

**HCB Settings Quality Review  
Residential Rubric**

<b>Provider Agency</b>	
<b>Setting Name:</b>	
<b>Setting Region:</b>	
<b>Setting Type:</b>	
<b>Brief description of setting:</b>	
<b>Category</b>	
<b>Review Date</b>	

<b>Reason for Category</b>	
<b>Overcomes presumption of institutional qualities?</b>	
<b>Evidence to support</b>	<ul style="list-style-type: none"><li>•</li></ul>

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Expectation	What you might see <i>(based on CMS suggested Exploratory Questions)</i>	Notes/Documentation to Support Expectation
(i) The setting is integrated in and supports full access of individuals receiving Medicaid HCBS to the greater community, including...	<ul style="list-style-type: none"> <li>• Setting is in the community among other private residences, retail businesses</li> <li>• Participants come and go at will</li> <li>• Participants have access to public transportation               <ul style="list-style-type: none"> <li>○ Schedules posted</li> <li>○ Phone numbers for transportation posted</li> <li>○ Bus stops nearby; taxis available</li> <li>○ Training provided on how to use public transportation</li> </ul> </li> <li>• Accessible van available (if needed) to transport individuals to appointments, shopping, etc.</li> <li>• Where public transportation is limited, other resources provided for the participant to access the broader community</li> </ul>	
1. opportunities to seek employment and work in competitive integrated settings,	<ul style="list-style-type: none"> <li>• Participants supported to work in an integrated community setting</li> <li>• If participant would like to work, settings supports participant in pursuing that option</li> </ul>	<i>Note: Residential habilitation provider is not responsible for finding people jobs. Look here for any barriers the provider has in place to prevent someone from getting/keeping employment.</i>

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2. engage in community life,	<ul style="list-style-type: none"> <li>• Participants regularly access the community               <ul style="list-style-type: none"> <li>○ Participant able to describe how s/he accesses the community, where s/he goes</li> <li>○ Talks about outside activities</li> </ul> </li> <li>• Setting provides materials on activities occurring outside of the setting to participants</li> <li>• Participants shop, attend religious services, schedule appointments, have lunch with family and friends, etc., in the community, as they choose</li> <li>• Participants come and go at any time</li> <li>• Participants participate regularly in meaningful non-work activities in integrated community settings as desired</li> <li>• Participants not prohibited from engaging in legal activities</li> </ul>	

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3. control personal resources,	<ul style="list-style-type: none"> <li>• Setting facilitates the opportunity for participants to have a checking or savings account or other means to control his/her funds</li> <li>• Participants have access to his/her funds</li> <li>• How is it made clear that the individual is not required to sign over his/her paychecks to the provider?</li> </ul>	
4. and receive services in the community, to the same degree of access as individuals not receiving Medicaid HCBS.	<ul style="list-style-type: none"> <li>• Setting facilitates participants accessing amenities such as a pool or gym used by others on-site</li> </ul>	
(ii) The setting is selected by the individual from among setting options including non-disability specific settings and an option for a private unit in a residential setting.	<ul style="list-style-type: none"> <li>• Participant given a choice of available options regarding where to live</li> <li>• Participant given opportunities to visit other settings</li> </ul>	<i>Note: choice of setting is to be offered by the Case Manager during the selection of residential habilitation providers. It is also the responsibility of the state to ensure options are available.</i>
and setting options are based on the individual’s needs, preferences	<ul style="list-style-type: none"> <li>• Setting reflects the participants’ needs and preferences</li> <li>• Participants have full access to typical facilities in a home such as a kitchen with cooking facilities, dining area, laundry, and comfortable seating in the shared areas</li> </ul>	
and, for residential settings,[based on the individual’s] resources available for room and board.		

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(iii) Ensures an individual's rights of 1. privacy,	<ul style="list-style-type: none"> <li>• Assistance provided in private, as appropriate, when needed</li> <li>• Health information about participants kept private</li> <li>• Schedules of individuals for PT, OT, medications, restricted diet, etc., not posted in a general open area</li> <li>• Privacy afforded to participants for visitors, phone calls</li> </ul>	

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(iii) Ensures an individual’s rights of 2. dignity and respect,	<ul style="list-style-type: none"> <li>• Setting communicates with participants (written and oral) communication conducted in a manner they understand</li> <li>• Participants, who need assistance with grooming, groomed as they desire</li> <li>• Participants dressed in clothes that fit, are clean, and are appropriate for the time of day, weather, and preferences</li> <li>• Participants greet and chat with staff</li> <li>• Setting staff interact and communicate with participants respectfully</li> <li>• Setting staff do not talk to other staff about a participant(s) in the presence of other persons or in the presence of the participant as if s/he were not present</li> <li>• Staff address participants in the manner they prefer (not “hon,” “sweetie,” etc.)</li> </ul>	

