

Overview and Instructions for Using this Workbook

This workbook contains the following color-coded worksheets:

Gray: Workbook Instructions, Review Tool Guidelines, Overall Summary, and Data Extraction worksheets.

Green: Workbook Set-up.

Orange: HCBS Review Tool.

Guidelines: This sheet contains the guidelines for the HCBS review tool. The guidelines are embedded in a single PDF file. To open the guidelines in PDF, double click the PDF icon.

Workbook Set-up sheet: This worksheet contains information about the LME-MCO, the provider, the review, and the tools used for the review. The information need only be entered one time. Information entered on this worksheet will be automatically entered throughout the workbook where needed (e.g. in the header of the HCBS tool, the Overall Summary, and the Data Extraction worksheet). If changes to this information are needed after the information is entered, simply update the workbook set-up sheet, and the information will be automatically updated throughout the workbook.

HCBS Review Tool: The tool is designed to provide a place to document results for one provider site review. Enter the results for these items in the first column.

Cells for entering results contain drop-down menus to indicate whether an item is "**Met**", "**Not Met**" or "**N/A**". Items that are "**Not Met**" will be displayed in **red font** to make them stand out. Each tool contains columns at the far right and/or rows at the bottom for automatically counting the number of items on the tool that are marked "Met", "Not Met", and "N/A" (not applicable). Results from each section are automatically entered on the "**Overall Summary**" worksheet (explained below).

The HCBS review tool is designed to document results for items and sections reviewed. They do not contain protected health information (PHI) and may be printed and attached to the review report or given to the provider, as appropriate, as part of the supporting documentation.

Overall Summary: This worksheet summarizes the results for all sections in one convenient place. It can be printed and attached to the review report to serve as a handy reference to the provider and reviewer of results and items needing corrective action. In addition to calculating the number and percent met for each item or record reviewed, it calculates overall performance for each individual section of the tool as well as for all sections combined.

Data Extraction: This worksheet is linked to the Workbook Set-up and Overall Summary worksheets and places identifying information and summary results into a single row in a format that will permit the data to be copied and pasted into a separate Excel database. The Excel database may be used by the LME-MCO and DHHS to aggregate and analyze review results for all providers over time and across the catchment area and



DHHS Home and Community Based Services (HCBS) Review Tool Guidelines

REVIEW ITEM WITH SUPPORTING CITATIONS:		REVIEW GUIDELINES:	ADH/ Day Supports	Residential Supports	Supported Employment
<p>The setting is integrated in and supports full access to the greater community (work, live, recreate, and other services). There are opportunities to seek employment and work in competitive integrated settings, engage in community life, and control personal resources, and receive services in the community to the same degree of access as individuals not receiving Medicaid HCBS. (All Wavier Services)</p>					
1a.	Are transportation and other supports provided so people can regularly access public amenities and other transportation resources similar to those used by the community at large?	<ul style="list-style-type: none"> Transportation policy is in place to assure the individuals have access to public or private modes of transportation to access the community, including but not limited to dining, shopping, recreation, hobbies, and religious pursuits. <ul style="list-style-type: none"> Transportation policy sufficiently allows individuals to foster relationships with community members unaffiliated with the setting. Training is provided regarding the use of public transportation, taxicabs, paratransit, or other ride-sharing resources when necessary. Individuals are allowed to obtain drivers licenses, or otherwise access transportation, e.g. calling friends or family to request a ride. 	x	x	x
1b.	Can people regularly interact directly with other members of the community who are not paid to do so?	<ul style="list-style-type: none"> Training is provided on practicing and promoting inclusion to ensure choice is honored in the pursuit of preferred activities (participation in faith-based or community-based activities, for example). The setting provides evidence it affords individuals the same degree of access, as chosen, to the array of community resources/services that are available to individuals in the community that do not receive Medicaid HCBS. <ul style="list-style-type: none"> Established, standard, operating practices that support individuals, to the extent chosen, in interacting freely with and getting to know neighbors and others in the community, beyond those paid to support the individual. 	x	x	x
1c.	Efforts to obtain employment opportunities are pursued that will allow the individual to work alongside those of all abilities.	<ul style="list-style-type: none"> Agreements are made with employers to practice inclusion at their work sites. (Supported Employment) <ul style="list-style-type: none"> Evidence the setting has established standard operating practices to support individuals who want to work by providing them the opportunity and support to do so competitively and in an integrated setting. <ul style="list-style-type: none"> There is evidence that company and job information is presented in a way that supports individual understanding, using the form of communication most appropriate to the individual, e.g., object communication board, augmentative device, or sign language. Evidence wages are competitive, with individuals compensated at or above minimum wage, but not less than the customary wage and level of benefits paid by the employer for the same or similar work performed by individuals without disabilities. (Supported Employment) 	x	x	x
1d.	Setting is in the community among other private residences, and/or retail businesses, is in an appropriate location based on function.	<ul style="list-style-type: none"> Setting resembles others around it and/or location supports the business functions. (i.e. manufacturing park). 		x	x
<p>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. The setting options are identified and documented in the person-centered plan and are based on the individual's needs, preferences, and, for residential settings, resources available for room and board</p>					
2a.	The setting is selected by people from among residential and day options that include generic settings.	<ul style="list-style-type: none"> House rules and rooming policies are presented along with the opportunity to choose residence. (Residential) Policy and procedure reflect process used to establish available options for the provider to offer individuals (property leases, ability to obtain residences in the community). <ul style="list-style-type: none"> Documentation exists that demonstrates the individual was given options available in terms of residence, work setting, community participation, etc. This will include how the information was communicated. Individual PCPs/ISPs reflect the acknowledgement options of community settings were made available to the individual. Provider offers clear and current information to individuals seeking services. 	x	x	x
2b.	Do people choose their rooms (if residence) or the area they work in, etc.?	<ul style="list-style-type: none"> Evidence all Individuals are given a choice of available options regarding where to live/receive services and room availability in the home. Site review indicates individuals know how s/he can request a roommate change. (Residential) Evidence setting offers opportunities for individuals to meet potential housemates and/or roommate before selection of a residence. (Residential) <ul style="list-style-type: none"> Documentation of a process to address any conflicts that arise and presence of mediation strategies to address concerns. Policies indicate and evidence supports individual knows how s/he can request a roommate change. 	x		
<p>Ensures the rights of privacy, dignity and respect, and freedom from coercion and restraint.</p>					
3a.	Setting ensures protection of the individual's rights of privacy, dignity and respect, and freedom from coercion and restraint.	<ul style="list-style-type: none"> Evidence the setting has established, standard operating practices that inform individuals and their Legally Responsible Person (LRP) about their rights and has provided the individual and/or the LRP written notification of these. <ul style="list-style-type: none"> Documentation in the individual's record supports rights are reviewed with individuals and their LRP before services begin, in a manner that supports understanding on the part of the individual and/or the LRP. The setting's policies support individuals in having access to natural or paid supports to co-advocate or advocate for rights of privacy, dignity and respect, and freedom from coercion and restraint. Evidence documentation regarding informed consent is presented at admission, annually and as needed. <ul style="list-style-type: none"> Evidence information is presented in a manner that supports understanding and clearly explains facts, implications, and future consequences to promote informed decision making (consider all informative information used to present information to the individuals/family). Evidence, e.g., in policy manual or certificate of completion on file, staff at the site receive training regarding informed consent. * Evidence of an active and involved client/human rights committee Evidence restrictions or interventions prohibited by Medicaid in institutional settings also are not being used in the setting. 	x	x	x

