

Residential Summary of Findings

Residential Results

Community Integration

Standard: The setting is integrated in and supports full access of individuals receiving Medicaid HCBS to the greater community, including opportunities to seek employment and 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 individuals not receiving Medicaid HCBS.

Summary of Findings:

- Lack of opportunities to access the community either on their own or with individual support.
- Activities are often provider organized and implemented.
- Activities are often completed with other waiver participants from the same or other setting and the activity is agency sponsored.
- People are given allowances and not engaged in money management or budgeting.



Residential Results

Choice of Setting

Standard: The setting is selected by the waiver participant from among setting options including non-disability specific settings and an option for a private unit in a residential setting. The setting options are identified and documented in the person-centered service plan and are based on the waiver participants' needs and preferences.



Summary of Findings:

- Choice is often limited to a specific setting that is available at the time the person needs to move.
- Less than 4% of waiver participants expressed that while they want to move, they are listened to when expressing their choice of setting.

Residential Results

Individual Rights



Standard: Ensures an individual's rights of privacy, dignity and respect, and freedom from coercion and restraint.

Summary of Findings:

- Waiver participants receive rights training the majority of the time, at least once per month.
- Waiver participants expressed that they stopped voicing concerns because nothing changed when they did.

Residential Results

Autonomy and Independence

Standard: Optimizes, but does not regiment, individual initiative, autonomy, and independence in making life choices, including but not limited to daily activities, physical environment, and with whom to interact.



Summary of Findings:

- Waiver participants expressed that staff often say one thing, and do another (choices around menus, activities).
- Activities in residential settings are often group based and staff determine activities with little or no input from waiver participants.
- In residential settings staff complete tasks **for** waiver participants rather than **with** waiver participants.
- Many waiver participants expressed that they had no idea about the service planning process or the actual service plan document.

Residential Results

Choice of Services

Standard: Facilitates individuals choice regarding services and supports, and who provides them.

Summary of Findings:

- Individuals were often not familiar with the service plan or the process so they could not comment on the use of, or choice in a facilitator.
- Waiver participants did comment that they were not the one who selected the setting they were in, but also added they were okay with it once they were there.



Residential Results

Landlord Tenant Rights

Standard: The unit or dwelling is a specific physical place that can be owned, rented, or occupied under a legally enforceable agreement by the waiver participant, and the waiver participant has, at a minimum, the same responsibilities and protections from eviction that tenants have under the landlord/tenant law of South Carolina.

Summary of Findings:

- Less than 5% of residential settings are non-compliant with the requirement for a lease. (PCG did not review the content of the lease for compliance with landlord-tenant laws in South Carolina).



Residential Results

Privacy

Standard: Units have entrance doors lockable by the waiver participant, with only appropriate staff having keys to doors.



Summary of Findings:

- Line of sight supervision is most prevalent.
- Safety and protection drive the amount of independence/control a person has.
- Medication administration is often not done privately.
- Weekend medication administration schedule is often not modified for participant's flexibility to sleep in.

Residential Results

Self-Determination

Standard: Waiver participants have the freedom and support to control their own schedules and activities, and have access to food at any time.



Summary of Findings:

- Access to money - individuals have allowances versus personal budgets. Training and support to develop money management skills is limited.
- Issuance of keys and lease agreements appeared to be a very recent development.
- Staff primarily do cooking and grocery shopping.
- Waiver participants do cleaning and chores.
- Choice of meal times seems limited.
- Bedtimes are flexible but people often go to their rooms early.

Residential Results

Visitors

Standard: Waiver participants are able to have visitors of their choosing at any time.



Summary of Findings:

- Further discussion is needed on the permissibility of overnight visitors: same sex and opposite sex.
- Sign in/out sheets are seen as a protection to the people living in the setting.

Residential Results

Physical Accessibility

Standard: The setting is physically accessible to the individual.

Summary of Findings:

- Development of communication approaches for people with limited or no communication skills and the use of technology to assist them is needed.
- Some physical barriers exist for people with mobility limitations.
- Assistive Devices other than for physical accessibility are not commonly used.



Non-Residential Summary of Findings

Non-Residential Results

Community Integration

Standard: The setting is integrated in and supports full access of individuals receiving Medicaid HCBS to the greater community, including opportunities to seek employment and 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 individuals not receiving Medicaid HCBS.

Summary of Findings:

- Most people are engaged in volunteer or non-paid work.
- Some programs have people out in the community each day but most do not.



Non-Residential Results

Choice of Setting

Standard: The setting is selected by the waiver participant from among setting options including non-disability specific settings and an option for a private unit in a residential setting. The setting options are identified and documented in the person-centered service plan and are based on the waiver participants' needs and preferences.

Summary of Findings:

- Discussions on employment seem to be just starting, not everyone knew a job was an option.
- Those that are employed are often only employed for a few hours a week, not many people had fulltime jobs.



Non-Residential Results

Individual Rights

Standard: Ensures an individual's rights of privacy, dignity and respect, and freedom from coercion and restraint.

Summary of Findings:

- People were encouraged to resolve concerns informally.
- Storage for personal belongings brought to the non-residential settings were often only coat racks or open cubbies for storage.
- Valuables were kept by staff if needed.
- Some non-residential settings had specific locations dedicated as Medication Rooms or Sick Rooms where personal care was provided.



Non-Residential Results

Autonomy and Independence

Standard: Optimizes, but does not regiment, individual initiative, autonomy, and independence in making life choices, including but not limited to daily activities, physical environment, and with whom to interact.



Summary of Findings:

- Indoor and outdoor common use areas were not typically available, other than a lunch room.
- People often spend the majority of their day with the same group of people.
- Many settings assign people to a group and a room and that is where they stay while in the setting.
- Access to individualized activities was limited.

Non-Residential Results

Autonomy and Independence

Standard: Optimizes, but does not regiment, individual initiative, autonomy, and independence in making life choices, including but not limited to daily activities, physical environment, and with whom to interact.

Summary of Findings:

- People in the setting may move from one group activity to another and may work with different staff throughout the day.



Non-Residential Results

Choice of Services

Standard: Facilitates individual choice regarding services and supports, and who provides them.

Summary of Findings:

- People expressed that they thought they were listened to by staff.
- Unlike in the residential settings, people seemed to be more familiar with the service planning that took place in the non-residential setting and the facilitator concept.



Non-Residential Results

Physical Accessibility

Standard: The setting is physically accessible to the individual.

Summary of Findings:

- Use of assistive devices in non-residential settings was more prevalent.



Observations

Observations From Interviews with Provider Staff in both Residential and Non-Residential Settings

Areas of Note

- Staff who participated in the interviews were for the most part well prepared and had some familiarity with the questions that were asked. Some however, often due to limited time working at the setting had very limited knowledge of the settings practices. In the CTH I model, the home provider often stated that the setting was their home and the waiver participant followed their rules, and expectations.
- Some settings were very innovative and focused on community integration.
- In the interviews conducted, PCG also identified some specific areas where opportunities exist for improvement.
 - Staff do not use person first/respectful language-staff are not derogatory toward the waiver participants but people are often referred to as residents or identified as “low functioning, severe” and staff refer to themselves as caregivers.
 - Waiver participants are “allowed or permitted” to do things, not supported to learn and develop skills for independence.
 - Focus was often on care, not skill development, example: staff cook and grocery shop.
 - Activities that are agency originated (dances, clubs etc.) were considered to be community integration.
 - Agency based activities and materials used are not always age appropriate (proms are held, special clubs organized).
 - Development of communication skills for people with limited or no verbal skills were very limited.
 - The Service Plan is not seen as a useful/guiding document.