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(iii) Ensures an individual’s rights of 3. freedom from coercion,	<ul style="list-style-type: none"> <li>• Information about filing a complaint posted in an obvious location and in an understandable format</li> <li>• Participant is comfortable discussing concerns</li> <li>• Participant knows the person to contact or the process to make an anonymous complaint</li> <li>• Participant can file an anonymous complaint</li> </ul>	
(iii) Ensures an individual’s rights of 4. and freedom from restraint.	<ul style="list-style-type: none"> <li>• Any restraints/restrictive interventions in place with participant consent</li> <li>• Restraints and/or restrictive interventions documented in the person-centered plan</li> <li>• Any needed supports and plans to address behavioral needs are specific to the participant</li> <li>• Any behavior supports/plans do not restrict rights of every individual in setting (only apply to specific participant)</li> </ul>	

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<p>(iv) Optimizes, but does not regiment, individual initiative, autonomy, and independence in making life choices, including but not limited to, ~daily activities</p>	<ul style="list-style-type: none"> <li>• Participants not prohibited from engaging in legal activities</li> <li>• Participants regularly access the community               <ul style="list-style-type: none"> <li>○ Participant able to describe how s/he accesses the community, where s/he goes</li> <li>○ Talks about outside activities</li> </ul> </li> <li>• Participants shop, attend religious services, schedule appointments, have lunch with family and friends, etc., in the community, as desired</li> <li>• Participants come and go at any time</li> <li>• Participants participate regularly in meaningful non-work activities in integrated community settings as desired</li> </ul>	

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(iv) Optimizes, but does not regiment, individual initiative, autonomy, and independence in making life choices, including but not limited to, ~physical environment	<ul style="list-style-type: none"> <li>• Participants have full access to typical facilities in a home such as a kitchen with cooking facilities, dining area, laundry, and comfortable seating in the shared areas</li> <li>• There are no barriers preventing participants’ entrance to or exit from certain areas of the setting</li> <li>• Setting physically accessible and/or has appropriate environmental adaptations to facilitate movement</li> <li>• No assigned seating in dining area</li> </ul>	
(iv) Optimizes, but does not regiment, individual initiative, autonomy, and independence in making life choices, including but not limited to, ~and with whom to interact	<ul style="list-style-type: none"> <li>• Evidence of visitors               <ul style="list-style-type: none"> <li>○ Any restrictions agreed upon by residents (not staff imposed)</li> </ul> </li> <li>• Participants converse with others during meal times</li> <li>• Participant can eat privately if chooses</li> <li>• Participants have/have access to private cell phone, computer or other personal communication device to use for personal communication in private at any time</li> </ul>	

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<p>(v) Facilitates individual choice regarding services and supports, and who provides them</p>	<ul style="list-style-type: none"> <li>• Participants have specific plan for residential services               <ul style="list-style-type: none"> <li>○ Participants knows they can schedule meetings</li> <li>○ Participants can explain the process to develop and update their plan</li> <li>○ Participant attended last meeting</li> <li>○ Meeting at a time and place convenient for the participant</li> <li>○ Participant supported to develop plan to support needs/preferences</li> </ul> </li> <li>• Setting ensures participants are supported to make decisions and exercise autonomy to the greatest extent possible</li> <li>• Staff ask participants about needs and preferences</li> <li>• Setting staff knowledgeable about the capabilities, interests, preference and needs of participants</li> <li>• Setting posts/provides information to participants about how to request additional HCBS or change to current HCBS</li> <li>• Participant expresses satisfaction with the services received</li> <li>• Requests for services and supports accommodated (not ignored, denied)</li> <li>• Participant expresses satisfaction with the provider</li> <li>• Participant can ask for a meeting to discuss a change in provider</li> <li>• Participant knows how and to whom to make a request for a new provider</li> </ul>	
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<p>(A) The unit or dwelling is a specific physical place that can be owned, rented, or occupied under a legally enforceable agreement by the individual receiving services, and the individual has, at a minimum, the same responsibilities and protections from eviction that tenants have under the landlord/tenant law of the State, county, city, or other designated entity. For settings in which landlord tenant laws do not apply, the State must ensure that a lease, residency agreement or other form of written agreement will be in place for each HCBS participant, and that the document provides protections that address eviction processes and appeals comparable to those provided under the jurisdiction's landlord tenant law.</p>	<ul style="list-style-type: none"> <li>• Participants have a lease or a written residency agreement               <ul style="list-style-type: none"> <li>○ provides protections to address eviction processes and appeals</li> </ul> </li> <li>• Participants know his/her rights regarding housing and when s/he could be required to relocate</li> <li>• Participants know how to relocate and request new housing</li> </ul>	