3b.	Do people have the space and opportunity to speak on the phone, use technology, open and read mail, and visit with others, privately and, where appropriate, overnight? (Residential Only)	<ul style="list-style-type: none"> • Observation indicates the telephone or other technology devices are in a location that has space around it to ensure privacy. (Residential) • Evidence individuals can take phone calls in private away from housemates(s), roommate(s) and staff (e.g., can take cell phone or other communication device to bedroom to conduct a private conversation). (Residential) • Evidence individuals open their own mail and are allowed to read in private. If individuals require assistance with opening and reading mail, that assistance is provided by staff, when asked, and by the person of their choice. (Residential) • Evidence individuals have an area in the home to visit with guests in private, including the individual's bedroom. (Residential) • Access to privacy when desired, with the understanding roommates will need to work together to achieve the desired time for privacy. (Residential) • Evidence individuals at the site have opportunities to be alone when they desire. (Residential) 		x	
3c.	Do people have a place and opportunity to be by themselves during the day? (excludes Supported Employment)	<ul style="list-style-type: none"> • Evidence that the individuals have opportunities to be alone when they desire. (Residential) • Evidence that -individuals at the site have opportunities to "step away" from others when needed/desired (Day Supports). 	x	x	
3d.	Is informed consent obtained prior to implementation of medical or behavioral interventions?	<ul style="list-style-type: none"> • Evidence that informed consent is obtained prior to implementation of medical or behavioral interventions. • Evidence the sites uses processes that involve individuals in discussions related to the need for intrusive medical or behavioral interventions and these interventions are documented in the PCP/ISP. 	x	x	x
3e.	For any restrictions imposed on the person, is there a plan for restoring the right/fading the restriction?	<ul style="list-style-type: none"> • Documentation any restrictions on individual choice are focused on the health and welfare of the individual and the consideration of risk mitigation strategies. • The restriction, if determined necessary and appropriate within the specifications of the HCB Settings Rule, must be documented in the PCP/ISP and the individual must provide informed consent for the restriction. • Documentation includes established time limits for periodic reviews for the restoring the right/fading the restriction not less than annually. • Evidence that site informs individuals of any restriction of rights and the process for restoring the right/reduction of the restriction. • Evidence of an active and involved client/human rights committee. 	x	x	x
3f.	For people using psychotropic medications, have all the less-restrictive interventions been considered and determined to be inappropriate?	<ul style="list-style-type: none"> • Evidence the site, through standard operating practices, addresses medication concerns and reports to appropriate care providers. • Evidence best practices including the use of non-pharmacological intervention are used whenever possible. • Evidence the provider facilitates access to additional supports such as , psychotherapy, psychoeducation, support groups (including for grief/loss/substance use, etc.), family counseling, meaningful day activities, including employment regular exercises and recreation (i.e. linkages to services, supports, etc.). • Evidence that meaningful efforts are made to identify and address underlying causes and triggers for problematic behaviors (i.e. agency's behavior philosophy). 	x	x	Corporate Site Only
3g.	Do people receive the fewest psychotropic medications possible, at the lowest dosage possible?	<ul style="list-style-type: none"> • Evidence the site, through standard operating practices, addresses medication concerns and reports to appropriate care providers. 	x	x	Corporate Site Only
3h.	Do people receive supports and education in understanding one's own health and opportunities to change and improve?	<ul style="list-style-type: none"> • Policies support options to exercise health literacy. 	x	x	Corporate Site Only
Optimizes, but does not regiment, independent initiative, autonomy, and independence in making life choices, including but not limited to, daily activities, physical environment, and with whom to interact.					
4a.	Do people receive only the level of support needed to make their own decisions?	<ul style="list-style-type: none"> • Provider's policies and PCP/ISP reflect individuals receive no more and no less than the supports needed to make their own decisions with respect to daily activities, the physical environment, and with whom to interact. • Provider policies support the exercise of choice and autonomy, e.g., individuals receiving Medicaid HCBS are free to voice their opinions, move about the community, practice their religion, access their money and receive supports they may need. • There is evidence that informal written and oral communication is conducted in a language that helps the individual understand, make, and communicate choices. Examples: plain language materials or information in visual or audio form; extra time to discuss choices; creating lists of pros and cons; role-playing activities to help the person understand choices; presence of a supporter of the individual's choice in important appointments to take notes and help the person remember and discuss options. 	x	x	x
4b.	Do people exercise their rights as citizens to: voice their opinions, vote, and move about the community, associate with others, practice their religion, access their money, make personal decisions, and other rights that are important to them?	<ul style="list-style-type: none"> • Documentation of assistance with registering to vote and with exercising the right to vote, as necessary and to the degree permitted by law. • Policies evidence individuals have the right to take advantage of opportunities for learning, developing skills and independence and have supports, as needed, to take calculated risks. (dignity of risk) 	x	x	x
Individuals are free and supported to control their own schedules and activities as well as have access to food at all times.					
5a.	Do people choose their daily activities, their schedules, and the locations of the activities as opposed to being "told" what they are to do?	<ul style="list-style-type: none"> • Site can document, through established practices, opportunities, as the individual chooses, to hold and participate in neighborhood and community activities to the extent desired, for example: shop, attend religious services, schedule appointments, have lunch with family and friends. • Policies and practices support honoring individual's personal choices in day-to-day activities are reflected and honored in daily/weekly schedules, such the individual's schedule varies from others in the same setting. • Schedules are not posted in common areas. 	x	x	
5b.	Do people receive support needed to make choices about the kinds of work and activities they prefer?	<ul style="list-style-type: none"> • Policies support opportunities for individual choice consistent with choices that are available to those in the community not receiving Medicaid HCBS services, e.g., individuals receiving Medicaid HCBS choose their daily activities and the locations/times these activities will take place and receive supports they may need to do so. • Individuals have access to communication services and supports, based on individual needs and preferences, to support individual initiative, autonomy, and independence in making life choices. • Policies support timely, respectful resolution of any conflicts that arise around individuals' exercise of their right to control their own schedules and activities. 	x	x	x
5c.	Is there evidence of conversations and/or assessments to help identify personal preference for the kind of work and activities people want?	<ul style="list-style-type: none"> • In accordance with PCP/ISP, documentation makes clear individuals engage in activities of their choice, at the time and place of their choice. 	x	x	x
5d.	Do the individuals have meals at the times and places of their choosing?	<ul style="list-style-type: none"> • There is no evidence that provider policies or practices prohibit individuals' access to food at any time. • Review of the site indicates individuals are not required to sit at an assigned seat in the dining area. • Policies support individual requesting an alternative meal or snack, if desired. 	x	x	SE sites may restrict this based on employment site
5e.	Are snacks accessible and available at all times? (Excludes Supported Employment)	<ul style="list-style-type: none"> • There is no evidence provider policies or practices prohibit individuals' access to food at any time. • Policies support individual requesting an alternative meal, if desired. 	x	x	

