**RCH Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ DPH License #: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Contact #: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

 **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Licensed capacity: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Owner: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Current occupancy: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

# Overview of CMS Final Rule: Home & Community Based Settings Rule

* The final rule supports enhanced quality in home & community-based services (HCBS) programs, adds protections for individuals receiving services and intends to ensure that individuals receiving services and supports through Medicaid HCBS programs have full access to community living and receive services in the most integrated setting. This includes 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 receive Medicaid HCBS.
* This rule means that Residential Care Homes need to focus on the nature and quality of individual experiences and not just the building where services are provided.
* Individuals have an active role in developing their plan, it is person-centered and reflective of the individual’s services and supports, as well as what is important to them.
* The HCBS Final Rule took effect March 17, 2014 for all 1915(c) waivers.
* The transition period to achieve full compliance with the HCBS Final Rule is March 17, 2023.
* Lack of compliance the settings final rule impacts Federal funding.
* The State of CT Final State-wide Transition plan was approved by CMS on July 19, 2019 and it can be found here: [Community Options--Documents (ct.gov)](https://portal.ct.gov/DSS/Health-And-Home-Care/Long-Term-Care/Community-Options/Documents)

# Condition #1: Self-Assessment of Compliance with CMS’ HCBS Final Rule: Please answer the questions below by indicating “yes” or “no” as to your residential care home’s compliance with each standard.

# *If you answer “no” to a question, thereby potentially demonstrating a lack of HCBS Rule compliance, please provide a brief explanation as to why the RCH is not compliant and the remediation efforts that are in progress.*

[ ]  **Federal Standard 1: Access to the Community.** The setting is integrated in and supports full access to the greater community.

* 1. As part of their plan for services, do residents have the opportunity to participate in individual and group outings and activities in the community at the frequency and for the amount of time they desire? Yes [ ]  No [ ]

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* 1. Do opportunities for community outings and activities include meaningful interaction with individuals not residing in the RCH, including the following?
1. Shopping in the community Yes [ ]  No [ ]

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1. Attending religious services Yes [ ]  No [ ]

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1. Scheduling and attending appointments Yes [ ]  No [ ]

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1. Visiting with family and friends in the community Yes [ ]  No [ ]

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1-3. Do residents have access to competitive integrated employment opportunities if they desire

paid employment? Yes [ ]  No [ ]

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* 1. Does the RCH offer options for residents to receive services in the community rather at the RCH? Yes [ ]  No [ ]

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* 1. Do residents have access to transportation options, including public transportation, family, friends, volunteer organizations that promote ease of use and optimize their individual independence according to their person-centered plan? Yes [ ]  No [ ]

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* 1. Are residents offered training or assistance in the use of public transportation?

Yes [ ]  No [ ]

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* 1. Are residents dependent on RCH staff for transportation options?

Yes [ ]  No [ ]

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* 1. Are residents required to sign over any checks they might receive, including employment pay checks to the RCH? Yes [ ]  No [ ]

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* 1. Is there a central location at the RCH where resident’s personal resources are held?

Yes [ ]  No [ ]

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* 1. Does the RCH impose restrictions on when the residents’ can access their personal funds?

Yes [ ]  No [ ]

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* 1. Do residents have the option to control their personal resources? Yes [ ]  No [ ]

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* 1. Are there restrictions on the amounts of personal funds a resident can access?

Yes [ ]  No [ ]

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* 1. Are residents limited to accessing personal funds when RCH staff are present?

Yes [ ]  No [ ]

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[ ]  **Federal Standard 2: Choice of Setting.** The setting is selected by the individual from among various options, including non-disability specific options and options for a private room in a residential setting.

* 1. As part of their plan for services, residents can participate in individual and group outings and activities in the community at the frequency and for the time they desire.

Yes [ ]  No [ ]

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* 1. Are the options identified and documented and based upon the individual’s needs, preferences and reflective of resources available for room and board?

Yes [ ]  No [ ]

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[ ]  **Federal** **Standard 3:** **Right to be Treated Well.** The setting ensures an individual’s rights of privacy, dignity, respect and freedom from coercion and restraint.

3-1. Does each living unit have lockable entrance doors? Yes [ ]  No [ ]

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

3-1.1 If yes, do only the resident and appropriate RCH staff have keys to the doors?

Yes [ ]  No [ ]

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3-1.2 Do residents have a place to store belongings in a secure manner?

Yes [ ]  No [ ]

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3-2. Does RCH staff always knock and receive permission prior to entering a resident’s living

 space? Yes [ ]  No [ ]

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3-3. Does RCH staff only use a key to enter a living are or privacy space under circumstances

 agreed upon by the resident? Yes [ ]  No [ ]

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3-4. Is a telephone available to residents for personal use? Yes [ ]  No [ ]

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3-4.1 If yes, is there space for the telephone to ensure privacy? Yes [ ]  No [ ]

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3-5. Do the following items have restrictions on their use? If yes, please explain.

