn't want to do?
- 5. How do you like to be addressed (first name, Mr./Mrs./Mx.)? Do staff here use that name?
- 6. Does the agency inform you about activities that are occurring in the community while you are here? Do they give you an opportunity to attend them?
- 7. Do you have a variety of activities you can choose to do while you're here?
- 8. Do you have a choice of what activities you can participate in?
- 9. In addition to meals, do you have access to food while you're here, such as snacks?

Questions for Staff

Staff are to be informed that what they say will not be shared with management, other staff or participants –

- 1. Do you have a detailed description of each participant's preferences (activities they like, food preferences, etc.)?
- 2. Do participants have a variety of activities they can choose from?
- 3. Do you ever take participants outside the Adult Day/Structured Day Center (Center) for activities in the community?
- 4. Do Community HealthChoices (CHC) participants have contact with non-CHC participants during the day (either at the Center or when they are taken outside the Center)?
- 5. Does each participant have an individualized plan of activities or does everyone do the same thing at the same time?
- 6. During the day, in addition to meals, do participants have access to food?
- 7. Do you address all participants the same way, or do you address them differently based on what they prefer?
- 8. Have you ever seen a participant/client restrained or forced to do something they didn't want to do?
- 9. Do you inform participants about activities that are occurring in the community while they are here? Do you provide them with an opportunity to attend them?