Facilitates choice regarding services, supports, and who provides them.

6a.	Do people select the services/supports that they receive (generic community services e.g., barber, restaurant, retail stores)? Do people shop, attend religious services, scheduled appointments, have lunch with family and friends, etc., in the community, as the choose?	<ul style="list-style-type: none"> There is no evidence that program policies or practices limit, or are perceived to place limits, on individuals' available choices considering their resources. Documentation supports that individuals are aware of how to make a service request. Documentation in PCP/ISP reflects provider's and care coordinator's respective role in facilitation and supporting choice. Evidence of a communication between provider and care coordinator when individual expresses desire to change service, provider, or living situation. 	x	x	Corporate Site Only
6b.	Do people select the provider from a choice of providers?	<ul style="list-style-type: none"> Documentation supports before making the selection, individuals were given an opportunity to meet staff members. Documentation supports that individuals select the staff who provide services. 	x	x	Corporate Site Only
6c.	Are risks identified and methods for minimizing them addressed?	Documentation of how risks are identified and addressed when presented.	x	x	x

The setting is physically accessible to the individual

7a.	Have modifications been made to promote maximum access and use of physical environment for the person, if needed or requested?	<ul style="list-style-type: none"> Site has a process for individuals to request accommodations for physical accessibility. Site review/documentation indicate that environmental accommodations to support physical accessibility are made with reasonable promptness. Review of rules, policies and procedures supports full access to typical facilities in a home, such as a kitchen with cooking facilities, dining area, laundry, bathroom, media/activity room, and bedroom. Evidence that staff advocate for and with the employee for work-related accommodations and these are provided, as required by the Americans with Disabilities Act. (Supported Employment) <ul style="list-style-type: none"> Review of rules, policies and procedures supports full access in the worksite to those areas used by employees not receiving HCB services. (Supported Employment) Site review indicates the physical environment meets the needs of those individuals who require supports. 	x	x	x
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Residential Setting Only

Individuals have privacy in their sleeping or living unit.

