

Appendix C

Instructions for completing the C4 Day (non-residential) HCBS self-assessment:

1. Assessment answers must be entered into the online webform at the HCBS website. The link was provided in your letter from SCDHHS. This includes uploading any documentation requested in the assessment (see #2 below).
2. You can also access a printable copy of the assessment at: <https://msp.scdhhs.gov/hcbs/site-page/c4-settings-assessment>. We strongly encourage you to print it out and review it first before starting. The assessment asks for some supplemental documentation and it may be helpful to gather that ahead of time. Documentation includes:
 - a. Program/facility policies and procedures on participant transportation
 - b. Program/facility policies and procedures on grievances
 - c. Program/facility policies and procedures on filing anonymous complaintsWhen attaching your document, first click on "Choose File." Then, select the file from your computer that you wish to attach. Once you select your file, click "Upload" (the blue button on the screen).
3. You **must** do one assessment for each day (non-residential) facility you own and/or operate.
4. Assess your facility(ies).
 - a. It is suggested to complete the assessment on paper first and then transfer the answers to the online form.
 - b. It is strongly encouraged that you talk with your participants to help you accurately answer some of the questions.
 - c. Your staff may also be helpful in answering some of the questions.
5. Once you have completed all of your assessments, SCDHHS will review them along with the data gathered from the independent site visits and provide you with feedback on each facility indicating where it is in compliance and where it is not.
6. Any questions regarding the assessments can be sent to HCBSAssessments@scdhhs.gov.

Terminology:

<u>Facility:</u>	The physical space where the day program/service is provided <i>Also called a setting</i>
<u>HCBS:</u>	Home and community-based services <i>Also known as Medicaid waiver services</i>
<u>Individual:</u>	The participant in the day program/service
<u>Program:</u>	The collective events, activities, services, etc., offered in the facility
<u>Public Institution:</u>	An inpatient facility that is financed and operated by a county, state, municipality, or other unit of government
<u>Public Transportation:</u>	Transportation provided in the community and available to the public, including, but not limited to, buses, trains, and taxi services

Service Plan: The document created for the individual that details the goals and outcomes of the individual, along with the services and supports that will be provided to assist in achieving those goals and outcomes, specific to the Day program/service
Also called a Care Plan or Plan of Care

HCBS Setting Requirements (from 42 CFR 441.301(c)(4))

All Home and Community-Based Settings must have the following qualities:

- Is integrated in and supports full access to the greater community
- Provide individuals opportunities to seek employment and work in competitive integrated settings
- Provide individuals the opportunity to engage in community life
- Provide individuals the opportunity to control their personal resources
- Provide individuals the opportunity to receive services in the community
- Is selected by the individual from among setting options
 - Including non-disability specific settings
- Ensures the individual's right of privacy
- Ensures the individual's right of dignity
- Ensures the individual's right of respect
- Ensures the individual's right of freedom from coercion
- Ensures the individual's right of freedom from restraint
- Optimizes individual initiative
- Optimizes an individual's autonomy
- Optimizes an individual's independence in making life choices, including but not limited to:
 - Choice in daily activities
 - Choice in physical environment
 - Choice with whom to interact
- Facilitates an individual's choice regarding services and supports
- Facilitates an individual's choice regarding service provider