 [ ]  private cell phones [ ]  computers [ ]  other personal communication devices

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3-6. Do residents sharing units have a choice of roommates? Yes [ ]  No [ ]

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3-7. Do residents have the freedom to furnish and decorate their sleeping or living spaces within the bounds of the lease or other written legal agreement? Yes [ ]  No [ ]

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3-8. Do residents have the freedom and support to control their schedule and activities?

Yes [ ]  No [ ]

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3-9. Do residents have full access to the following?

[ ]  dining area [ ]  laundry [ ]  comfortable seating in shared areas [ ]  kitchen with cooking

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3-10. Do have residents have access to food anytime, as appropriate? Yes [ ]  No [ ]

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3-11. Do residents have their health information kept private, including daily therapeutic

 schedules, medications and/or dietary restrictions? Yes [ ]  No [ ]

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3-12. Do residents have private, unsupervised space to meet visitors? Yes [ ]  No [ ]

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3-13. Can residents leave and return to the RCH at will? Yes [ ]  No [ ]

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3-14. Is there a curfew for residents to return to the RCH? If yes, what is it?

 Yes [ ]  No [ ]

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3-15. Are there locked doors or other barriers preventing residents from entering and/or exiting certain areas of the RCH? Yes [ ]  No [ ]

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3-16. Does the RCH ensure the staff are knowledgeable about the capabilities, preferences , interests and needs of the residents? Yes [ ]  No [ ]

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3-17. Are there residents with mobility impairments in the RCH?

 Yes [ ]  No [ ]

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3-18. Is the RCH physically accessible and free from obstructions including steps, narrow hallways or transition areas that could limit mobility of residents? Yes [ ]  No [ ]

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3-18.1 Are there environmental modifications such as star lifts or elevators?

Yes [ ]  No [ ]

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[ ]  **Federal Standard 4: Independence.** The setting optimizes individual initiative, autonomy and independence in making life choices, including daily activities, physical environment and interactions.

4.1 Do residents have input into and choice among daily activities that are based on the individuals' needs and preferences?

 Yes [ ]  No [ ]

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4-2. Do residents have the ability to control their own schedules?

 Yes [ ]  No [ ]

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4-3. Does the RCH structure its support so that residents may interact with people they choose to interact with, both at home and in community settings including non-disabled peers other than paid staff and volunteers?

 Yes [ ]  No [ ]

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4-4. Can residents choose to spend time, including dining, alone or in a private area?

 Yes [ ]  No [ ]

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[ ]  **Federal Standard 5: Choice of Services and Supports.** The setting facilitates individual choice regarding services and supports, and who provides them.

5-1. Does the RCH support individuals in choosing which staff provide their care, for example gender or language spoken?

 Yes [ ]  No [ ]

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5-2. Does the RCH have a complaint/grievance policy for individuals and inform individuals how to file a grievance?

 Yes [ ]  No [ ]

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5-3. Do individuals have opportunities to modify their services or schedules and/or voice

concerns in the manner and timing of their choosing and consistent with their communication abilities and preferences?

Yes [ ]  No [ ]

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[ ]  **Federal Standard 6: Residential Agreement.**  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.

6-1. Does each resident have a lease, residency agreement, admission agreement, or other form of

written residency agreement?

Yes [ ]  No [ ]

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6-2. Are residents informed about how to relocate and request new housing?

Yes [ ]  No [ ]

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6-3. In the case of any possible eviction or involuntary relocation, are there policies and procedures in place to ensure residents have and are informed of eviction protections and the appeals process?

Yes [ ]  No [ ]

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# Condition # 2: RCHs will be required to participate in a 12-month Training Program provided under the guidance of the Department of Social Services

[ ]  Settings Rule Update and Compliance Requirements

[ ]  Department of Public Health: What you need to know about licensure and compliance. See checklist shared here: [Blast-Fax-2022-24-RCH-Licensure-Inspection-Documents.pdf](https://portal.ct.gov/-/media/Departments-and-Agencies/DPH/Facility-Licensing--Investigations/Blast-Faxes/2022/Blast-Fax-2022-24-RCH-Licensure-Inspection-Documents.pdf)

[ ]  Rights of Residents

[ ]  Completing Cost Reports

[ ]  Medicaid Billing

[ ]  Person-Centered Planning

[ ]  Abuse, Neglect & Exploitation

[ ]  Mental Health 101

[ ]  Descalation Techniques

[ ]  Establishing Professional Boundaries

[ ]  Bullying in Congregate Settings

[ ]  Substance Use and Addiction

[ ]  Working with People with Intellectual Challenges

[ ]  Confidentiality and Protecting Health Information

[ ]  Nutrition

[ ]  Dementia 101

[ ]  The Mind/Body Connection

# Condition # 3: RCHs will be required to participate in Annual Training under the guidance of the Department of Social Services. Training will be required for owner/operator and front-line team.

Topics may include:

[ ]  Person-Centered Planning

[ ]  Abuse, Neglect & Exploitation

[ ]  Resident Rights