8a.	Can individuals close and lock their bedroom door?	<ul style="list-style-type: none"> Review of staff training requirements indicate staff receive training in human/legal rights, including the individual's right to privacy in their dwelling and right to have a key to their bedroom. 		x	
8b.	Is the furniture arranged as individuals prefers and does the arrangement assure privacy and comfort?	<ul style="list-style-type: none"> Staff provides assistance, as requested, with arrangement of bedroom furniture or negotiating between roommates for arrangement of shared bedroom. 		x	
8c.	Are cameras that are present inside the setting only utilized in relation to the person-centered plan of care?	<ul style="list-style-type: none"> Put N/A if cameras are not used in the setting. Policies for the use of cameras, informed consent regarding cameras. Use of cameras for recreation purposes and as assistive technology for appropriate monitoring purposes are acceptable. Assess for cameras used for surveillance that violate a person's right to privacy. 		x	

The unit or dwelling can be owned, rented, or occupied under a legally enforceable agreement by the individual receiving services and the individual has the same responsibilities and protections

9a.	Do people have the same responsibilities other tenants have under landlord/tenant laws?	<ul style="list-style-type: none"> There is a written agreement between provider and resident to reflect rights, protections and responsibilities of any tenant. Lease, where applicable or written agreement clearly outlines individual's rights and responsibilities with regard to housing. Evidence individuals have been given information, in plain language, which explains how to relocate and request new housing. 		x	
9b.	Are people provided the same protections from eviction other tenants have under landlord/tenant laws?	<ul style="list-style-type: none"> There is a written agreement between provider and resident to reflect rights, protections and responsibilities of any tenant. Site has a procedure for reviewing with an individual his/her rights regarding housing and under what circumstances s/he could be required to relocate. 		x	

Units have entrance doors lockable by the individual with only appropriate staff having keys to doors.

10a.	Each person living in the unit has a key or keys for that unit.	<ul style="list-style-type: none"> Policy and procedure governs issuance or non-issuance of bedroom and house keys or other technology uses to access the unit. Individual is informed as to under what circumstances access by staff/provider may be necessary (included in PCP/ISP). Policy and procedure explaining administration's issuance of keys (other technology) to staff, which staff positions are issued keys (other technology), and responsibilities of key (other technology) holders. Residents are informed of all persons who have keys to the home. Residents are taught to properly use their keys and operate the home's security system. Policy indicates each individual has a key to the residence and to his or her bedroom. If there are circumstances that prevent an individual from having a key to residence, these are documented in the PCP/ISP. 		x	
10b.	Is there evidence efforts are being made to teach how to use a key if someone does not understand how to do it?	<ul style="list-style-type: none"> If an individual does not have a key to the residence, there is evidence that individuals have full access to the residence and methods to make this possible are addressed in the PCP/ISP. 		x	

Individuals sharing units have a choice of roommates in the setting.

11a.	Do people choose their roommates?	<ul style="list-style-type: none"> Policy and procedure reflects process used to establish options available for the provider to offer individuals. Documentation exists that demonstrates the individual was given options as available in terms of residence, work setting, community participation, etc. (This will include how the information was communicated to individuals in order to obtain their preference). Provider reviews with individual the response to any requests made (choice of activity, service, provider, roommate/housemate, etc.), including explaining ramifications and unintended consequences of their decision to assist with making an informed choice. Provider documents choices made by resident whether to have a key, whether to have a roommate (if option is available), and the negotiations between roommates concerning private time for each. 		x	
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Individuals are free to furnish and decorate sleeping and living units.

12a.	Does each person pick the decorative items in their own private bedroom?	<ul style="list-style-type: none"> Staff provides assistance with determining arrangement of bedroom furniture as requested or negotiating between roommates for arrangement of shared bedroom. Preferences stated by residents of décor of common areas is recorded, reviewed, and incorporated as possible. 		x	
12b.	Do people living in the same unit participate in the choices of decorative items in the shared living areas of the unit?	<ul style="list-style-type: none"> Evidence individuals' preferences for décor of common areas and bedrooms are honored and incorporated as feasible into the home. 		x	

Individuals are free to have visitors of their choosing at any time.