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<p>B) Each individual has privacy in their sleeping or living unit.</p>	<ul style="list-style-type: none"> <li>• Assistance provided in private, as appropriate, when needed</li> <li>• Furniture arranged as participants prefer; assures privacy and comfort</li> <li>• Participant can close and lock the bedroom door</li> <li>• Participant can close and lock the bathroom door</li> <li>• Staff or other residents always knock and receive permission prior to entering a bedroom or bathroom</li> <li>• Staff only use a key to enter a living area or privacy space under limited circumstances agreed upon with the participant</li> <li>• Any cameras present in the setting there with knowledge and consent of residents and not in private spaces</li> </ul>	
<p>(1) Units have entrance doors lockable by the individual, with only appropriate staff having keys to doors.</p>	<ul style="list-style-type: none"> <li>• Participant can close and lock the bedroom door</li> <li>• Participant can close and lock the bathroom door</li> <li>• Staff only use a key to enter a living area or privacy space under limited circumstances agreed upon with the participant</li> </ul>	

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(2) Individuals sharing units have a choice of roommates in that setting	<ul style="list-style-type: none"> <li>• Participant given a choice of a roommate</li> <li>• Married couples share or not share a room by choice</li> <li>• Participant knows how s/he can request a roommate change</li> </ul>	
3) Individuals have the freedom to furnish and decorate their sleeping or living units within the lease or other agreement	<ul style="list-style-type: none"> <li>• Participants' personal items, such as pictures, books, and memorabilia present and arranged as desired</li> <li>• Furniture, linens, and other household items reflect the participants' personal choices</li> <li>• Participants' living areas reflect their interests and hobbies</li> </ul>	

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C) Individuals have the freedom and support to control their own schedules and activities,	<ul style="list-style-type: none"> <li>• Participants have full access to typical facilities in a home such as a kitchen with cooking facilities, dining area, laundry, and comfortable seating in the shared areas</li> <li>• No curfew or other requirement for a scheduled return to the setting</li> <li>• No set schedule participants must follow               <ul style="list-style-type: none"> <li>○ Participants' schedules vary from others</li> </ul> </li> <li>• Participants have access to such things as a television, radio, and leisure activities that interest him/her and can schedule such activities at his/her convenience</li> </ul>	
and have access to food at any time.	<ul style="list-style-type: none"> <li>• Participants have meals at the time and place of his/her choosing</li> <li>• Participants can request an alternative meal if desired</li> <li>• Snacks accessible and available anytime</li> <li>• Participants treated age appropriately; not required to wear bibs; use regular tableware, utensils</li> </ul>	

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(D) Individuals are able to have visitors of their choosing at any time.	<ul style="list-style-type: none"> <li>• Evidence of visitors               <ul style="list-style-type: none"> <li>○ Any restrictions agreed upon by residents (not staff imposed)</li> </ul> </li> <li>• Space for visitors to visit with participants comfortably</li> </ul>	
(E) the setting is physically accessible to the individual	<ul style="list-style-type: none"> <li>• There are no barriers preventing participants' entrance to or exit from certain areas of the setting</li> <li>• Setting physically accessible and/or has appropriate environmental adaptations to facilitate movement               <ul style="list-style-type: none"> <li>○ grab bars</li> <li>○ seats in the bathroom</li> <li>○ ramps for wheelchairs</li> </ul> </li> <li>• Appliances accessible to participants (e.g. the washer/dryer are front loading for individuals in wheelchairs)</li> <li>• Tables and chairs at a convenient height and location for participants to access and use comfortably</li> </ul>	
(F) Any modification of the additional conditions, under §441.301(c)(4)(vi)(A) through (D), must be supported by a specific assessed need and justified in the person-centered service plan. The following requirements must be documented in the person-centered service plan	<ul style="list-style-type: none"> <li>• Plan and accompanying documentation show information as noted below:</li> </ul>	

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(1) Identify a specific and individualized assessed need.	<ul style="list-style-type: none"> <li>Plan identifies a specific, individualized need warranting modification</li> </ul>	
(2) Document the positive interventions and supports used prior to any modifications to the person-centered service plan.	<ul style="list-style-type: none"> <li>Documentation notes any positive interventions and supports used prior to plan modifications</li> </ul>	
(3) Document less intrusive methods of meeting the need that have been tried but did not work.	<ul style="list-style-type: none"> <li>Less intrusive methods of meeting the need tried initially are documented</li> </ul>	
(4) Include a clear description of the condition that is directly proportionate to the specific assessed need.	<ul style="list-style-type: none"> <li>Plan includes a description of the condition that is directly proportional to the assessed need,</li> </ul>	
(5) Include regular collection and review of data to measure the ongoing effectiveness of the modification.	<ul style="list-style-type: none"> <li>Plan includes... data to support ongoing effectiveness of the intervention,</li> </ul>	
(6) Include established time limits for periodic reviews to determine if the modification is still necessary or can be terminated.	<ul style="list-style-type: none"> <li>Plan includes... time limits for periodic reviews to determine the ongoing necessity of the modification,</li> </ul>	
(7) Include the informed consent of the individual.	<ul style="list-style-type: none"> <li>Plan includes... informed individual consent,</li> </ul>	
(8) Include an assurance that interventions and supports will cause no harm to the individual.	<ul style="list-style-type: none"> <li>Plan includes... assurance that the intervention will not cause the individual harm</li> </ul>	