13a.	Are people supported in having visitors of their own choosing and to visit others frequently?	<ul style="list-style-type: none"> • Policies support individuals are informed of their right to have visitors of their choice at any time. • Documentation is included in the PCP/ISP concerning any limits on visitation as determined by the plan or other means. • Staff conduct meetings with the individuals to establish agreed-upon rules regarding visitation. • There is no evidence provider policies or practices require restrictions such as posted visiting hours or schedules. 	x		
Any modification of the additional conditions for provider owned or controlled residential setting must be supported by a specific assessed need and justified in the person-centered plan.					
14a.	Modifications noted in ISP.	<ul style="list-style-type: none"> • Any modification for an individual of the additional conditions for provider-owned or controlled residential settings, listed below, is supported by a specific assessed need for an individual and is justified in the PCP/ISP. Each of the following requirements are documented, for any modification, in the PCP/ISP: <ol style="list-style-type: none"> (1) A specific and individualized assessed need is identified. (2) Document notes positive interventions and supports were used prior to any plan modifications. (3) Document notes what less intrusive method of meeting the need have been tried but did not work. (4) Document includes a clear description of the condition/modification that is directly proportional to the specific assessed need. (5) Document indicates regular data collection to support ongoing effectiveness of the intervention. (6) Document includes established time limits for periodic reviews to determine if the modification is still necessary. (7) Document ensures the informed consent of the individual. (8) Document includes an assurance interventions and supports will cause no harm to the individual. • In the case of any restriction/modification of the requirements of the HCBS Settings Rule, review of the PCP/ISP indicates all requirements are documented. Periodic review is not less than annually. 	x		
14b.	Modification noted in ISP is approved by Human Rights Committee.	<ul style="list-style-type: none"> • Minutes of the client/human rights committee indicate any restriction/modification of requirements of the HCBS Settings Rule has been approved by the committee according to the requirements, above. 	x		

Enter the information requested in the yellow highlighted cells in Column B.
 Information entered here will automatically be entered in all applicable worksheets in this workbook.



Workbook Set-up Information

LME/MCO:	EastPointe
PROVIDER NAME:	The Provider Name
FACILITY NAME (Service Site):	XYZ Group Home
LOCATION (Address):	Location
NPI #:	123456789
PROVIDER #:	987654321
MHL #:	MHL 123456
NAME OF REVIEWER(S):	Reviewer1, Reviewer2
BEGIN REVIEW DATE:	2/4/2013
END REVIEW DATE:	2/5/2013
TYPE OF REVIEW:	Supported Employment

Do not leave either date blank. If the review was conducted in a single day, make both dates the same date.



DHHS Home and Community Based Services (HCBS) Review Tool

EastPointe

PROVIDER NAME:		The Provider Name														
FACILITY NAME:		XYZ Group Home														
NAME OF REVIEWER(S):		Reviewer1, Reviewer2														
REVIEW DATE(S):		2/4/2013 to 2/5/2013														
TYPE OF REVIEW:		Supported Employment					ITEM SCORE					SECTION SCORE				
ITEM:	REVIEW ITEM:	FINDING	# MET	% MET	# NOT MET	% NOT MET	# N/A	# MET	# NOT MET	# N/A	% MET	SECTION SCORE				
[Requires 100% across the section]		INTEGRATION														
1a.	Are transportation and other supports provided so people can regularly access public amenities and other transportation resources similar to those used by the community at large?	Met	1	100%	0	0%	0	2	1	1	67%	DID NOT MEET THRESHOLD				
1b.	Can people regularly interact directly with other members of the community who are not paid to do so?	Not Met	0	0%	1	100%	0									
1c.	Efforts to obtain employment opportunities are pursued that will allow the individual to work alongside those of all abilities.	Met	1	100%	0	0%	0									
1d.	Setting is in the community among other private residences, and/or retail businesses, is in an appropriate location based on function.	N/A	0	0%	0	0%	1									
[Requires 100% across the section]		CHOICE OF SETTING														
2a.	The setting is selected by people from among residential and day options that include generic settings	Met	1	100%	0	0%	0	1	1	0	50%	DID NOT MEET THRESHOLD				
2b.	Do people choose their rooms (if residence) or the area they work in, etc.?	Not Met	0	0%	1	100%	0									
[Requires 100% across the section]		HUMAN RIGHTS														
3a.	Settings ensure protection of the individual's rights of privacy, dignity and respect, and freedom from coercion and restraint.	Met	1	100%	0	0%	0	8	0	0	100%	MET THRESHOLD				
3b.	Do people have the space and opportunity to speak on the phone, use technology, open and read mail, and visit with others, privately and, where appropriate, overnight? (Residential Only)	Met	1	100%	0	0%	0									
3c.	Do people have a place and opportunity to be by themselves during the day? (excludes Supported Employment)	Met	1	100%	0	0%	0									
3d.	Is informed consent obtained prior to implementation of intrusive medical or behavioral interventions?	Met	1	100%	0	0%	0									
3e.	For any restrictions imposed on the person, is there a plan for restoring the right/fading the restriction?	Met	1	100%	0	0%	0									
3f.	For people using psychotropic medications, have all the less-restrictive interventions been considered and determined to be inappropriate?	Met	1	100%	0	0%	0									
3g.	Do people receive the fewest psychotropic medications possible, at the lowest dosage possible?	Met	1	100%	0	0%	0									
3h.	Do people receive supports and education in understanding one's own health and opportunities to change and improve?	Met	1	100%	0	0%	0									
[Requires 100% across the section]		INDEPENDENCE & AUTONOMY														
4a.	Do people receive only the level of support needed to make their own decisions?	Met	1	100%	0	0%	0									



DHHS Home and Community Based Services (HCBS) Review Tool

EastPointe

PROVIDER NAME: The Provider Name												
FACILITY NAME: XYZ Group Home												
NAME OF REVIEWER(S): Reviewer1, Reviewer2												
REVIEW DATE(S): 2/4/2013 to 2/5/2013												
TYPE OF REVIEW: Supported Employment		ITEM SCORE					SECTION SCORE					
ITEM:	REVIEW ITEM:	FINDING	# MET	% MET	# NOT MET	% NOT MET	# N/A	# MET	# NOT MET	# N/A	% MET	SECTION SCORE
4b.	Do people exercise their rights as citizens to: voice their opinions, vote, and move about the community, associate with others, practice their religion, access their money, make personal decisions, and other rights that are important to them?	Met	1	100%	0	0%	0	2	0	0	100%	MET THRESHOLD
[Requires 100% across the section]		SCHEDULES & ACTIVITIES										
5a.	Do people choose their daily activities, their schedules, and the locations of the activities as opposed to being "told" what they are to do?	Met	1	100%	0	0%	0	5	0	0	100%	MET THRESHOLD
5b.	Do people receive support needed to make choices about the kinds of work and activities they prefer?	Met	1	100%	0	0%	0					
5c.	Is there evidence of conversations and/or assessments to help identify personal preference for the kind of work and activities people want?	Met	1	100%	0	0%	0					
5d.	Do the individuals have meals at the times and places of their choosing?	Met	1	100%	0	0%	0					
5e.	Are snacks accessible and available at all times? (Excludes Supported Employment)	Met	1	100%	0	0%	0					
[Requires 100% across the section]		SERVICE DECISIONS										
6a.	Do people select the services/supports that they receive (generic community services e.g., barber, restaurant, retail stores). Do people shop, attend religious services, scheduled appointments, have lunch with family and friends, etc., in the community, as the choose?	Not Met	0	0%	1	100%	0	2	1	0	67%	DID NOT MEET THRESHOLD
6b.	Do people select the provider from a choice of providers?	Met	1	100%	0	0%	0					
6c.	Are risks identified and methods for minimizing them addressed?	Met	1	100%	0	0%	0					
[Requires 100% across the section]		PHYSICAL ACCESSIBILITY										
7a.	Have modifications been made to promote maximum access and use of physical environment for the person, if needed or requested?	Met	1	100%	0	0%	0	1	0	0	100%	MET THRESHOLD
Residential Setting Only												
[Requires 100% across the section]		PRIVACY										
8a.	Can individuals close and lock their bedroom door?	Met	1	100%	0	0%	0	3	0	0	100%	MET THRESHOLD
8b.	Is the furniture arranged as individuals prefers and does the arrangement assure privacy and comfort?	Met	1	100%	0	0%	0					
8c.	Are cameras that are present inside the setting only utilized in relation to the person-centered plan of care?	Met	1	100%	0	0%	0					
[Requires 100% across the section]		TENANCY RIGHTS										
9a.	Do people have the same responsibilities other tenants have under landlord/tenant laws?	Met	1	100%	0	0%	0	2	0	0	100%	MET THRESHOLD
9b.	Are people provided the same protections from eviction other tenants have under landlord/tenant laws?	Met	1	100%	0	0%	0					
[Requires 100% across the section]		UNIT ACCESS										
10a.	Each person living in the unit has a key or keys for that unit.	Met	1	100%	0	0%	0					MET THRESHOLD



DHHS Home and Community Based Services (HCBS) Review Tool

EastPointe

PROVIDER NAME:		The Provider Name											
FACILITY NAME:		XYZ Group Home											
NAME OF REVIEWER(S):		Reviewer1, Reviewer2											
REVIEW DATE(S):		2/4/2013 to 2/5/2013											
TYPE OF REVIEW:		Supported Employment					ITEM SCORE					SECTION SCORE	
ITEM:	REVIEW ITEM:	FINDING	# MET	% MET	# NOT MET	% NOT MET	# N/A	# MET	# NOT MET	# N/A	% MET	SECTION SCORE	
10b.	Is there evidence efforts are being made to teach how to use a key if someone does not understand how to do it?	Met	1	100%	0	0%	0	2	0	0	100%	MET THRESHOLD	
[Requires 100% across the section]		CHOICE OF ROOMMATE											
11a.	Do people choose their roommates?	Met	1	100%	0	0%	0	1	0	0	100%	MET THRESHOLD	
[Requires 100% across the section]		FREEDOM TO FURNISH											
12a.	Does each person pick the decorative items in their own private bedroom?	Met	1	100%	0	0%	0	2	0	0	100%	MET THRESHOLD	
12b.	Do people living in the same unit participate in the choices of decorative items in the shared living areas of the unit?	Met	1	100%	0	0%	0						
[Requires 100% across the section]		VISITORS											
13a.	Are people supported in having visitors of their own choosing and to visit others frequently?	Met	1	100%	0	0%	0	1	0	0	100%	MET THRESHOLD	
[Requires 100% across the section]		MODIFICATIONS											
14a.	Modifications noted in ISP.	Not Met	0	0%	1	100%	0	1	1	0	50%	DID NOT MEET THRESHOLD	
14b.	Modification noted in ISP is approved by Human Rights Committee.	Met	1	100%	0	0%	0						
Total Met:		33											
% Met:		89%											
Total Not Met:		4											
% Not Met:		11%											
Total N/A:		1											

COMMENTS:



DHHS Home and Community Based Services (HCBS) Review Summary of Results

EastPointe

PROVIDER NAME: The Provider Name
 FACILITY NAME: XYZ Group Home
 LOCATION: Location
 NPI # / PROVIDER #: 123456789 / 987654321

MHL #: MHL 123456
 TYPE OF REVIEW: Supported Employment
 REVIEW DATE(S): 2/4/2013 to 2/5/2013
 NAME OF REVIEWER(S): Reviewer1, Reviewer2

Overall Summary

Summary Results For All Sections Reviewed

HCBS Review Tool	# Scorable Records / Items	# N/A	# Met	# Not Met	% Met
INTEGRATION	3	1	2	1	66.7%
CHOICE OF SETTING	2	0	1	1	50.0%
HUMAN RIGHTS	8	0	8	0	100.0%
INDEPENDENCE & AUTONOMY	2	0	2	0	100.0%
SCHEDULES & ACTIVITIES	5	0	5	0	100.0%
SERVICE DECISIONS	3	0	2	1	66.7%
PHYSICAL ACCESSIBILITY	1	0	1	0	100.0%
PRIVACY	3	0	3	0	100.0%
TENANCY RIGHTS	2	0	2	0	100.0%
UNIT ACCESS	2	0	2	0	100.0%
CHOICE OF ROOMMATE	1	0	1	0	100.0%
FREEDOM TO FURNISH	2	0	2	0	100.0%
VISITORS	1	0	1	0	100.0%
MODIFICATIONS	1	0	1	0	100.0%
	36	1	33	3	91.7%

# Scorable Records / Items	# N/A	# Met	# Not Met	% Met
36	1	33	3	91.7%

Summary Results For All Items Reviewed

PROVIDER DID NOT MEET THE 100% THRESHOLD

Note:

Scorable records or items do not include those determined to be N/A.

Scorable records or items Met and Overall Results that Met the 100% Threshold are shaded green.

Scorable records or items Not Met and Overall Results that Did Not Meet the 100% Threshold are shaded pink.

Items scored as Not Met may require corrective action as requested by the LME/MCO.

Detailed Results For Each Section

Home and Community Based Services (HCBS) Review

INTEGRATION

- Are transportation and other supports provided so people can regularly access public amenities and other transportation resources similar to those used by the community at large?
- Can people regularly interact directly with other members of the community who are not paid to do so?
- Efforts to obtain employment opportunities are pursued that will allow the individual to work alongside those of all abilities.
- Setting is in the community among other private residences, and/or retail businesses, is in an appropriate location based on function.

# Scorable Items	# N/A	# Met	# Not Met	% Met
1	0	1	0	100%
1	0	0	1	0%
1	0	1	0	100%
0	1	0	0	0%

CHOICE OF SETTING

- The setting is selected by people from among residential and day options that include generic settings
- Do people choose their rooms (if residence) or the area they work in, etc.?

# Scorable Items	# N/A	# Met	# Not Met	% Met
1	0	1	0	100%
1	0	0	1	0%

HUMAN RIGHTS

- Setting ensures protection of the individual's rights of privacy, dignity and respect, and freedom from coercion and restraint.
- Do people have the space and opportunity to speak on the phone, use technology, open and read mail, and visit with others, privately and, where appropriate, overnight? (**Residential Only**)
- Do people have a place and opportunity to be by themselves during the day? (**excludes Supported Employment**)
- Is informed consent obtained prior to implementation of medical or behavioral interventions?
- For any restrictions imposed on the person, is there a plan for restoring the right/fading the restriction?
- For people using psychotropic medications, have all the less-restrictive interventions been considered and determined to be inappropriate?
- Do people receive the fewest psychotropic medications possible, at the lowest dosage possible?
- Do people receive supports and education in understanding one's own health and opportunities to change and improve?

# Scorable Items	# N/A	# Met	# Not Met	% Met
1	0	1	0	100%
1	0	1	0	100%
1	0	1	0	100%
1	0	1	0	100%
1	0	1	0	100%
1	0	1	0	100%
1	0	1	0	100%

INDEPENDENCE & AUTONOMY

- Do people receive only the level of support needed to make their own decisions?
- Do people exercise their rights as citizens to: voice their opinions, vote, and move about the community, associate with others, practice their religion, access their money, make personal decisions, and other rights that are important to them?

# Scorable Items	# N/A	# Met	# Not Met	% Met
1	0	1	0	100%
1	0	1	0	100%



DHHS Home and Community Based Services (HCBS) Review Summary of Results

EastPointe

PROVIDER NAME: The Provider Name
 FACILITY NAME: XYZ Group Home
 LOCATION: Location
 NPI # / PROVIDER #: 123456789 / 987654321

MHL #: MHL 123456
 TYPE OF REVIEW: Supported Employment
 REVIEW DATE(S): 2/4/2013 to 2/5/2013
 NAME OF REVIEWER(S): Reviewer1, Reviewer2

SCHEDULES & ACTIVITIES

- 5a. Do people choose their daily activities, their schedules, and the locations of the activities as opposed to being "told" what they are to do?
- 5b. Do people receive support needed to make choices about the kinds of work and activities they prefer?
- 5c. Is there evidence of conversations and/or assessments to help identify personal preference for the kind of work and activities people want?
- 5d. Do the individuals have meals at the times and places of their choosing?
- 5e. Are snacks accessible and available at all times? (Excludes Supported Employment)

# Scorable Items	# N/A	# Met	# Not Met	% Met
1	0	1	0	100%
1	0	1	0	100%
1	0	1	0	100%
1	0	1	0	100%
1	0	1	0	100%

SERVICE DECISIONS

- Do people select the services/supports that they receive (generic community services e.g., barber, restaurant, etc.) Do people shop, attend religious services, scheduled appointments, have lunch with family and friends, etc., in the community, as the choose?
- 6a. Do people select the provider from a choice of providers?
- 6c. Are risks identified and methods for minimizing them addressed?

# Scorable Items	# N/A	# Met	# Not Met	% Met
1	0	0	1	0%
1	0	1	0	100%
1	0	1	0	100%

PHYSICAL ACCESSIBILITY

- 7a. Have modifications been made to promote maximum access and use of physical environment for the person, if needed or requested?

# Scorable Items	# N/A	# Met	# Not Met	% Met
1	0	1	0	100%

Residential Setting

PRIVACY

- 8a. Can the individual close and lock their bedroom door?
- 8b. Is the furniture arranged as the individual prefers and does the arrangement assure privacy and comfort?
- 8c. Are cameras that are present inside the setting only utilized in relation to the person-centered plan of care?

# Scorable Items	# N/A	# Met	# Not Met	% Met
1	0	1	0	100%
1	0	1	0	100%
1	0	1	0	100%

TENANCY RIGHTS

- 9a. Do people have the same responsibilities other tenants have under landlord/tenant laws?
- 9b. Are people provided the same protections from eviction other tenants have under landlord/tenant laws?

# Scorable Items	# N/A	# Met	# Not Met	% Met
1	0	1	0	100%
1	0	1	0	100%

UNIT ACCESS

- 10a. Each person living in the unit has a key or keys for that unit.
- 10b. Is there evidence that efforts are being made to teach use of a key to anyone who does not understand how to do this?

# Scorable Items	# N/A	# Met	# Not Met	% Met
1	0	1	0	100%
1	0	1	0	100%

CHOICE OF ROOMMATE

- 11a. Do people choose their roommates?

# Scorable Items	# N/A	# Met	# Not Met	% Met
1	0	1	0	100%

FREEDOM TO FURNISH

- 12a. Does each person pick the decorative items in their own private bedroom?
- 12b. Do people living in the same unit participate in the choices of decorative items in the shared living areas of the unit?

# Scorable Items	# N/A	# Met	# Not Met	% Met
1	0	1	0	100%
1	0	1	0	100%

VISITORS

- 13a. Are people supported in having visitors of their own choosing and to visit others frequently?

# Scorable Items	# N/A	# Met	# Not Met	% Met
1	0	1	0	100%

MODIFICATIONS

- 14a. Modifications noted in ISP.
- 14b. Modification noted in ISP approved by Human Rights Committee.

# Scorable Items	# N/A	# Met	# Not Met	% Met
1	0	0	1	0%
1	0	1	0	100%

TOTAL

37	1	33	4	89.2%
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Copy the provider's review results from row 8 of this worksheet, and using the paste special command, paste the values into the DHHS HCBS Review Database

Copy the provider's review results from row 8 of this worksheet, and using the paste special command, paste the values into the DHHS HCBS Review Database

Copy the provider's review results from row 8 of this worksheet, and using the paste special command, paste the values into the DHHS HCBS Review Database

DHHS Home and Community Based Services (HCBS) Review Tool Summary Results

DHHS Home and Community Based Services (HCBS) Review Tool Summary Results

DHHS Home and Community Based Services (HCBS) Review Tool Summary Results

LME-MCO	Provider Name	Facility Name (Service Site)	Location (Address)	NPI	Provider #	MHL #	Begin Review Date	End Review Date	Type of Review	INTEGRATION				CHOICE OF SETTING				HUMAN RIGHTS				INDEPENDENCE & AUTONOMY				SCHEDULES & ACTIVITIES				SERVICE DECISIONS				PHYSIC	
										# Scorable Items & Records	# N/A	# Met	# Not Met	% Met	# Scorable Items & Records	# N/A	# Met	# Not Met	% Met	# Scorable Items & Records	# N/A	# Met	# Not Met	% Met	# Scorable Items & Records	# N/A	# Met	# Not Met	% Met	# Scorable Items & Records	# N/A	# Met	# Not Met	% Met	# Scorable Items & Records
EastPointe	The Provider Name	XYZ Group Home	Location	123456789	987654321	MHL 123456	2/4/2013	2/5/2013	supported Employme	3	1	2	1	66.7%	2	1	1	50.0%	8	8	100.0%	2	2	100.0%	5	5	100.0%	3	2	1	66.7%	1			

This worksheet is linked to the Workbook Set-up and Overall Summary worksheets and places summary results into a single row in a format that will permit the data to be copied and pasted into an Excel database. The Excel database will be used by the LME-MCO and DHHS to aggregate and analyze review results for all providers within the catchment area and across the state.

